PARTNERS IN PARKINSON’S

Parkinson’s Disease Guide
Each individual travels his or her own journey with Parkinson's disease, often encountering new challenges as symptoms progress and care needs change.

Having a firm understanding of your disease and knowing the resources available to you are crucial at any stage of Parkinson’s. To help you establish a foundation of knowledge about Parkinson’s, we’ve created this printable Parkinson’s Disease Guide* for you to keep for yourself or share with your loved ones. Inside, you’ll find information about the disease, tips for living with Parkinson’s and ways to build a team of care providers who can help you live well today and in the future.

All information within this guide is also available online at www.PartnersinParkinsons.org

*This Parkinson’s disease guide does not offer medical advice or recommendations and individuals should not rely on the information within this guide as a substitute for consultations with qualified health care professionals who are familiar with individual medical conditions and needs. Partners in Parkinson’s strongly recommends that care and treatment decisions related to Parkinson’s disease and any other medical condition be made in consultation with a patient’s physician or other qualified health care professionals who are familiar with the individual’s specific health situation.
This Parkinson’s Disease Guide contains educational content from PartnersinParkinsons.org. The following topics are included in this guide:

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About Parkinson’s Disease
What is Parkinson’s Disease?

Parkinson’s disease is a neurological disorder in which there is a gradual loss of brain cells that make and store dopamine. Dopamine is a chemical in the brain, known as a neurotransmitter, which sends messages that control movement. As Parkinson’s disease progresses, more dopamine neurons in the brain are lost.

The primary symptoms of Parkinson’s disease are movement-related, and include: resting tremor, rigidity, and slowness of movement. However, many patients also experience non-movement-related symptoms such as cognitive impairment, mood changes, constipation and blood pressure problems.

The causes of Parkinson’s disease remain unknown, although researchers believe the disease may be brought on by a combination of environmental and genetic factors. Available treatments help to reduce some of the symptoms but there is currently no treatment that can slow or stop the disease from progressing over time. Much research is ongoing to identify strategies for improving treatment of Parkinson’s disease in the future.

Researchers estimate that one million people in the United States, and four to six million people worldwide, are living with Parkinson’s. The average age of onset is 60 years old—though some are diagnosed at age 40 or even younger. As our population ages, the number of people with Parkinson’s is expected to grow.
While the exact cause of Parkinson’s disease is unknown, research points to a combination of genetic and environmental factors. Some cases may be caused more by genetic factors and others due more to environment, with many somewhere in between.

Researchers have identified certain genes that may play a role in Parkinson’s disease, but studies are still ongoing to understand exactly how mutations in these genes are associated with Parkinson’s. Some of these mutations may cause the disease, but other mutations in Parkinson’s genes may raise the likelihood of onset but would need a separate factor—such as an environmental exposure or another genetic mutation—to ultimately bring on the disease.

While researchers have not identified a cause yet, studies have highlighted some factors that are associated with either greater or lesser risk of Parkinson’s disease. Risk factors that have been identified include:

- advancing age
- family history
- male gender
- exposure to toxins, such as herbicides and pesticides
- head injury

While such studies do not definitively link these factors with Parkinson’s disease, they highlight areas where further research may guide us to better understand risk and develop treatment strategies.
What are the Symptoms of Parkinson’s Disease?

Parkinson’s patients experience a range of symptoms. Not all patients will experience every symptom, and the pace at which the disease progresses can vary on an individual basis. In addition to these symptoms, treatments can bring on side effects that patients should be aware of and discuss with their doctor.
**MOVEMENT/MOTOR-RELATED SYMPTOMS**

- **Bradykinesia** / slowing down and loss of spontaneous and voluntary movement
- **Rigidity** / unusual stiffness in a limb or other body part
- **Resting Tremor** / an uncontrollable movement that affects a limb when it is at rest and usually stops for the duration of a voluntary movement
- **Postural Instability** / problems with standing or walking, or impaired balance and coordination, which can lead to falls
- **Dystonia** / involuntary movement with a muscle contraction, such as a cramp
- **Reduced facial expression** / “mask-like” face due to bradykinesia
- **Speech and swallowing problems**

