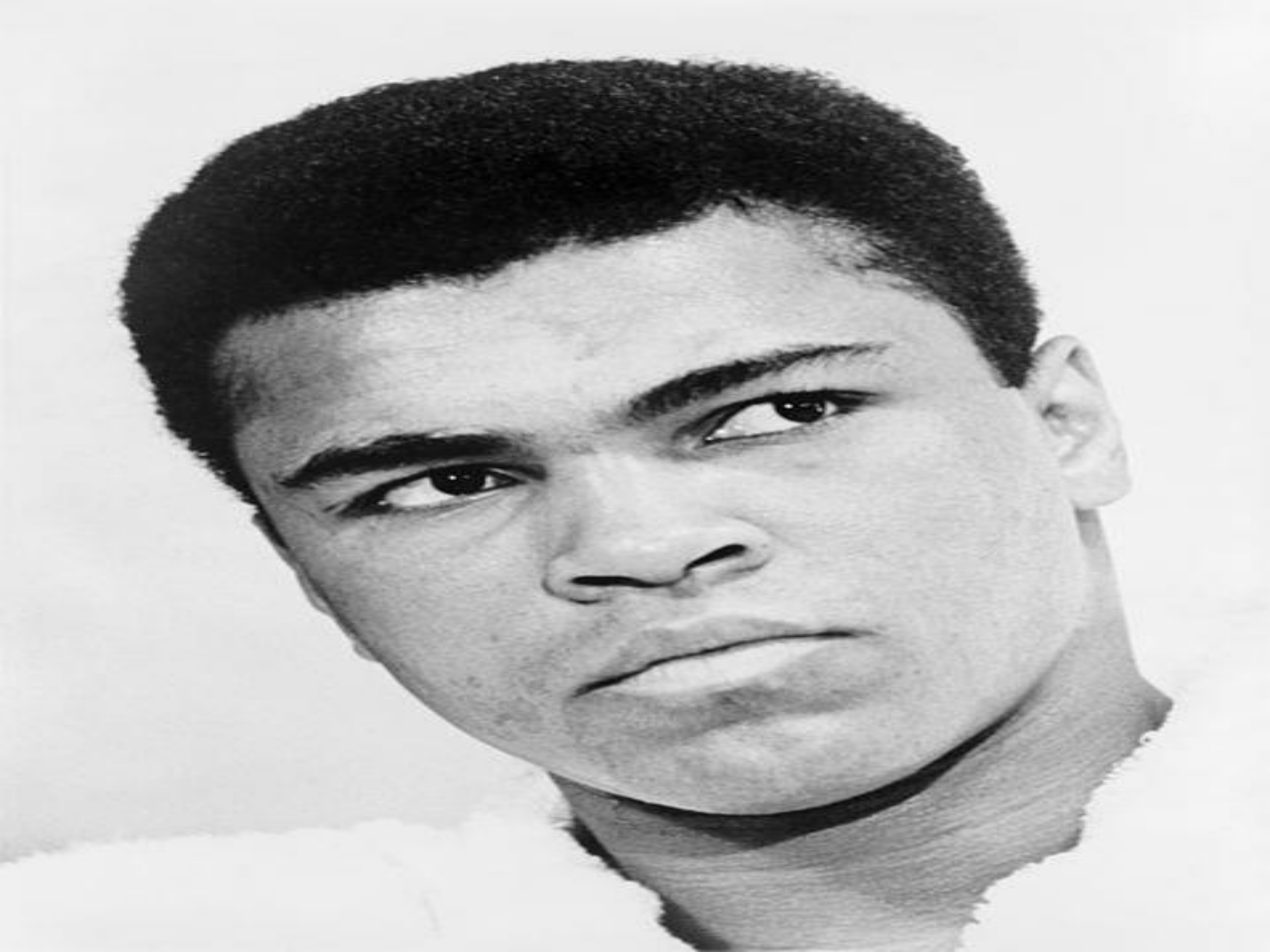


I'm blessed and thankful to  
God that I understand he's  
trying me. This is a trial from  
God. He gave me this illness  
to remind me that I am not  
number one; He is.

