

Parkinson's Disease

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October 2014

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Jason Ovens
Head of Library & Knowledge Services

Title: Systematic Review of Traditional Chinese Medicine for Depression in Parkinson's Disease.

Citation: American Journal of Chinese Medicine, 01 October 2014, vol./is. 42/5(1035-1051), 0192415X

Author(s): Zhang, Yi, Wang, Zhen-Zhen, Sun, Hong-Mei, Li, Ping, Li, Yun-Feng, Chen, Nai-Hong

Abstract: Depression is the most common non-motor symptom of Parkinson's disease (PD). Recent clinical trials have evaluated the effectiveness of traditional Chinese medicine (TCM) in the treatment of depression in PD (dPD). However, the results are conflicting rather than conclusive. To investigate the effectiveness of TCM for the treatment of dPD, a systematic review was conducted. Literature searches and collections were performed to identify studies addressing the treatment of TCM for dPD. The methodological quality and risk of bias in all studies included were evaluated. Weighted mean difference (WMD) with 95% confidence interval (CI) was used as the effect measure. Finally, a total of 10 studies involving 582 patients were identified. The pooled results revealed that TCM combined with conventional drugs significantly improved the total scores of the unified Parkinson's disease rating scale (WMD = -7.35, 95% CI: -11.24 to -3.47) and the score of the Hamilton rating scale for depression (HAM-D) (WMD = -4.19, 95% CI: -5.14 to -3.24) compared with conventional drug, respectively. Conclusively, there is evidence that TCM may be beneficial to the treatment of dPD in spite of the methodological weakness of the included studies.

Title: Moderate evidence exists for occupational therapy-related interventions for people with Parkinson's disease in physical activity training, environmental cues and individualised programmes promoting personal control and quality of life.

Citation: Australian Occupational Therapy Journal, 01 August 2014, vol./is. 61/4(287-288), 00450766

Author(s): Liddle, Jacki, Eagles, Ros

Title: Quality-of-life of patients with Parkinson's disease.

Citation: Brain Injury, 01 September 2014, vol./is. 28/10(1342-1352), 02699052

Author(s): Dauwese, Linda, Hendrikx, Annette, Schipper, Karen, Struiksma, Chris, Abma, Tineke A.

Abstract: Primary objective: To describe factors influencing the QoL of patients with Parkinson's Disease (PD), as experienced by patients themselves. Research design: A qualitative design was used to investigate which factors influence the QoL of patients with PD as this design allows one to focus sufficiently on (reporting) the experiences of patients and their perspectives. Methods and procedures: Interviews with patients (n = 27) were organized which formed the input for four focus groups and participants were selected by the Dutch Parkinson Association (PV). Main outcomes and results: The results illustrate that patients mentioned a broad array of issues related to their QoL, including intra- and interpersonal factors, quality of care, societal pressure and communication. Participants developed a model symbolizing a radar wheel to illuminate the complex and dynamic inter-relations between the themes affecting their QoL. How the set of factors actually influences a person's life differs per patient and per situation. Conclusions: The QoL of patients with PD is influenced by many interacting factors related to their health, personal relations, care, communication and society. To improve the QoL and care for persons with PD, all factors should be taken into account. Person-centred care recognizes the uniqueness and capabilities of patients with PD.

Title: Differential risks of cancer types in people with Parkinson's disease: A national record-linkage study.

Citation: European Journal of Cancer, 15 September 2014, vol./is. 50/14(2456-2462), 09598049

Author(s): Ong, E.L., Goldacre, Raph, Goldacre, Michael

Abstract: Background There is evidence that people with Parkinson's disease (PD) have a decreased risk of developing cancer. PD has also variably been shown to be associated with an increased risk of cancers like melanoma and breast. We investigated this relationship in a very large cohort of PD patients. Methods We constructed two cohorts of people from an all-England record-linked hospital and mortality dataset spanning 1999–2011. One cohort comprised people with a record of PD; the other comprised people without a record of PD. We 'followed up' these two cohorts to determine observed and expected numbers of people with subsequent primary cancers in each, based on person-years at risk, and calculated standardised rate ratios (RRs). Results In 219,194 people with PD, the RR for all subsequent primary malignant cancers combined was 0.92 (95% confidence interval (CI) 0.91–0.93). Increased RRs ($p < 0.05$) were found for six out of the 31 cancer types investigated, including breast, melanoma, uterus, kidney, and neurological malignancies. Decreased RRs were found for 11 cancer sites, including lung and colon cancer. Conclusions We corroborate the findings of a reduced risk for the development of cancers in PD patients shown in smaller studies, including cancers associated and not known to be associated with smoking; and of an increased risk of melanoma and breast cancer. To the best of our knowledge, this is the first study to report an association between PD and elevated rates of uterine and renal cancer. Further work is warranted to understand the mechanisms behind these findings.