**NON-MOVEMENT/ NON-MOTOR-RELATED SYMPTOMS**

- **Cognitive Impairment** / decline in ability to multi-task and/or concentrate; potential decline in intellectual functioning and onset of psychosis
- **Mood Changes** / can include depression, apathy or anxiety
- **Sleep disorders** / for example, REM sleep behavior disorder, where individuals act out their dreams
- **Hyposmia** / loss of sense of smell
- **Fatigue**
- **Constipation**
- **Bladder Problems** / a sudden need to urinate or incontinence
- **Orthostatic Hypotension** / low blood pressure upon standing
- **Pain** / central pain other than pain caused by posture problems or dystonia

**OTHER TREATMENT-RELATED SYMPTOMS**

- **Dyskinesia** / involuntary, twisting/turning, jerky movements that can result from long-term use of medications that treat Parkinson’s disease
- **Impulse Control** / inability to resist an impulse that is harmful to self or others that can result from use of medications that treat Parkinson’s disease
What are the Stages of Parkinson’s Disease?

Parkinson’s disease progression varies from patient to patient. Some people with Parkinson’s may never experience certain symptoms or may experience some only at low severity. Others may experience symptoms early in their disease course or with greater severity.
The Hoehn and Yahr scale is one clinical tool to measure Parkinson’s disease progression. This scale categorizes motor symptom severity based on how it affects an individual’s mobility.

Clinicians and researchers also use the Unified Parkinson’s Disease Rating Scale (UPDRS) to follow the course of an individual’s disease. The UPDRS uses evaluation of motor symptoms in addition to assessment of non-motor symptoms and patient interviews to determine the effect of Parkinson’s on daily life.

Many patients and physicians find it most useful to think about Parkinson’s in a framework of early/mild, moderate, and advanced/severe relative to how both the motor and non-motor symptoms affect an individual’s life.

As symptoms progress over time they can increase an individual’s risk of serious events, including falls and respiratory distress. The seriousness of these incidents depends greatly on the patient’s age, overall health and disease stage.

### Hoehn and Yahr Scale of Parkinson’s Disease Progression

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>01</td>
<td>Symptoms on one side only</td>
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<tr>
<td>02</td>
<td>Symptoms on both sides without balance impairment</td>
</tr>
<tr>
<td>03</td>
<td>Mild to moderate disease, some postural instability, physically independent</td>
</tr>
<tr>
<td>04</td>
<td>Severe disease, able to walk or stand unassisted</td>
</tr>
<tr>
<td>05</td>
<td>Wheelchair bound or bedridden unless assisted</td>
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What Treatments are Available for Parkinson’s Disease?

There are currently no available treatments to slow the progression of Parkinson’s over time, but available drugs and therapies can effectively treat symptoms often for years. Because Parkinson’s disease is highly variable, what works for one patient may not work for another. As with any course of treatment or medication, it is critical to work closely with your physician to determine the optimal treatments for you.
Many different treatment approaches are used for Parkinson’s disease:

**DOPAMINERGIC STRATEGIES**
Since many symptoms of Parkinson’s are due to a lack of dopamine in the brain, dopaminergic strategies act to temporarily increase dopamine in the brain through different approaches. The increase in dopamine provided by these approaches can result in improved motor function control.

**Carbidopa/levodopa** / Levadopa helps to restore levels of dopamine, a chemical messenger in the brain responsible for smooth coordinated movement and other motor functions. Carbidopa works to prevent levodopa from being broken down before it reaches the brain and to prevent nausea. There are multiple forms available.

**Levodopa** / See Carbidopa/levadopa definition

**Dopamine agonists** / These drugs mimic the function of dopamine in the brain.

**MAO-B inhibitors** / These drugs inhibit a process that breaks down levodopa, thus extending its action.

**COMT inhibitors** / These drugs are used in combination with levodopa to allow more levodopa to enter the brain.

**ANTICHOLINERGICS**
These drugs block a different neurotransmitter (acetylcholine) that also regulates movement.

**OTHER SYMPTOMATIC THERAPIES**
You may need other medications for conditions that could be related to your Parkinson’s, such as: depression, constipation, orthostatic hypotension and dyskinesia.

