When caring for someone with Parkinson's Disease if there is a change in their condition it can leave you feeling unsure of what to do and when it may be necessary to contact someone. This leaflet has been written to help Patient's, relatives, Carers and other Health Professionals in giving information of various complications and what to do.

## Sudden Deterioration of Parkinson's Symptoms.

People with Parkinson's disease sometimes experience a worsening of their symptoms. It is unusual for a rapid deterioration to be caused by the Parkinson's disease alone, often there are other reasons.

IF THE PATIENT IS CLEARLY **VERY ILL I.E. EXTREMELY BREATHLESS, LOSING CONSCIOUSNESS OR IN CONSIDERABLE PAIN SEEK MEDICAL HELP OR DIAL 999** IMMEDIATELY.

# Has the Patient's anti-Parkinson's Treatment recently changed?

When treatments for Parkinsons's are changed most people will notice an improvement in their symptoms, on occassions they may cause worsening, particularly if the dose has been reduced, if medications are being gradually increased or a new treatment started the risks of side effects may be higher.

Common side effects are -Nausea and vomitting

Feeling dizzy or light headed (may be due to low blood pressure.)

Feeling tired and sleeping excessively during the day.

Involuntary movements (termed as dyskinesia)

Confusion

Hallucinations (seeing things that are not there.).

Ensure all medication is given at the times recommended, if you are not sure of these times please phone your Parkinson's Specialist Nurse.

If you suspect a change of Medication has caused the Patient to feel unwell contact the Parkinson's Nurse, GP, Neurologist Pharmacist or the Parkinson's UK helpline to discuss the issue **NEVER STOP PD** MEDICATION ABRUPTLY WITHOUT DISCUSSING IT WITH A HEALTH CARE PROFESSIONAL.

Drug information can be found in the PD UK booklet that can be accessed throuh PDUK website or from Specialist Nurses (PTO for contact numbers)

Could the person have a Urinary Tract infection (UTI)				
Information	Symptoms	Treatment		
UTI's can cause a worsening of	Symptoms of urine infection can	If a urine infection is suspected,		
PD symptoms and even cause	include:	seek advice from your GP. If the		
hallucinations or confusion in	* Passing urine more often	patient is known to District		
some people.	* Discoloured or cloudy urine	Nurses you could also tell them.		
	(some drugs used to treat PD			
	may make urine darker or	A sample of urine may be		
	orange)	required for testing. Antibiotics		
	* Unpleasant smelling urine	are usually effective.		
	* Pain on passing urine			
	* Passing blood in your urine	If symptoms persist once an		
	* Abdominal or back pain	antibiotic course has finished, it		
	* Generally feeling unwell	may be necessary to request		
	* Raised temperature or feeling	that the urine is re-tested.		
	feverish.			
Could the person have a chest in	fection?			
Information	Symptoms	Treatment		
Chast infactions may also				
Chest infections may also	Symptoms include:	If a chest infection is suspected,		
worsen Parkinson's symptoms	Symptoms include:  * Persistent chesty cough	If a chest infection is suspected, seek advice at your GP's surgery.		
		• • •		
	* Persistent chesty cough	seek advice at your GP's surgery.		
	* Persistent chesty cough * Feeling breathless or wheezy	seek advice at your GP's surgery.  Not all infections require		
	* Persistent chesty cough * Feeling breathless or wheezy * Coughing up yellow or green	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm	seek advice at your GP's surgery. Not all infections require antibiotics and mild infections usually resolve themselves in		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm  * Chest pain	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm  * Chest pain  * Raised temperature or feeling	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having problems with swallowing, this		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm  * Chest pain  * Raised temperature or feeling feverish.	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having problems with swallowing, this might be a cause of the chest		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm  * Chest pain  * Raised temperature or feeling feverish.	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having problems with swallowing, this might be a cause of the chest infection. Please inform your PD		
	* Persistent chesty cough  * Feeling breathless or wheezy  * Coughing up yellow or green phlegm  * Chest pain  * Raised temperature or feeling feverish.  * Generally feeling unwell	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having problems with swallowing, this might be a cause of the chest infection. Please inform your PD Nurse or Neurologist if you		
worsen Parkinson's symptoms	* Persistent chesty cough * Feeling breathless or wheezy * Coughing up yellow or green phlegm * Chest pain * Raised temperature or feeling feverish. * Generally feeling unwell	seek advice at your GP's surgery.  Not all infections require antibiotics and mild infections usually resolve themselves in around 3 weeks. If you are having problems with swallowing, this might be a cause of the chest infection. Please inform your PD Nurse or Neurologist if you		

of your PD symptoms.