IMRAN KHAN



AN  
ESSAY  
ON THE  
SHAKING PALSY.

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CHAPTER I.

DEFINITION—HISTORY—ILLUSTRATIVE CASES.

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SHAKING PALSY. (*Paralytic Agitans*.)

Involuntary tremulous motion, with lessened muscular power, in parts not in action and even when supported; with a propensity to bend the trunk forwards, and to pass from a walking to a running pace: the senses and intellects being uninjured.


THE term Shaking Palsy has been vaguely employed by medical writers in general. By some it has been used to designate or-

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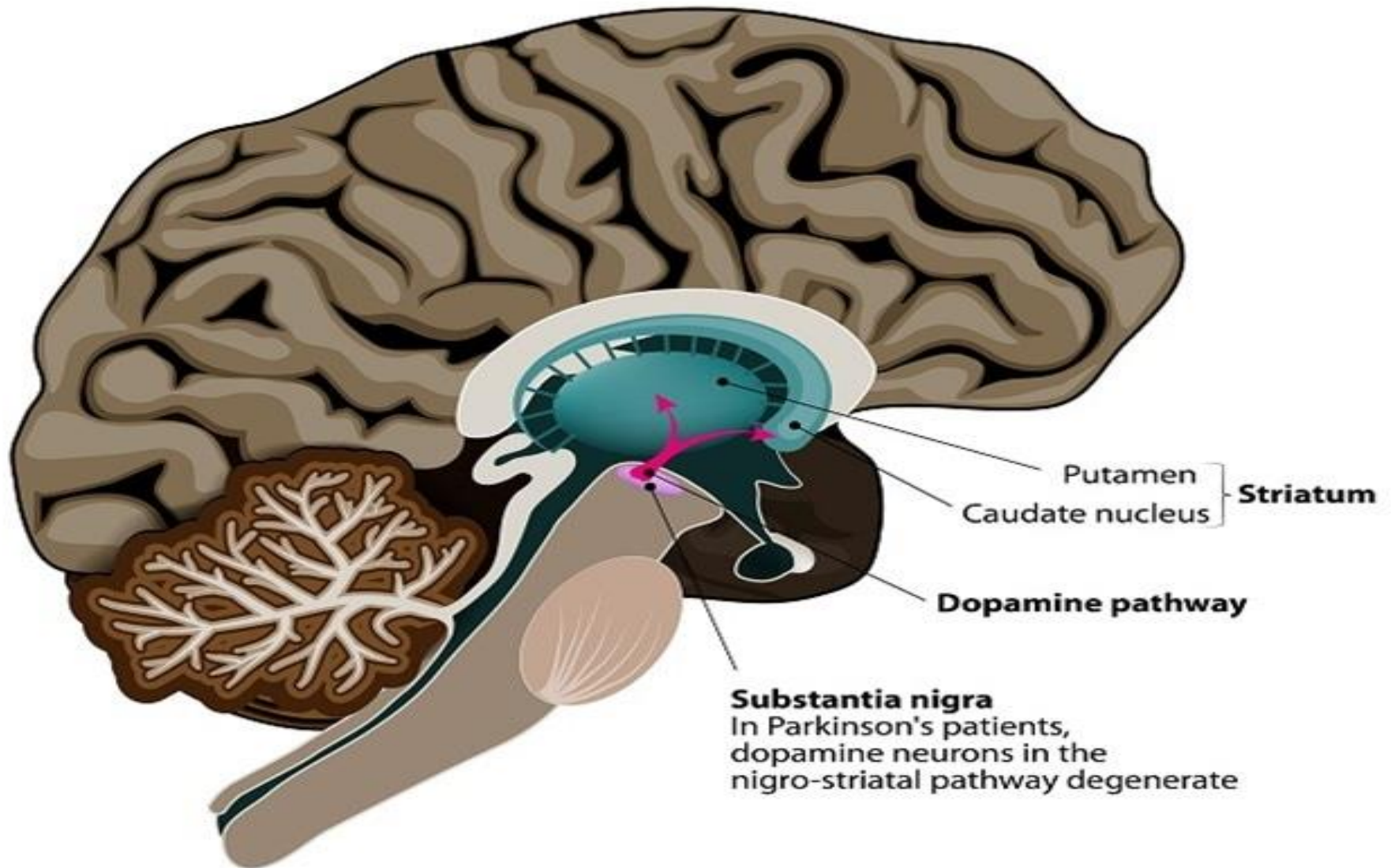
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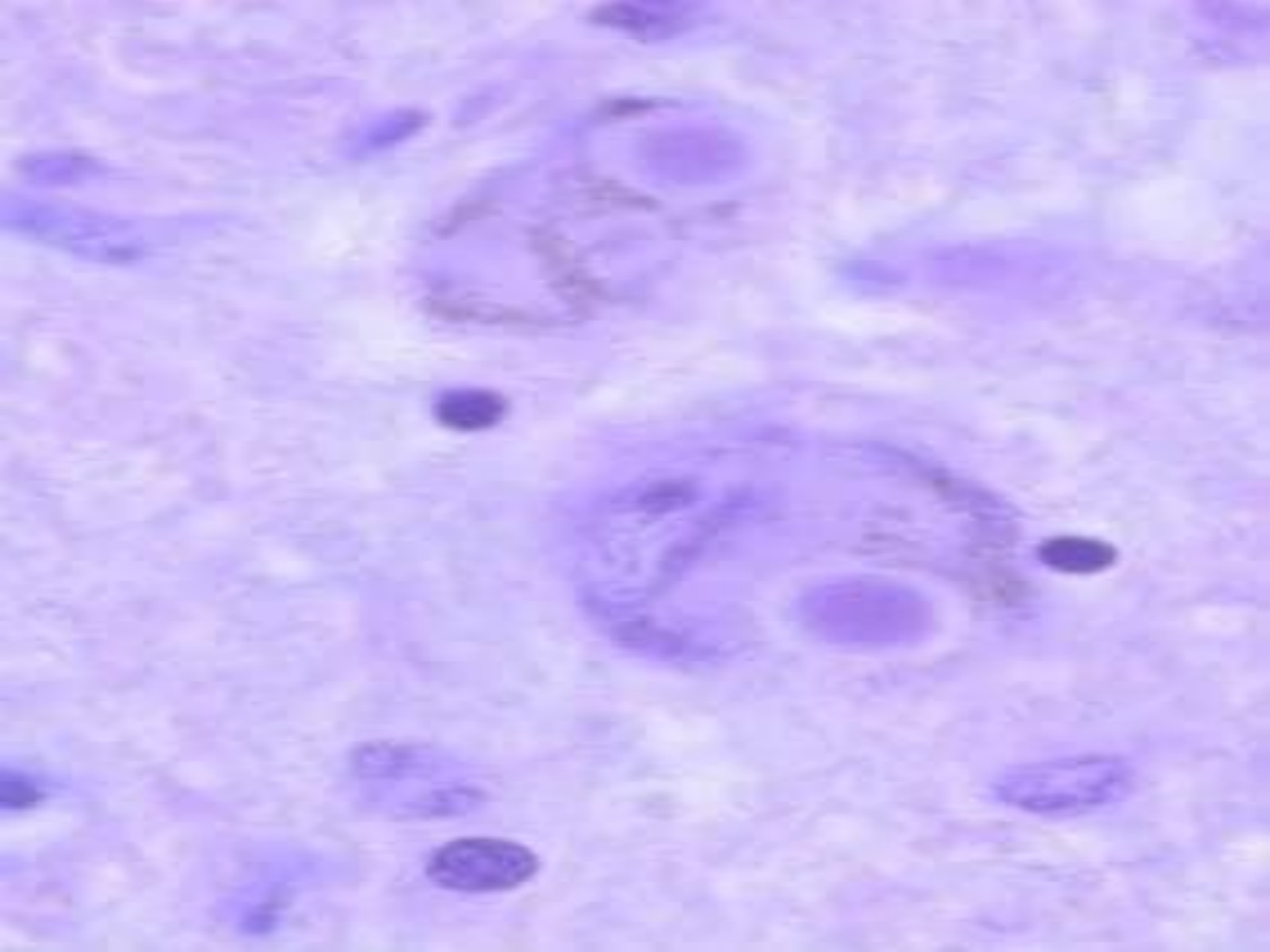
Parkinson disease (PD) is one of the most common neurologic disorders, affecting approximately 1% of individuals older than 60 years and causing progressive disability that can be slowed, but not halted, by treatment.