**SURGICAL THERAPIES**
Brain surgery that can supplant or supplement drug therapies for Parkinson’s disease in some patients. Therapies include deep brain stimulation and pallidotomy.

**EXERCISE**
While no studies have proven the effect of exercise on slowing Parkinson’s progression, strength and balance from regular exercise can help overall health. You should talk to your physician about a safe exercise program and about how allied care professionals such as physical, occupational and speech therapists can help manage your symptoms.
Living with Parkinson's Disease
A Parkinson’s diagnosis is a life-changing event that takes time to adjust to. There are no hard-and-fast ways of tackling the condition from day one—everyone’s symptoms are different, and Parkinson’s is a highly individualistic disease that varies widely from patient to patient. Remember that you are not alone; there are many sources of information and support to help you chart your own course for living well with Parkinson’s disease.

It is likely that your symptoms will change over time, as will your outlook. However, a diagnosis of Parkinson’s can become an opportunity to re-examine priorities and focus on what you can do, not on what you cannot do. Many patients report that through their experiences with Parkinson’s, they come to find acceptance, mental strength and a focus on healthy living. These are all reasonable expectations of a future with Parkinson’s disease.
Healthy Living with Parkinson’s Disease

Diet and exercise are an important part of healthy living for Parkinson’s patients. Talk to your physician about a diet and exercise plan that is right and safe for you.
While there is no proven specific diet to help treat Parkinson’s, doctors say eating regular balanced meals is part of a healthy diet. It’s important to time your meals around your medication schedule, so digestion doesn’t slow or stop medication from getting into your bloodstream. This is because certain medications may be more or less effective depending on when and what you eat. Talk with your doctor about your specific medications and a diet plan that is right for you.

There are also other dietary considerations such as staying hydrated and increasing fiber intake that could help with common PD symptoms. Don’t change your diet without talking to your doctor and always follow his or her instructions on when to take your medication.

There is no evidence that exercise affects the progression of Parkinson’s disease, but regular exercise or physical therapy may help people with Parkinson’s with their strength, mobility, flexibility and balance. Start by consulting with your doctor. If you’re adding exercise to your routine, it may be the right time to expand your treatment team to include a physical therapist who can help get you started on a safe and beneficial exercise plan, tailored to your ability.

One thing to remember is that exercise isn’t just about running and jumping—exercise is about staying active in any way that works for you. It is important to find something you enjoy and to start a routine that you can maintain. Some examples of exercises that you could consider include walking, biking, dancing, gardening, yoga, tai chi, or sitting and standing exercises. Talk to your doctor about these options to make sure he/she knows what measures you are taking and that they are safe.

Healthy living is also about staying active in other areas of life that are important to you. If you enjoyed activities such as artistic outlets, involvement in community events, or volunteering before your diagnosis, speak with your doctor about how you can continue with those interests. Massage, meditation and other techniques designed to relieve tension and stress can be helpful for some people. Acupressure, acupuncture and vitamin supplements are other complementary approaches that you can consider. Talk to your doctor to see if any of these regimens could be right for you.
It may be difficult to communicate about the changes that a Parkinson’s diagnosis brings to your family, friends and coworkers, but you may find talking about it is helpful to you and those you love.

Remember, too, that a Parkinson’s diagnosis rarely affects just one person. While you alone will face the physical symptoms, those who care about you will be impacted as well. Communication can help keep misunderstandings to a minimum and allow everyone to have a chance to voice their questions and concerns.

If you are in a marriage or relationship, think of yourself and your partner as a team, just as you do in other areas of your life. The truth is that neither of you can know, at the outset, what this diagnosis will mean for you individually or as a couple.

With children of any age, focus on reassurance. Include them in getting educated about the disease, and answer any questions they may have honestly. Offer ways they can take an active role in addressing Parkinson’s, such as by doing activities together or attending a local awareness event.

