



THE PADRECC POST

WINTER 2009

THE PHILADELPHIA VA PARKINSON'S DISEASE RESEARCH, EDUCATION AND CLINICAL CENTER

Pain and Parkinson's Disease

By Lisette Bunting-Perry, MScN, RN, Keith Robinson, MD, and Nancy Wiedemer, CRNP

Recent research estimates up to 66% of patients with PD experience persistent pain...

Pain is a universal experience and is part of normal life. When we stub our toe or cut our finger, we respond with withdrawing the offended body part, experiencing a temporary pain or discomfort that resolves in a short period of time. Unfortunately, pain can become an abnormal part of life when it is persistent, interfering with daily activity and restricting mobility.

Persistent pain, also referred to as chronic pain, is prevalent among individuals living with PD. Recent research estimates up to 66% of patients with PD experience persistent pain, and 60% of those experiencing pain relate their symptoms to PD. PD patients often report pain as "disabling" and more troublesome than the motor features of the disease. Pain symptoms are described as "overwhelming," driving behavior in an attempt to stop the pain. Several researchers suggest pain symptoms can present as a clinical symptom prior to the diagnosis of PD, most commonly a stiff painful shoulder.

There has been little research exploring the cause and treatment of painful symptoms in patients with PD, leaving clinicians with empiric treatment options to assist in managing pain in this complex disease. In assessing pain in PD, there are five categories to assist in differentiating pain symptoms (Lee et al, 2006) that may guide clinical treatment:

- Pain related to Idiopathic PD
-Examples: Tremor, rigidity, freezing of gait, dystonia
- Pain related to PD treatment:
-Example: On/off fluctuations, dyskinesia, dystonia (off/on fluctuations)
- Pain indirectly related to PD
-Examples: Falls, poor posture
- Pain unrelated to PD
-Examples: Manifestations of degenerative joint disease such as spinal stenosis or neuropathy from diabetes or other causes
- Other / Multiple causes

The first step in pain management is to assess the location, severity, and intensity of pain. Pain is a subjective report – pain is whatever the patient tells us it is. In describing your pain to a health care provider, it is important to report where the pain is located; is the pain consistent or does it fluctuate throughout the day; how severe is the pain; does it move to different locations; and what has relieved your pain (medications, exercise, heat or cold applications, lotions, rubbing, or rest). Tell your provider how the pain affects your daily life, sleep, mood, and

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PADRECC Launches NEW Exercise Program

Heidi Watson, RN and Eileen Hummel, RN

It's long been known that exercise is beneficial for all people to maintain good health. People with Parkinson's disease can especially reap benefits from exercise as it contributes not only to good health, but also to balance, strength, endurance, and flexibility. In addition it can improve posture, mood, and constipation which are particularly areas of concern with people with Parkinson's disease.

Two forms of exercise that have become increasingly popular in the last 20 years are yoga and Pilates. And, the unique aspect of Yoga and Pilates is that it can be modified in order to be enjoyed by people of all ages and levels of fitness. The goal of yoga is to balance body and

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PADRECC Launches NEW Exercise Program

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mind through controlled breathing, mental focus and a specific series of postures. Pilates combines the mind-body connection with physical fitness and strengthening through skilled movements.

The PADRECC offered the first series of exercise classes for our patients and caregivers during the month of January. We hope to hold a 2nd series of classes later this year and will send out notices when this will occur. We hope you will join us in the future!

Here is a sample of relaxation exercises that you can do in your home. You can do these right now in the comforts of your home while sitting in a chair- so there are no excuses!!!

Prepare by slowly deep breathing and counting to ten as you inhale. Get fresh air to your brain.

1. Slowly raise both hands into the air and hold for the count of ten.
2. Take a deep breath while thinking of sunshine on your face.
3. Look up, look to the right and left and look down for ten seconds each to stretch your neck muscles.
4. Now extend your arms out in front of you and make a fist. Release the fist into straight fingers. Do this ten times slowly.
5. Take hands and face them palms up and then palms down slowly ten times. You can feel your hands and wrists stretch.
6. Now gently touch each finger to the thumb on both hands at the same time if you are able. Do this ten times to stretch your fingers.
7. Slowly do wrist circles inward and outward to the count of ten for each. Release the tension.
8. Take your hands and touch each shoulder at the same time. Slowly up and down ten times.
9. Take a deep breath and smile.
10. Put hands in front of you as if praying. Close your eyes and clear your mind for one minute.

Exercises adapted from: <http://www.morningstarportal.com/olderpeopleyoga.html> ■

Pain and Parkinson's Disease

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relationships with others. Pain severity can be rated on a scale from zero (no pain) to ten (pain as worse as you can imagine).

Persistent pain, if left untreated, can become a significant problem. By discussing pain with your health care provider, you have the opportunity to improve your quality of life through effective pain management. For some PD patients, pain can be managed by optimizing PD therapy to decrease dyskinesias, tremors, dystonia, and reduce "off" episodes.

