

WHAT CAN I DO TO COPE WITH CONFUSION AND HALLUCINATIONS?

A combination of hallucinations and confusion occurs in about 20% of patients with Parkinson's. These symptoms are two of the major causes of long-term institutional placement in Parkinson's. Some patients may see people in the house or other objects when they do not exist. Most of these hallucinations are non-frightening, however they may make the patients feel helpless. Some of the medications used to treat Parkinson's may cause hallucinations, therefore you should discuss with your physician who may modify your treatment in order to minimize these symptoms. Confusion and hallucinations may limit the choice of medications used for treatment.

Visual hallucinations are more common when you are in an unfamiliar setting. If you have been recently having trouble with hallucinations, you should try to stay in locations you are accustomed to. Sometimes there may just be a shadow that you mistakenly recognized as something else.

Lights should be turned on in order to reduce these shadows at night. Adequate fluid intake and nutrition, improving night time sleep and repeated orientation is always helpful.

If you are a carepartner, you have to realize that a hallucination may seem very real to the patient in question. If the patient does not listen to reason, then it may be better not to dispute it. So don't argue or reinforce them. However, if the patient does get disturbed and becomes violent, you should call for assistance and do your best to avert serious injury. If needed, you should call 911.



DID YOU KNOW?

The number of Parkinson's patients will double by 2031. Millions of Parkinson's patients around the world are suffering from poverty and...

- Cannot afford to buy their medications
- Cannot afford to purchase a cane, walker, or a wheelchair
- Cannot obtain educational literature about Parkinson's in their language
- Are not able to afford consulting a neurologist and remain undiagnosed and untreated

OUR UNIQUE SERVICES

World Parkinson's Program is the only organization which provides the following unique services to Parkinson's patients around the world:

- Parkinson's medications to those patients who can't afford to buy them
- Canes, walkers & wheelchairs to prevent falls
- Parkinson's educational brochures in many languages
- Free electronic educational newsletter
- Chapters of World Parkinson's Program in various parts of the world

JOIN THE FIGHT AGAINST PARKINSON'S

TO DONATE, VISIT PDPROGRAM.ORG

This information is not a substitute of medical advice. Consult your Physician before applying this information.

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Frequently asked questions about

PARKINSON'S DISEASE & EMOTIONS



ENGLISH - 11



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"Those who fight Parkinson's with knowledge always find solutions"- Dr. Rana

Parkinson's disease is a neurodegenerative condition characterized by tremors, slowness of movements, stiffness, and balance problems. In addition, Parkinson's has many non-motor symptoms such as memory or cognitive issues, speech and swallowing problems, depression, and sleep difficulties. It affects almost 10 million individuals around the world.

WHAT ARE SOME OF THE EMOTIONAL ISSUES RELATED TO PARKINSON'S?

Parkinson's is a progressive disease and some of the symptoms may have an effect on your emotions. You may experience symptoms of depression, memory and cognitive problems, confusion and hallucinations.

HOW COMMON IS DEPRESSION IN PARKINSON'S?

Depression is more common in patients with chronic diseases such as Parkinson's. Almost half the patients with Parkinson's may experience depression at some time during their illness.

WHAT ARE SOME OF THE SYMPTOMS OF DEPRESSION?

Symptoms of depression may go unnoticed and remain untreated. You should inform your healthcare team if you feel that you may be suffering from depression. Some of the symptoms of depression may include feeling sad, lack of interest, feeling of worthlessness or guilt, fatigue or lack of energy, change in appetite, weight and sleep or mood pattern.

WHAT IS THE CAUSE OF DEPRESSION?

There are a number of factors that can be related to depression such as family history of depression, being elderly, experiencing difficult life events and stress. Parkinson's generally affects an older age group which may be more vulnerable to depression because of events like retirement and passing away of friends and family. Deficiencies of certain chemicals such as serotonin and norepinephrine from the brain may play a role in causing depression.

HOW CAN I DEAL WITH DEPRESSION?

If you are going through a difficult time, try to detach yourself from the situation if you can. You should try to do something you enjoy and make you feel better about yourself. If the stress is from an ongoing situation, you should first let others know about it. In particular, you should come up with a way of minimizing the impact of the situation on your life.

Regular exercise is a great way to deal with depression, and it will also help your Parkinson's symptoms. You should avoid alcohol related products or take drugs that were not prescribed. Medical treatment of depression is often long-term. There are many drugs that can be used to treat depression and you should talk to your physician about this.

Anxiety or panic attacks are reported by a significant number of patients with Parkinson's disease. Patients may complain of palpitations, dizziness, shortness of breath, episodes of sweating, or a feeling of passing out. These episodes are very frightening to the carepartner and may make them feel helpless.

If the anxiety is mild, reassurance may be sufficient. Slow deep breathing might be helpful. Significant anxiety and panic attacks should be assessed by a psychiatrist. Usually pharmacological treatment with medication is helpful.

HOW CAN I MANAGE MEMORY AND COGNITIVE PROBLEMS?

Memory problems and cognitive dysfunction are associated with Parkinson's and can be very bothersome. In the beginning, memory problems may be mild and some individuals may attribute this to aging. However, during the course of Parkinson's disease, 40% of patients may develop dementia. You should discuss this with your physician who may start you on medications if required after further testing. You can practice and plan ahead in order to minimize it. If you need to remember something, you should try and concentrate on actually making a memory, try to picture it in your mind and relate it to something important to you. Try not to be tense when trying to remember something as you will have an easier time recalling memories if relaxed.

You should stay positive. If you keep reminding yourself that you have a bad memory, you are more likely to forget. A notepad can be very handy and you should use it to write down anything you may forget. For upcoming events and appointments, use a calendar to help yourself keep track of them. Another helpful tip is to build routines. Make an effort to always place things where they should be, so it will be easier for you to locate them later on.