It may surprise you how different people in your life react to your Parkinson’s diagnosis and symptoms. Be patient with those who do not respond as you had hoped, and try to recognize the source of your frustration without taking it out on others.
Tips for Good Communication

Like all relationships, partnerships between Parkinson’s patients and their loved ones depend on good communication and mutual trust. Here are some ways to help strengthen communication:

• **Set expectations.** Family and friends can sometimes feel helpless or feel they can only do so much. Let them know that listening, and offering empathy and support, is often all you need.

• **Be clear.** Discuss your needs openly. Whether it’s about your emotions or your symptoms, being as clear and direct as possible, can help.

• **Listen.** Listening to others can be just as important. Your family and friends may be able to observe things you can’t and share them with you and your doctor.

• **Be respectful of their experience.** You’re living with Parkinson’s, and so are your family and friends. Recognize that their lives have also changed and that they may need time to adjust.

• **Make your relationship about more than the disease.** You are each more than Parkinson’s, and you had a life “before Parkinson’s.” Keep in touch with the love and mutual interests that sustained your relationship before the disease.

• **Learn to ask for help from family and friends.** Many people want to help, but don’t know what to offer. They may be waiting for you to ask. So be specific about what you need from those around you and you may find they are happy to help and respond readily to your request.

• **Use humor.** Sound silly? Maybe, but humor helps people feel better about themselves and the situation they’re in. It can help make a tough conversation easier.
One of the greatest strategies in living well with Parkinson’s disease is playing an active role in one’s own care. Many patients and caregivers choose to take an active role, too, in the development of new treatments through participation in clinical research.

Educating yourself on symptoms and treatment options, paying attention to your body and noting any changes, and building a supportive care network and medical team are all important steps toward living well with Parkinson’s. You should feel empowered to play a role in your care by asking questions and discussing options with your physician. You know your body better than anyone, so your perspective is invaluable in creating the best management plan for your personal disease.

People with Parkinson’s who participate in clinical research express that they, too, feel empowered in contributing to scientific knowledge that may lead to new possibilities for people living with the disease. Talk to your doctor to learn more about Parkinson’s research and how you can contribute to scientific understanding of the disease and to the development of new treatments.
Advice for Caregivers

Whether you live with a Parkinson’s patient, or help a family member or friend with Parkinson’s often, you likely face some of the issues associated with “caregivers.”
As a caregiver, your state of mind and overall health can impact your ability to provide the care your loved one needs, at the level you want to give. It’s important to remember that you need to take care of yourself when taking care of someone with Parkinson’s disease, especially as they become more dependent on you.

Caring for someone who has Parkinson’s can bring with it a range of emotions. You may feel particularly loved and appreciated and may have a sense of pride in being able to provide care and support. On the other hand, there may be moments when you feel overwhelmed, sad or angry at the situation, or even frustrated with the person you care for. First, you should understand that these feelings are normal and nothing to be ashamed of. You are providing care, but you’re also part of a relationship. Like all relationships, this one will continue to require patience and understanding.

Caregiving can feel like a 24/7 job, and it is important to stay in touch with yourself by pursuing your own interests and keeping active. Asking family and friends for help, or finding professional in-home care, can give you time to yourself to reenergize and refresh. It can also give you and the person you care for new things to talk about and may help to reduce feelings of isolation.

There are also practical things that you can do to help your loved one get the best care.

- **Stay organized.** Keep a record of your loved one’s medications, doctor visits and symptoms to make appointments more beneficial and efficient.

- **Know the limitations of your coverage.** Educate yourself on your insurers’ practices for reimbursement of medical care so you can plan accordingly.

- **Do your homework.** Gather information on Parkinson’s disease and treatment and care options so you can serve as your loved one’s advocate and help plan for the future.

- **Observe your loved one’s disease.** Share with your loved one’s doctor if you observe symptoms such as motor function changes, mood/anxiety concerns or speech issues that your loved one may not notice or may not mention.

- **Discuss important plans and decisions for the future.** Talk about wills, advanced directives and other life issues.

Getting accurate information through open and honest conversation can make a difference in your loved one’s care. So it’s important to focus on communication between you, your loved one and their treatment team.
Build Your Care Team
Why a Care Team?