GP. You will need to rest and drink plenty of fluids. Regular Paracetamol (max 4g a day) should help to treat fever and any aches and pains you may have.

### Could the Person be Dehydrated?

Could the Person be Denyurated:				
Information	Symptoms	Treatment		
Dehydration is common in the general population. Sometimes if severe this can make your Parkinson's worse. You should	Symptoms of mild dehydration include:  * Thirst  * Dizziness or light-headedness	To avoid severe dehydration increase your fluid intake and address any potential causes such as diarrhoea or infections.		
aim to drink 6-8 glasses (2 litres) of fluid a day, possibly more in hot weather or if you are ill with diarrhoea etc.	* Headache * Tiredness * Dry mouth, lips and eyes * Concentrated urine (dark yellow) * Passing only small amounts of	Severe dehydration is a serious condition; you will need to seek medical help quickly as you may require admission to hospital for an intra-venous drip.		
=	urine infrequently (less than three or four times a day)	·		

Could the Person be constipated?				
Information	Symptoms	Treatment		
Constipation is common in the	Possible complications of	The leaking of liquid stools is		
general population particularly as we	constipation include:	sometimes mistaken for		
age. Mild constipation is not	* Swelling of the rectum	diarrhoea and any treatments		
uncommon in PD and it could result	* Losing sensation in and	for diarrhoea will only make		
in a worsening of your PD.	around your anus	the problem worse. If you		
Constipation can usually be	* Faecal incontinence, when	suspect faecal impaction and		
managed by a healthy diet with	you uncontrollably leak soft	laxatives have not helped,		
plenty of dietary fibre, fluids and	or liquid stools	suppositories or enemas will be		
exercise. Sometimes laxatives may	* Bleeding from your anus	required. You may need to		
be required: see the Parkinson's UK	* Rectal prolapse, when part	contact your surgery and ask		
fact sheet 'Looking after your	of your lower intestine falls	for a District Nurse to help you		
bladder and bowels' for further	out of place and protrudes	administer these if you are		
information. Chronic constipation	from your anus	unable to do so. You will also		
can increase the risk of faecal		need to see your GP or district		
impaction (where dried, hard stools		nurse if the impaction doesn't		
collect in your rectum and anus).		resolve or if you feel unwell.		
Once you	<b>—</b>			
have faecal impaction, it is very				
unlikely that you will be able to get				
rid of the stools naturally. Faecal				
impaction worsens constipation				
because it makes it harder for stools				
and waste products to pass out of				
your anus as the path is obstructed.				
If you experience faecal impaction, it				
can lead to a number of other				
complications.				

Once the underlying cause for the deterioration of your Parkinson's Symptoms has been successfully treated the Parkinson's should return to how it was in a few weeks. If after four weeks your Parkinson's is still causing concern please contact your Parkinson's Nurse for a review.

### **Further information and support**

- Out of Hours Doctors (via the number on your GP telephone service)
- Parkinson's UK free helpline 0808 800 0303 Mon-Fri 9am-8pm and Sat 10am-2pm
- NHS Choices Website <a href="http://www.nhs.uk/Pages/HomePage.aspx">http://www.nhs.uk/Pages/HomePage.aspx</a>
- NHS Direct: Tel: 111 You should use the NHS 111 service if you urgently need medical help or advice but it's not a life-threatening situation
- Coventry & Warwickshire Regional Parkinson's Service Website: www.uhcw.nhs.uk/parkinsons



Name-Address –

DOB – NHS No -

# Parkinson's Disease Anticipatory Care At Home

Named Community Parkinson's Nurse

**Contact Number** 

Information in this leaflet was written by Peter Smith PDNS Milton Keynes PCT
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