Title: Disexecutive Functions and Depression in Patients with Parkinson Disease.

Citation: American Journal of Physical Medicine & Rehabilitation, 01 September 2014, vol./is. 93/9(764-773), 08949115

Author(s): Pierobon, Antonia, Giardini, Anna, Maestri, Roberto, Farina, Cristiano, Callegari, Simona, Torlaschi, Valeria, Bertotti, Gabriella, Majani, Giuseppina, Frazzitta, Giuseppe

Abstract: Background: Studies relating to patients with Parkinson disease that assess neuropsychologic, psychologic, and clinical aspects are very uncommon. Objective: The aim of this study was to analyze the impact of executive functioning (impaired vs. not impaired) or depression (depressed vs. nondepressed) on the outcome of rehabilitation treatment in patients with Parkinson disease without dementia at the medium stage of disease. Methods: Forty consecutive inpatients affected by Parkinson disease were psychologically and neuropsychologically assessed by means of standardized tests during the first week of admission and at discharge after undergoing an intensive rehabilitation training. Results: At baseline, the patients (mean [SD] age, 70.1 [8.0]; Mini-Mental State Examination [MMSE], ≥ 24) showed impairment in the following executive functions: frontal functions (32.5%), selective and divided attention (55.0% and 41.9%, respectively), and word fluency (17.5%). Depressive symptoms reported using the Geriatric Depression Scale were distributed as follows: mild ($n = 13$), 32.5%; moderate ($n = 4$), 10.0%; and severe ($n = 5$), 12.5%. As for the outcome of the intensive rehabilitation treatment, a general improvement in the Unified Parkinson's Disease Rating Scale, the Berg's scale, the 6-min walking test, and the Timed Up and Go test was observed ($P < 0.0001$). The improvement was homogeneous for all groupings of the patients for all of the considered variables, indicating that the changes in performance as a result of treatment were unaffected by the presence of executive function deficits or moderate-to-severe depression. Conclusions: The patients' executive function impairment or moderate-to-severe depressive symptoms did not seem to interfere with the outcome of the intensive physical and occupational rehabilitation. Therefore, these aspects in patients without dementia should not be considered a contraindication to an intensive rehabilitation

program. Furthermore, despite the presence of impaired executive functions and/or of depressive symptoms, the 4-wk multidisciplinary rehabilitation program resulted to be highly effective.

Title: Randomized cross-over trial to investigate the efficacy of a two-week physiotherapy programme with repetitive exercises of cueing to reduce the severity of freezing of gait in patients with Parkinson's disease.

Citation: Clinical Rehabilitation, 01 September 2014, vol./is. 28/9(902-911), 02692155

Author(s): Fietzek, Urban M, Schroeteler, Frauke E, Ziegler, Kerstin, Zwosta, Jens, Ceballos-Baumann, Andres O

Full Text:

Available from *ProQuest* in [Clinical Rehabilitation](#)

Title: Moderate evidence exists for occupational therapy-related interventions for people with Parkinson's disease in physical activity training, environmental cues and individualised programmes promoting personal control and quality of life.

Citation: Australian Occupational Therapy Journal, 01 August 2014, vol./is. 61/4(287-288), 00450766

Author(s): Liddle, Jacki, Eagles, Ros

Title: Impulse control disorder in patients with Parkinson's disease under dopamine agonist therapy: a multicentre study.

Citation: Journal of Neurology, Neurosurgery & Psychiatry, 01 August 2014, vol./is. 85/8(840-844), 00223050

Author(s): Garcia-Ruiz, Pedro J, Martinez Castrillo, Juan Carlos, Alonso-Canovas, Araceli, Herranz Barcenas, Antonio, Vela, Lydia, Sanchez Alonso, Pilar, Mata, Marina, Olmedilla Gonzalez, Nuria, Mahillo Fernandez, Ignacio

Full Text:

Available from *Highwire Press* in [Journal of neurology, neurosurgery, and psychiatry](#)

Title: Effects of deep brain stimulation of the subthalamic nucleus on freezing of gait in Parkinson's disease: a prospective controlled study.

Citation: Journal of Neurology, Neurosurgery & Psychiatry, 01 August 2014, vol./is. 85/8(871-877), 00223050

Author(s): Vercruyse, S, Vandenberghe, W, Münks, L, Nuttin, B, Devos, H, Nieuwboer, A

Full Text:

Available from *Highwire Press* in [Journal of neurology, neurosurgery, and psychiatry](#)

Title: Can stress trigger Parkinson's disease?