Establishing a comfortable, open and productive relationship with your health care providers is important for your overall care. Different patients work with different types of doctors to manage their Parkinson’s: some choose to be treated by a movement disorder specialist; some work with a general neurologist; some stay with their primary care physician. In choosing any health care provider, your major considerations should be how much they know about Parkinson’s and how well they listen.

Because Parkinson’s involves a wide range of symptoms including movement- and non-movement-related issues, over the course of your life with Parkinson’s you may wish to work with a variety of health care providers in addition to the doctor who primarily treats your Parkinson’s. For example, depending on the particular range of symptoms, some patients may find it helpful to include a physical therapist to help address painful muscle stiffness, or a therapist who can provide strategies for coping with depression. Whether over time or for brief periods, working with a team of providers (sometimes called “allied care providers”) in addition to your physician can help you better manage your Parkinson’s care.

It’s been shown that early involvement by other health care professionals such as an occupational or speech therapist may help prevent or delay future limitations that can be caused by Parkinson’s disease. These relationships can help you manage your functionality and maintain a safe environment as your Parkinson’s progresses.

It is crucial for any provider to understand that no two cases of Parkinson’s are alike, and to listen to you about your specific concerns. The right doctor will take the time to discuss your symptoms and how they impact you and recommend a treatment regimen with you in mind.
As a person living with Parkinson’s disease, your needs for care and support go beyond just symptom management. Your treatment should also address your physical, social and emotional needs. You may benefit from a team of professionals who can work together to help provide the level of care you deserve.
Here are some of the people who can make valuable contributions to your care.

**YOU**
Who’s on your treatment team—and how much they are part of your care—will depend on your needs. These relationships are likely to change as your Parkinson’s advances. But identifying where you are in your disease and communicating openly with your doctor may help you identify additional professionals that could help enhance your care.

**YOUR CAREGIVER**
Among all the important members of your team, the person helping you every day is partner #1. Being with you the most, he or she may notice even minor changes and can communicate that valuable information to your treatment team. Sharing everything you can with your caregiver can help you get the best care possible. And remember, your caregiver needs support, too. Respect each other and have open, honest conversations about the disease and your feelings.

**YOUR TREATMENT TEAM**

**Movement Disorder Specialist**
Movement disorder specialists are neurologists with additional training in movement disorders like Parkinson’s disease. They may be involved in research or education in addition to working with patients, and are often located in a major medical institution.

**General Neurologist**
General neurologists specialize in diagnosing and treating disorders of the nervous system, including the brain, spinal cord and nerves. They treat a variety of neurological disorders, including Parkinson’s disease, Alzheimer’s disease and epilepsy.

**Primary Care Provider**
Primary care providers (PCPs) address a range of health-related problems, and are often the first health care professionals consulted when a person experiences an illness. A PCP can diagnose and treat common health-related problems, and can also direct patients to specialists, as needed.

**Allied Care Professionals**
Allied care professionals, such as physical therapists, occupational therapists, speech therapists, counselors and nutritionists, can be very important participants of your treatment team. Some people utilize these professionals continuously to help with some of the symptoms of PD, whereas others use them in response to an acute situation. Talk to your doctor about whether including an allied care professional on your team is appropriate for you.
Benefits of Adding a Movement Disorder Specialist to Your Team

A movement disorder specialist is a neurologist who has received additional training in Parkinson’s disease (PD) and other movement disorders including dystonia, chorea, tics and tremors. Whereas a general neurologist may treat patients with any of more than 100 neurological conditions, a movement disorder specialist focuses primarily on Parkinson’s disease and movement disorders.
The benefit of seeing a movement disorder specialist, often affiliated with a major university or teaching hospital, is that they are usually on the cutting-edge of knowledge and treatment of PD and other movement disorders and are often best equipped to tailor a plan of care for you and your specific needs.

A movement disorder specialist will work closely with your neurologist or current doctor to help ensure your needs are met. A movement disorder specialist is also likely to have relationships with other specialists and allied care professionals who could help provide a more holistic, or complete, level of care.

