



DOCTOR'S ALERT!

Impulse Control Disorders

Serious behavioural disturbance can be a side effect of Parkinson's medication.

Certain Parkinson's disease medications such as dopamine agonists and even levodopa may result in loss of impulse control and disinhibition, leading to the following alarming behaviours:

- ▶ Pathological gambling (casinos, lotteries, internet, etc.)
- ▶ Hypersexuality (intrusive sexual thoughts, urges or remarks, inappropriate or offensive behaviours)
- ▶ Impulsivity
- ▶ Compulsive activities (shopping, overeating, internet use)
- ▶ Preoccupation with a behaviour or mood state
- ▶ Overuse of medications (inappropriate and excessive use of anti-parkinson medications, tolerance and psychological dependence)

Affected patients who suffer with Parkinson's may not be aware that such inappropriate behaviour is potentially disastrous. Ask directly if there are any problems.

The Pacific Parkinson's Research Centre, at UBC, advises as follows:

- ▶ Treatment for these risk-taking behaviours will involve medication adjustments and counselling.
- ▶ Treatment usually begins with a reduction of dopamine agonist medication. All medication adjustments should be initiated by a physician offering sub specialized care, as Parkinson's may deteriorate.

A diagnosis of Parkinson's changes the lives of individuals and their families forever!

If you have patients with Parkinson's, refer them to us. We can help.

Our services include:

- ▶ Counselling at PSBC office or by phone
- ▶ *Viewpoints*, quarterly 16-page newsletter with up-to-date information on scientific research, medication, caregiving, nutrition and other relevant topics
- ▶ Educational conferences/workshops throughout BC
- ▶ Information pamphlets
- ▶ Lending library - books, dvds
- ▶ Toll free information and support line - 1 800 668 3330
- ▶ Assistance to more than 40 support groups province-wide
- ▶ Advocacy for improved healthcare and access to medications
- ▶ Partnership with Pacific Parkinson's Research Centre at UBC
- ▶ Workshops and training for healthcare professionals

Physician Fact Sheet

How Prevalent is Parkinson's Disease?

- ▶ 7,000 individuals in British Columbia (100,000 in Canada)
- ▶ 1 million in the US (6.3 million worldwide)
- ▶ The average age of onset is 60, but it also affects people as young as 25 to 40
- ▶ The numbers continue to grow as the population ages

Cardinal Symptoms

- ▶ **Resting Tremor** – hands, feet or jaw
- ▶ **Rigidity**
- ▶ **Akinesia/Bradykinesia** – slowness of all movements, including walking
- ▶ **Postural Instability** – occurs in later stages of disease

Secondary Symptoms

- ▶ **Depression/ Anxiety** – up to 40-50% of patients
- ▶ **Increased or Decreased Liability**
- ▶ **Disinhibition** – loss of impulse control commonly results in gambling and sexual preoccupation
- ▶ **Cognitive Disturbance** – attention, speed of mental processing, executive function, memory deficits, language abnormalities, visuospatial difficulties
- ▶ **Dementia** – a core feature of Dementia with Lewy Bodies is cognitive fluctuation
- ▶ **Dysarthria**
- ▶ **Dysphagia** – watch for cough during eating
- ▶ **Sleep Disorders** – REM sleep behaviour disorder, insomnia, nighttime hallucinations, excessive daytime sleepiness
- ▶ **Gait Difficulties** – start hesitation, freezing, shuffling, festinating gait, falls
- ▶ **Pain, Tingling or Numbness**
- ▶ **Orthostatic Hypotension** – check BP lying and standing
- ▶ **Neurogenic Bladder and Sexual Dysfunction**
- ▶ **Constipation** – 50% of patients experience cramps and/or constipation
- ▶ **Dandruff or Oily Skin**
- ▶ **Drooling**
- ▶ **Sweating**

Diagnosis

- ▶ **Idiopathic Parkinson's** – unilateral onset, resting tremor, and good response to treatment.
- ▶ **Atypical Parkinson's** – about 20% postural instability and early falls, oculomotor findings, postural hypotension, bladder dysfunction, absence of resting tremor, and sexual dysfunction.
- ▶ **Drug Induced Parkinsonism** – common causes include: neuroleptics and metoclopramide. Uncommon causes include demerol (acute response), valproate, SSRI's (low-risk, watch for motor worsening).

Complications and/or Side Effects

- ▶ **Motor Fluctuations** – wearing off – shortening of drug benefit period, or sudden unpredictable shifts between under and overtreated state. Off period symptoms may include: pain, numbness, abdominal pain, restless legs, sweating, urinary frequency, depression and freezing (sudden akinesia in legs, i.e. in doorways).
- ▶ **Dyskinesias and Dystonia** – may be peak dose, diphasic, or off period dyskinesias with dystonia.
- ▶ **Drug-induced Confusion and Hallucinations** – most common in late-stage. This is often a treatment-limiting problem. First signs may include: agitation during sleep, vivid dreams and nightmares.
- ▶ **Falls** – major problem that needs careful review. Watch for osteoporosis. May be related to freezing, orthostatic hypotension, visual difficulties, sensory loss, weakness, medical causes or environmental problems.

For more information

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