- 
- The 2 major neuropathologic findings in Parkinson disease are
  - loss of pigmented dopaminergic neurons of the substantia nigra pars compacta and
  - the presence of Lewy bodies and Lewy neurites

# PARKINSON'S DISEASE










# *Signs and symptoms*

Initial clinical symptoms of Parkinson disease include the following:

- Tremor
- Subtle decrease in dexterity
- Decreased arm swing on the first-involved side
- Soft voice
- Decreased facial expression
- Sleep disturbances

- 
- Decreased sense of smell
  - Symptoms of autonomic dysfunction (eg, constipation, sweating abnormalities, sexual dysfunction, seborrheic dermatitis)
  - A general feeling of weakness, malaise, or lassitude
  - Depression or anhedonia
  - Slowness in thinking

- Onset of motor signs include the following:
- Typically asymmetric
- The most common initial finding is a resting tremor in an upper extremity
- Over time, patients experience progressive bradykinesia, rigidity, and gait difficulty
- Axial posture becomes progressively flexed and strides become shorter
- Postural instability (balance impairment) is a late phenomenon

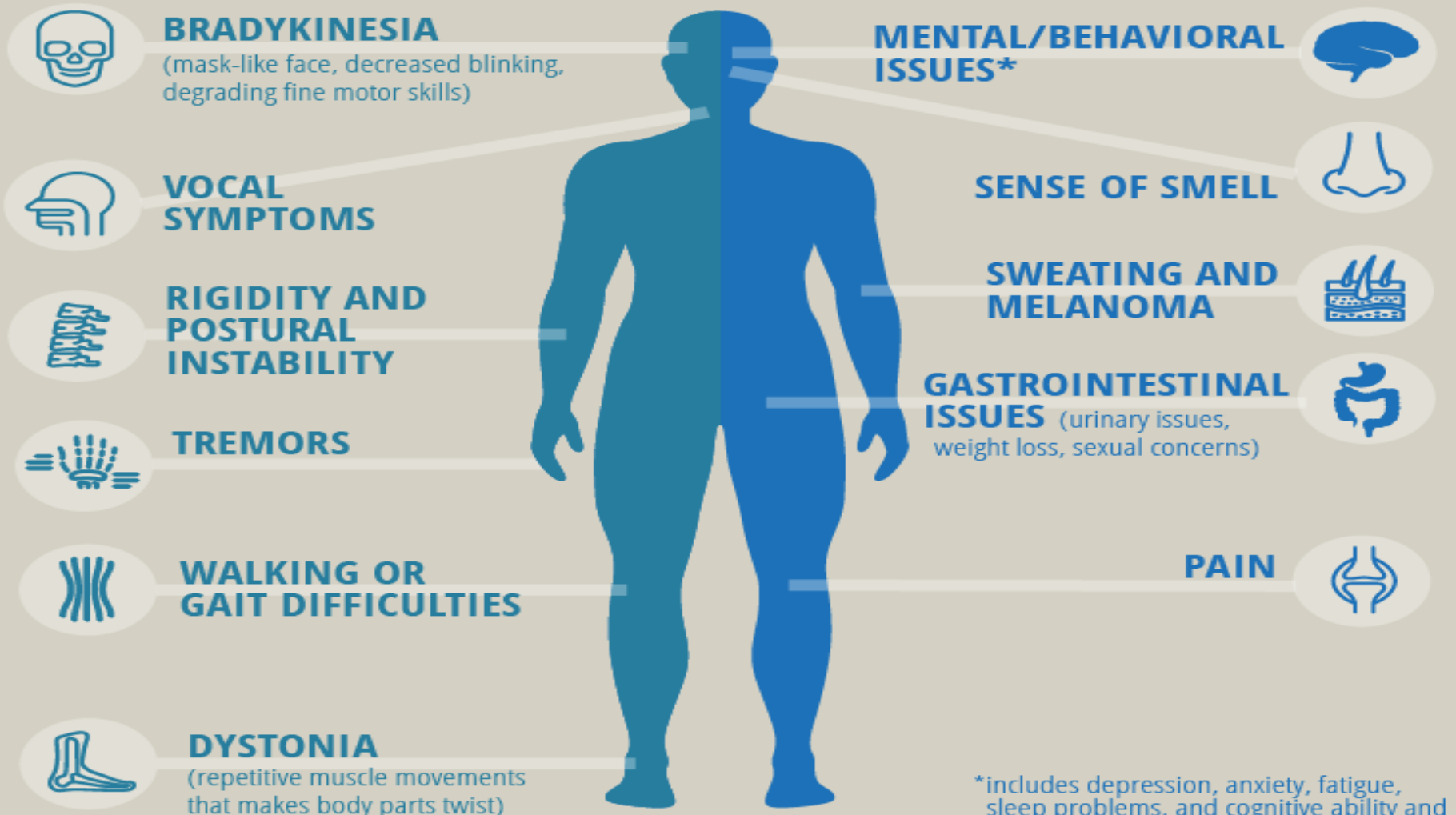
# *Nonmotor symptoms*

- Nonmotor symptoms are common in early Parkinson disease. Recognition of the combination of nonmotor and motor symptoms can promote early diagnosis and thus early intervention, which often results in a better quality of life.

# PARKINSON'S DISEASE

## Motor Skill Symptoms

## Nonmotor Skill Symptoms



### BRADYKINESIA

(mask-like face, decreased blinking, degrading fine motor skills)

### MENTAL/BEHAVIORAL ISSUES\*

### VOCAL SYMPTOMS

### SENSE OF SMELL

### RIGIDITY AND POSTURAL INSTABILITY

### SWEATING AND MELANOMA

### TREMORS

### GASTROINTESTINAL ISSUES

(urinary issues, weight loss, sexual concerns)

### WALKING OR GAIT DIFFICULTIES

### PAIN

### DYSTONIA

(repetitive muscle movements that makes body parts twist)

\*includes depression, anxiety, fatigue, sleep problems, and cognitive ability and personality changes