Citation: Journal of Neurology, Neurosurgery & Psychiatry, 01 August 2014, vol./is. 85/8(878-881), 00223050

Author(s): Djamshidian, Atbin, Lees, Andrew J

Full Text:

Available from *Highwire Press* in [Journal of neurology, neurosurgery, and psychiatry](#)

Title: Presence of stop bursts and multiple bursts in individuals with Parkinson disease.

Citation: International Journal of Speech-Language Pathology, 01 October 2014, vol./is. 16/5(456-463), 17549507

Author(s): PARVEEN, SABIHA, GOBERMAN, ALEXANDER M.

Title: Factors contributing to postural instability in patients with idiopathic Parkinson's disease.

Citation: Physical Therapy Reviews, 01 October 2014, vol./is. 19/5(302-327), 10833196

Title: The impact of high intensity physical training on motor and non-motor symptoms in patients with Parkinson's disease (PIP): A preliminary study.

Citation: NeuroRehabilitation, 01 September 2014, vol./is. 35/2(291-298), 10538135

Author(s): Morberg, Bo M., Jensen, Joakim, Bode, Matthias, Wermuth, Lene

Title: Tai Chi Exercise can Improve the Obstacle Negotiating Ability of People with Parkinson's Disease: A Preliminary Study.

Citation: Journal of Physical Therapy Science, 01 July 2014, vol./is. 26/7(1025-1030), 09155287

Author(s): Hyeong-Dong Kim, Hyun Dong Jae, Ji Hoon Jeong

Abstract: [Purpose] The purpose of this study was to examine the effects of Tai Chi (TC)-based exercise on dynamic postural control during obstacle negotiation by subjects with mild or moderate Parkinson's disease (PD). [Subjects] Twelve subjects (mean age, 65.3±6.1 years) diagnosed with idiopathic PD were enrolled for this study. [Methods] All the subjects were tested a week before and 12 weeks after the initiation of the TC exercise. In the test, they were instructed to negotiate an obstacle from the position of quiet stance at a normal speed. They were trained with TC exercise that emphasized multidirectional shift in weight bearing from bilateral to unilateral support, challenging the postural stability, three times per week for 12 weeks. Center of pressure (COP) trajectory variables before and after TC exercise were measured using two force plates. [Results] A comparison of the results between pre- and post-intervention showed a statistically significant improvement in anteroposterior and mediolateral displacement of COP. [Conclusion] Twelve weeks of TC exercise may be an effective and safe form of stand-alone behavioral intervention for improving the dynamic postural stability of patients with PD.

Title: Age-related changes in cognitive function and postural control in Parkinson's disease.

Citation: Aging Clinical & Experimental Research, 01 October 2014, vol./is. 26/5(505-510), 15940667

Author(s): Zawadka-Kunikowska, Monika, Zalewski, Paweł, Klawe, Jacek, Pawlak, Joanna, Tafil-Klawe, Małgorzata, Kędziora-Kornatowska, Kornelia, Newton, Julia

Abstract: Background and aims: This study objectively analyzed postural instability and cognitive function in patients with Parkinson's disease (PD) and a group of healthy elderly and middle-aged individuals. Methods: The study included ten healthy middle-aged individuals (range 42-57 years), 14 healthy elderly individuals (range 60-90 years) and 15 PD patients (range 58-93 years). Center of pressure (COP) parameters were determined by means of computed static posturography during free standing with open and closed eyes. The level of cognitive functioning was examined with mini mental state examination (MMSE) and counting backwards test (CBT). Results: Parkinson's disease patients showed significantly lower MMSE scores compared to healthy middle-aged ($p = 0.004$) and elderly individuals ($p = 0.03$). Mean duration of CBT in PD patients was significantly longer than in healthy subjects. COP parameters correlated with age of subjects and cognitive function (MMSE score). No significant differences in any stabilographic parameters were observed between healthy elderly subjects and PD patients. Conclusions: Age is the most significant factor impacting upon the static balance of older individuals during free standing. Compared to middle-aged and elderly individuals without central nervous system impairment, patients with PD present with significant delay in cognitive processes associated with executive function.

Title: Comparison of activities of daily living impairments in Parkinson's disease patients as defined by the Pill Questionnaire and assessments by neurologists.