If pain is related to osteoarthritis or other musculoskeletal diseases, which are common in older adults, using over the counter medications, such as acetaminophen and ibuprofen may be beneficial. Developing skills in reducing falls and modifying your home to prevent tripping hazards are key elements to reducing injury that can result in acute pain. Exercise to enhance flexibility to strengthen muscles with gait training is also important in reducing the occurrence of painful symptoms.

If pain symptoms persist despite attempts to manage pain, a referral to a pain specialist may assist in finding new treatment options to improve the quality of your life. Remember, pain is whatever you say it is, and very common in individuals with PD. ■



Upcoming Events

PD 101

April 1st, 2009, 10am-12pm in the 4th Floor PADRECC Conference Room.

This program is for newly diagnosed patients and/or new patients to the PADRECC clinic. The latest information on Parkinson's disease and treatment is provided as well as an opportunity to meet the PADRECC clinical team.

Patient & Caregiver Support Group Meetings

Will meet the 1st Monday of each month at 1:30pm starting April 6, 2009 in 4th Floor PADRECC Conference Room.

*This group is for patients who are diagnosed with Parkinson's disease or Parkinsonism and their caregivers.

Tele-Support Group for Dementia Caregivers

The last Wednesday of every month from 1:30pm-2:30pm starting April 29th.

Dial 1-800-767-1750 and when prompted enter code #53860

*This group is for dementia caregivers. The goal of this program is to provide guidance, resources, and support to busy caregivers in a convenient and stress-free manner.

2009 Walk for Parkinson's

This event is being held on April 18th at the Philadelphia Art Museum Area. Please contact The Parkinson's Council for further information on date and time. 610-668-4292

2009 Jane Wright Conference

Please contact The Parkinson's Council for further information on date and time. 610-668-4292

The PADRECC would like to thank all of those who made charitable donations on behalf of a loved one followed at the Philadelphia VA PADRECC. The donations are used to support our patient and caregiver education initiatives.

What is Neuropsychological Testing?

Paul J. Moberg, Ph.D., ABPP/CN

As a clinical neuropsychologist, I am frequently asked by patients and their families, "What is this testing all about?" In the following text, I list a number of commonly asked questions concerning neuropsychological testing in an effort to show how this procedure can help contribute to your care.

What is neuropsychological testing?

Neuropsychological measures are special standardized tests designed to tap various function of the brain. This testing is usually performed by a clinical psychologist with specialty training in brain and behavior relationships. A neuropsychological assessment is designed to objectively measure the various functions of the brain and to help with diagnosis and treatment.

When is testing appropriate?

Your neurologist may recommend a neuropsychological evaluation to help them understand how the different parts of your brain are working. Testing might be appropriate if a person shows changes in concentration, organization, reasoning, memory, language, perception, coordination, or personality. While these changes in thinking and emotion can be caused by Parkinson's disease, they can also be due to other medical, neurological, psychological, or genetic causes. Testing can be helpful in understanding your specific situation.

What do the tests measure?

Most testing done in the PADRECC clinic is a brief 45-50 minute screen for any potential problems in thinking and memory. Based on the results of this screening, or in more complex cases, additional testing might be required. The time required depends on the problem being assessed. A typical neuropsychological evaluation will often probe the following areas of cognitive function:

- General intellectual functioning
- Attention and concentration
- Problem-solving and reasoning skills
- Learning and memory
- Language
- Visual perception
- Motor and sensory skills
- Mood and personality

Your test scores are compared to large groups of healthy people similar to you in age, education and other important characteristics. By comparing you to other

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healthy people, the neuropsychologist can say whether your test score falls above or below what is normally expected. In essence, your strengths and weaknesses are assessed.

What should I expect on the day of testing?

When you come in for testing, the neuropsychologist will first ask you some questions about your symptoms and concerns as well as ask you about your general medical history. The actual neuropsychological testing involves taking paper-and-pencil or computerized tests and answering questions. While some of these tests will seem easy to you, others may be more difficult. It is important to try your hardest so the neuropsychologist gets an accurate picture of your abilities. When coming in for testing it is also important to bring eyeglasses or hearing aids if you need them. In general, most people find the testing to be interesting.

What do these test scores tell me?

The results of testing can help provide you with specific information concerning your cognitive strengths and weaknesses. The neuropsychologist can help you understand

whether these changes are the result of aging or other factors as well as give you a sense of the scope and magnitude of any cognitive problems. The test results can also be used to help differentiate among illnesses, which is important because appropriate treatment depends on accurate diagnosis. Your neurologist will use this information along with other medical and neurological information to come to the most accurate diagnosis possible. The results of a neuropsychological exam can also help shed light on whether a person has sufficient ability to drive an automobile safely, manage their legal and financial affairs, participate in medical and legal decision making, live independently or with supervision and gauge their ability to return to work or school. These tests are also often used to assess whether a surgical intervention such as deep brain stimulation is appropriate for a person. On occasion, testing is used to establish a “baseline,” or document a person’s skills before there is any problem. By doing this, the neuropsychologist can measure any later changes due to illness more objectively. Overall, the results of neuropsychological testing can help your doctors understand what problems you may have in everyday life. This information can help guide planning for assistance or treatment. ■

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