# Diagnosis

Parkinson disease is a clinical diagnosis. No laboratory biomarkers exist for the condition, and findings on routine magnetic resonance imaging and computed tomography scans are unremarkable.

Clinical diagnosis requires the presence of 2 of 3 cardinal signs:


- Resting tremor
- Rigidity
- Bradykinesia



# Management

The goal of medical management of Parkinson disease is to provide control of signs and symptoms for as long as possible while minimizing adverse effects.

- *Symptomatic drug therapy*
- Usually provides good control of motor signs of Parkinson disease for 4-6 years
- Levodopa/carbidopa: The gold standard of symptomatic treatment

- 
- Monoamine oxidase (MAO)-B inhibitors: Can be considered for initial treatment of early disease
  - Other dopamine agonists (eg, ropinirole, pramipexole): Monotherapy in early disease and adjunctive therapy in moderate to advanced disease
  - Anticholinergic agents (eg, trihexyphenidyl, benztropine): Second-line drugs for tremor only

## *Treatment for nonmotor symptoms*

- Sildenafil citrate (Viagra): For erectile dysfunction
- Polyethylene glycol: For constipation
- Modafinil: For excessive daytime somnolence
- Methylphenidate: For fatigue (potential for abuse and addiction)

# Deep brain stimulation

- Surgical procedure of choice for Parkinson disease
- Does not involve destruction of brain tissue
- Reversible
- Can be adjusted as the disease progresses or adverse events occur
- Bilateral procedures can be performed without a significant increase in adverse events

# Stages of Parkinson's Disease

**Stage 1:** Develop mild symptoms but able to go about day-to-day life

**Stage 2:** Symptoms such as tremors and stiffness begin to worsen, may develop poor posture or have trouble walking

**Stage 3:** Movement begins to slow down, loss of balance



**Stage 4:** Symptoms are severe and cause significant issues with day-to-day living, unable to live alone and will need care

**Stage 5:** Walking or standing may be impossible at this point, people at this stage are often confined to a wheelchair or bed