Citation: Journal of Neurology, Neurosurgery & Psychiatry, 01 September 2014, vol./is. 85/9(969-973), 00223050

Author(s): Lee, Wei-Ju, Chang, Yung-Yee, Lin, Juei-Jueng, Sung, Yueh-Feng, Li, Jie-Yuan, Wang, Shuu-Jiun, Chen, Rou-Shayn, Yang, Yuan-Han, Hu, Chaur-Jong, Tsai, Chon-Haw, Wang, Han-Cheng, Wu, Shey-Lin, Chang, Ming-Hong, Fuh, Jong-Ling

Full Text:

Available from *Highwire Press* in [Journal of neurology, neurosurgery, and psychiatry](#)

Title: Which target is best for patients with Parkinson's disease? A meta-analysis of pallidal and subthalamic stimulation.

Citation: Journal of Neurology, Neurosurgery & Psychiatry, 01 September 2014, vol./is. 85/9(982-986), 00223050

Author(s): Sako, Wataru, Miyazaki, Yoshimichi, Izumi, Yuishin, Kaji, Ryuji

Full Text:

Available from *Highwire Press* in [Journal of neurology, neurosurgery, and psychiatry](#)

Title: Influence of Functional Movement Rehabilitation on Quality of Life in People with Parkinson's Disease.

Citation: Journal of Physical Therapy Science, 01 September 2014, vol./is. 26/9(1329-1331), 09155287

Author(s): Cholewa, Joanna, Gorzkowska, Agnieszka, Szepelawy, Michal, Nawrocka, Agnieszka, Cholewa, Jaroslaw

Abstract: [Purpose] Parkinson's disease is one of the most frequent diseases of the central nervous system. Thorough knowledge of reasons for movement defects may contribute to the ability to quality of life at a good level as far as motor abilities are concerned. The aim of the study was to evaluate the influence of functional movement rehabilitation on the degree of intensity of movement symptoms in Parkinson's disease. [Subjects] The research was carried out in people

diagnosed with stage III Parkinson's disease, according to the Hoehn and Yahr scale classification. [Methods] In order to establish the clinical state of patients, parts I, II, and III of the Unified Parkinson's Disease Rating Scale, the Schwab and England Activities of Daily Living scale, and the quality of life in Parkinson's disease questionnaire were applied. The intervention group took part in 60 minutes of functional movement rehabilitation twice a week for a period of 15 weeks. The main emphasis was placed on the ability to cope with everyday activities. [Results] A significant difference in scores for the given scales between before and after research the intervention period was observed in the intervention group. [Conclusion] The obtained results revealed positive that the influence of applied rehabilitation program had a positive influence on the degree of intensity of movement symptoms in people with Parkinson's disease.

Title: The impact of high intensity physical training on motor and non-motor symptoms in patients with Parkinson's disease (PIP): A preliminary study.

Citation: NeuroRehabilitation, 01 September 2014, vol./is. 35/2(291-298), 10538135

Author(s): Morberg, Bo M., Jensen, Joakim, Bode, Matthias, Wermuth, Lene

Abstract: BACKGROUND: Parkinson's disease (PD) is a neurodegenerative disease caused by loss of dopaminergic nigrostriatal neurons. Several studies have investigated various physical interventions on PD. The effects of a high intensity exercise program with focus on resistance; cardio; equilibrium; and flexibility training have not been evaluated previously. OBJECTIVE: The aim of this study was to investigate the effects of a complex, high intensity physical training program, with a long duration, on motor and non-motor symptoms in patients with PD. METHOD: 24 patients with PD Hoehn and Yahr stage 1-3 were non-randomly allocated to an intervention group (n = 12) and a control group (n = 12). The intervention group underwent 32 weeks of high intensity personalized physical training twice a week, with an optional extra training session once a week. The control group received general recommendations regarding physical activity. The primary outcomes were the change in Unified Parkinson's Disease Rating Scale Subscores (UPDRS) and the Parkinson's Disease Questionnaire (PDQ-39). RESULTS: At week 32, the training significantly improved both UPDRS motor subscores (p = 0.045), activities of daily living subscores (ADL) (p = 0.006), mentation subscores (p = 0.004) and complication subscores (p = 0.019). The effect on the PDQ39 total score was not statistically significant. The intervention group however experienced a substantial improvement of the PDQ39 items emotional well-being (-11.0) and bodily discomfort (-7.14). CONCLUSION: The results suggest that a personal high intensity exercise program may favorably influence both motor and non-motor symptoms in patients with mild to moderate PD. More studies with both higher methodology in study design and a follow-up examination are recommended.

Sources Used

The following databases are searched on a regular basis in the development of this bulletin: Amed, British Nursing Index, Cinahl, Medline

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