Even if you’ve been treated for Parkinson’s for some time, you may want to consult a movement disorder specialist to:

• Review your current medications and recommend adjustments if needed

• Assemble a team of health care professionals who will work together to determine the most appropriate treatment for your changing condition

Having the right partnership with your doctor can make a difference, not just in managing your Parkinson’s symptoms but also in how supported you feel overall. So it’s important for you to feel confident in that relationship and have access to a treatment team that meets your needs. Seeing a movement disorder specialist earlier in your treatment could help you with your future plan of care, by helping you prepare for changes in your Parkinson’s and adapt to them as they happen.

To search for a movement disorder specialist by zip code, visit: www.partnersinparkinsons.org/find-movement-disorder-specialist
Allied Care Professionals

Allied care professionals who can be valuable members of your treatment team are described below. Talk to your physician about how to build the right care team for you.

**PHYSICAL THERAPIST**
A physical therapist (PT) can help you maintain or improve mobility and manage certain types of pain by helping you develop strategies for walking and balance, for maintaining strength, and for keeping range of motion. In some cases a PT may also provide speech-language therapy to help with speaking, swallowing, reading and writing.

**OCCUPATIONAL THERAPIST**
An occupational therapist (OT) helps patients with physical impairment or mental limitations engage in the activities of daily life, such as self-care skills, education, work and social interaction. An OT will work to help someone with Parkinson’s disease keep certain physical abilities for as long as possible, and help them prepare and adapt to changes in their disease. An OT can teach you the best ways to transfer from sitting to standing, or what to do if you find yourself freezing or losing balance.

**SPEECH THERAPIST**
A speech therapist can help you maintain and improve communication skills. For people with Parkinson’s disease, that may include speaking too softly or in a monotone, or slurring or repeating words. A speech therapist can also help you in other important ways. As Parkinson’s progresses, swallowing can become more troublesome and can pose a choking risk when eating. This difficulty is called dysphagia. Speech therapists can teach you preventative methods of chewing and swallowing.

**THERAPIST/COUNSELOR**
A therapist/counselor can help people with Parkinson’s disease manage depression, anxiety and other emotional changes that can be part of coping with Parkinson’s disease.

**NUTRITIONIST/DIETITIAN**
A nutritionist/dietitian can make dietary recommendations, individualize nutrition programs, and educate you about diet and overall health.
Paying for Treatment

Maintaining adequate and affordable health insurance is challenging for just about anybody; for people with disabilities, it can be even more difficult. However, there are government programs that can help if you are eligible. In particular, the approval of the Affordable Care Act carries significant implications for the Parkinson’s community, though Parkinson’s political advocates are continuing to monitor potential concerns around prescription drug coverage and service limitations.

In addition to coverage under the Affordable Care Act, at some point you may consider exploring your eligibility for benefits from public disability programs. Some programs to consider include: Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), Medicare, State Health Insurance Counseling and Assistance Programs (SHIP), and Medicaid.

Private plans may also come into play. Many employers offer short-term and/or long-term disability plans that employees can choose to put money into while they are working. After leaving work because of disability (and keep in mind that different plans have different eligibility requirements as to what constitutes disability), qualified employees receive a portion of their salary while they remain disabled.

Private-sector plans usually begin paying out within a period of months after disability begins. That compares favorably with most government disability programs, which can take a year or more to approve a disability claim and begin disbursing payment. Some private plans pay a set amount regardless of what an insured patient receives from Social Security, while other plans may offset the benefits they pay by whatever disability payments the insured may receive from Social Security.
Community Support and Events

Support comes in many forms. What matters most is finding the kind of support that works for you.

Many patients and caregivers find that support groups are tremendously effective in helping them cope with the day-to-day realities of having Parkinson’s or having a loved one with the disease. Groups come in different formats—from large, formal meetings to smaller informal get-togethers—and you probably won’t be equally comfortable with or get the same help from all. If you don’t like the first group you find, it’s worth looking for one that suits you better. If you can’t find any you like in your area, consider starting one.

Many resources are available to help you find a support group, including: your physician or a member of his or her staff, local hospitals, and community calendars in local newspapers and websites of national Parkinson’s disease organizations.

