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Parkinson's Disease

Patient name: _____ Admission: _____

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- I. **The client/caregiver can define Parkinson's disease.**
 - A. It is a chronic, progressive central nervous system disorder caused by a defect in the cells of the brain that produce dopamine.
 - B. Dopamine is a chemical substance that enables nerve cells to send messages to other nerve cells.
 - C. It affects the voluntary muscles causing difficulty with movement and posture.
 - D. Emotional stress, infection, overwork, and exposure to cold can make symptoms worse.

- II. **The client/caregiver can list possible risk factors.**
 - A. Carbon monoxide and manganese poisoning
 - B. Encephalitis
 - C. Positive family history
 - D. Tumors of the midbrain
 - E. Men more likely to have Parkinson's than women
 - F. Exposure to pesticides and herbicides

- III. **The client/caregiver can recognize signs and symptoms, which usually begin slowly on one side.**
 - A. Muscle rigidity and weakness
 - B. Tremors that decrease on purposeful movements
 - C. Slowed movements
 - D. Rigid muscles, which are most often seen in limbs and neck and create a mask-like facial expression
 - E. Loss of automatic movements like blinking, smiling, and swinging arms when walking
 - F. Impaired balance
 - G. Shuffling gait and stooped posture
 - H. Slow, soft, and possibly mumbling speech
 - I. Difficulty swallowing
 - J. Dementia, including memory loss, impaired judgment, and personality changes

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- IV. **The client/caregiver can list measures to manage disease.**
 - A. Activity measures
 - 1. Exercise daily with regular rest periods. Pace yourself.
 - 2. Pick time to exercise when medication is working well.
 - 3. Stretch before and after exercise to prevent stiffness and improve flexibility.
 - 4. Evaluate home environment for potential dangers.
 - 5. Wear good pair of walking shoes, not running shoes.
 - 6. Practice taking long steps, and stand up straight with your head over your hips and feet 8 to 10 inches apart.
 - 7. Advise to use cane or other assistive device for help with balance.
 - 8. Keep appointments for therapy. Ask physician or physical therapist about exercises that improve balance (especially tai chi).
 - B. Measures to help with speech
 - 1. Do speech therapy as indicated.
 - 2. Face the person you are talking to.
 - 3. Deliberately speak louder than you think is necessary.
 - 4. Practice reading or reciting out loud, focusing on your breathing.
 - 5. Speak for yourself—do not let others speak for you.
 - C. Measures to help nutrition
 - 1. Eat small, frequent meals to prevent exhaustion.
 - 2. Eat a high-calorie diet to prevent weight loss.
 - 3. Eat a high-fiber diet to prevent constipation. Eat plenty of fruits, vegetables, and whole grains to boost fiber content.
 - 4. If using fiber supplement, be sure to start gradually and drink plenty of fluids (up to 2,000 ml per day).
 - 5. Avoid caffeine.

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- D. Measures to help with dressing
 1. Allow plenty of time to dress.
 2. Lay clothes nearby.
 3. Use clothes that can be slipped on easily (sweat pants, dresses, or pants with elastic waistbands).
 4. Wear clothes and shoes with fabric fasteners (Velcro, etc.) or replace buttons with fabric fasteners.
 - E. Build and maintain support system.
 - F. Engage in social and diversional activities to promote emotional and physical well-being.
 - G. Minimize work-related stress. The Americans with Disabilities Act requires your employer to make reasonable accommodations.
 - H. Keep follow-up appointments with physician.
 - I. Medication considerations
 1. Take as ordered.
 2. Schedule taking medications to achieve peak effect when mobility needed.
 3. Use of chewing gum or eating hard candy to ease mouth dryness (possible side effect of medication).
 - J. Wear a medical alert bracelet.
- V. **The client/caregiver is aware of possible complications.**
- A. Injury from falls
 - B. Urinary problems
 - C. Constipation
 - D. Depression
 - E. Sleep disorders
 - F. Sexual dysfunction
 - G. Medication to treat Parkinson's may cause side effects:
 - Involuntary twitching or jerking movements of arms and legs
 - Hallucinations

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- Sleepiness
- Orthostatic hypotension (drop in blood pressure when standing up)

RESOURCES

Parkinson's Disease Foundation
www.pdf.org

American Parkinson Disease Association
www.apdaparkinson.org

National Parkinson Foundation
www.parkinson.org

National Institute of Neurological Disorders and Stroke

Local support groups

Counseling/clergy

Americans with Disabilities Act
800-514-0301
www.usdoj.gov/crt/ada/adahom1.htm

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