If a live support group is not your style, online support groups are also available. They can be informative and inspiring, and may help alleviate the feeling of isolation that can make life with Parkinson’s disease more difficult.

Attending a Parkinson’s community event also may suit you. These often feature informative sessions as well as an opportunity to meet other people with Parkinson’s and caregivers in your area.
Partners in Parkinson’s Resources
Partners in Parkinson’s is coming to 25 cities in 2014 and 2015 providing information, resources and opportunities to meet patients, caregivers and clinicians.

Hear from health professionals, researchers and people with Parkinson’s that no two cases of Parkinson’s disease are alike, and that having a doctor who understands and listens to you at every stage of Parkinson’s is often the first step in building a team of care providers that can help you live well at any stage of disease.

Through a full-day schedule of panel discussions, Partners in Parkinson’s events will offer new insights on topics including:

- How to make the most of your relationship with your doctor, and what to expect from specialist care
- Updates on promising research toward new treatments for Parkinson’s, and opportunities to participate in studies that need you
- How Parkinson’s affects relationships with family, friends, spouse — and strategies for keeping these vital connections strong
- How engaging in the Parkinson’s community can help others as well as yourself

Along with the educational component, Partners in Parkinson’s events provide attendees with access to resources in their own community including opportunities to participate in research. Clinicians, allied care specialists, and researchers are available to discuss the roles they each play as part of a comprehensive team for Parkinson’s care.

Please visit www.partnersinparkinsons.org/attend-an-event to register for an event in your area
The Parkinson’s Advocate Program

Connect with an AbbVie Parkinson’s Disease Advocate*, a specially trained professional with the latest knowledge about Parkinson’s disease and access to resources. They are available to listen, understand your needs and offer you advice, support and inspiration.

A Parkinson’s Disease Advocate:
- Provides individualized support to both patients and caregivers of patients with Parkinson’s Disease
- Conducts one-on-one education about Parkinson’s Disease
- Supports you by phone or in person
- Makes suggestions to help you have better conversations with your doctor about your Parkinson’s symptoms and progression
- Helps you find a movement disorder specialist—a doctor who specializes in movement disorders, including Parkinson’s Disease

To sign up for a Parkinson’s Advocate, visit: www.partnersinparkinsons.org/parkinsons-advocate-registration

After you sign up, your Advocate will reach out and take the time to understand your individual needs by phone or even in person.

* The Parkinson’s Disease Advocate Program is not a replacement for a medical professional and your Advocate will not provide medical advice. The Parkinson’s Disease Advocate Program is supported by AbbVie and all advocates are employed through AbbVie.
About Partners in Parkinson’s

The Michael J. Fox Foundation for Parkinson’s Research & AbbVie have partnered to create a multifaceted strategic health initiative, called Partners in Parkinson’s, which aims to fill in knowledge gaps and provides new educational tools and resources for the Parkinson’s community to help Parkinson’s patients and caregivers optimize care at every stage of the disease, now and in the future.

• Partners in Parkinson’s hosts in-person educational events around the country that connect patients and caregivers with education and resources for managing Parkinson’s disease, as well as information on current Parkinson’s research and opportunities to meet other patients, caregivers and clinicians.

• The Partners in Parkinson’s website connects patients with a movement disorder specialist finder provided in collaboration with the International Parkinson and Movement Disorder Society.

• Parkinson’s Disease Advocates provide one-on-one support to patients and caregivers seeking advice and resources.

About The Michael J. Fox Foundation for Parkinson’s Research

The Michael J. Fox Foundation for Parkinson’s Research is dedicated to finding a cure for Parkinson’s disease through an aggressively funded research agenda and to ensuring the development of improved therapies for those living with Parkinson’s today. For further information on the foundation, please visit www.michaeljfox.org.

About AbbVie

AbbVie is a global, research-based biopharmaceutical company formed in 2013 following separation from Abbott Laboratories. The company’s mission is to use its expertise, dedicated people and unique approach to innovation to develop and market advanced therapies that address some of the world’s most complex and serious diseases. For further information on the company, please visit www.abbvie.com.