



Freezing or Sweating Falls When Walking with Parkinson's Disease

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Disclosure



Dr. Horak has significant financial interest in ADPM, a company that may have a commercial interest in the results of this research and technology. This conflict has been reviewed and managed by OHSU.

Objectives



1. Understand how the brain controls walking and balance

- Balance and gait should be automatic
- The basal ganglia works with the frontal cortex and brainstem

Discover what types of balance impairments result in freezing and falls

- Small stepping responses (multiple weight shifts)
- Lack of automaticity (dual-tasks)
- Inability to stop inhibition (cognitive deficit)

3. Explore what can be done to minimize freezing and falls

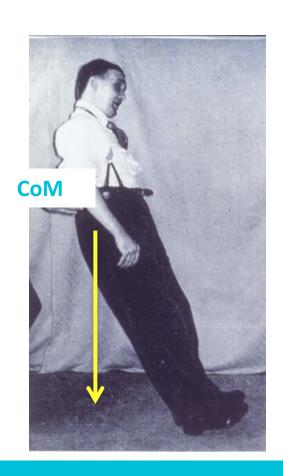
- Biofeedback and Cueing
- Exercise: Dance, Tai Chi, Agility, Cognitive

What Is Balance?



An active brain process that controls the body center of mass over its base of support



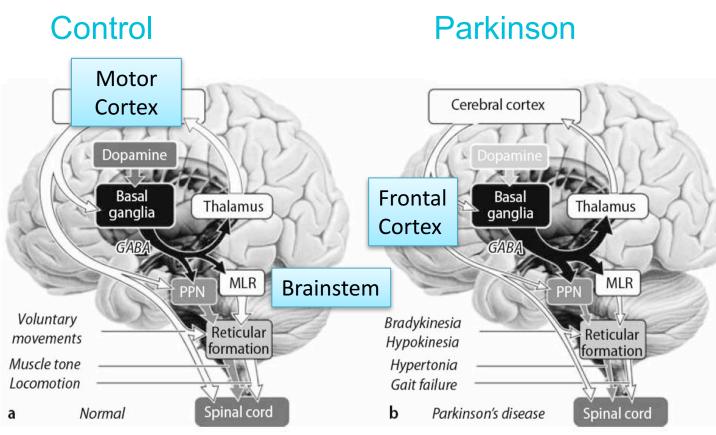


Walking is falling and catching yourself



Brain Control of Balance and Walking: What Goes Wrong in PD?







PD: too much
BG inhibition of
Motor Cortex and
Brainstem...

So rely more on Frontal (cognitive) cortex.

What Is Freezing of Gait (FoG)?





FoG:

"a brief, episodic absence or marked reduction of forward progression of the feet despite the intention to walk. A feeling the feet are glued to the floor..."

Usually associated with rapid trembling of the knees (weight shifting) as try to start walking.

Tricks can help overcome FoG.

Nutt, et al, Movement Disorders

Turning 360 Degrees is **Best Way to Freeze**







Falls while turning are common and dangerous-

Lead to fractured hips!

We Turn 1,000 Times a Day!

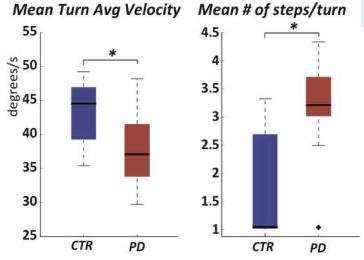


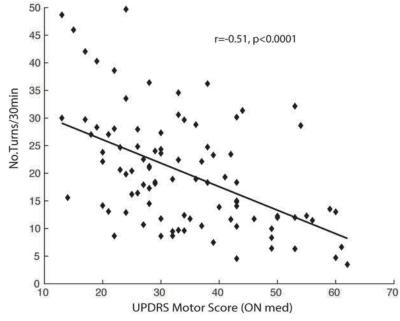


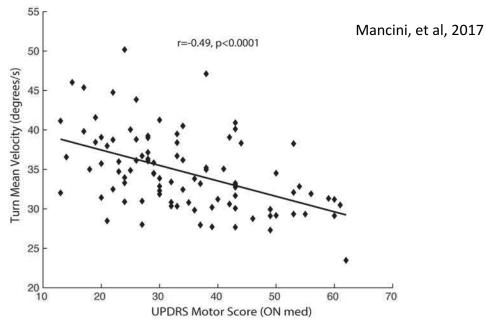
Turning at Home Is Related to Severity PD







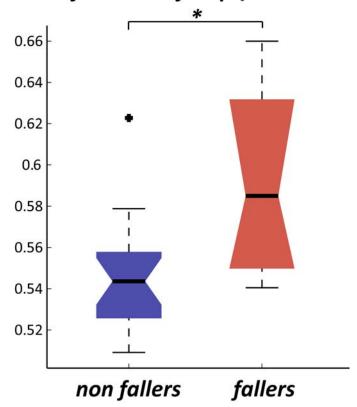




Turning Variability at Home Predicts Falls



CoV of mean # of steps/turn



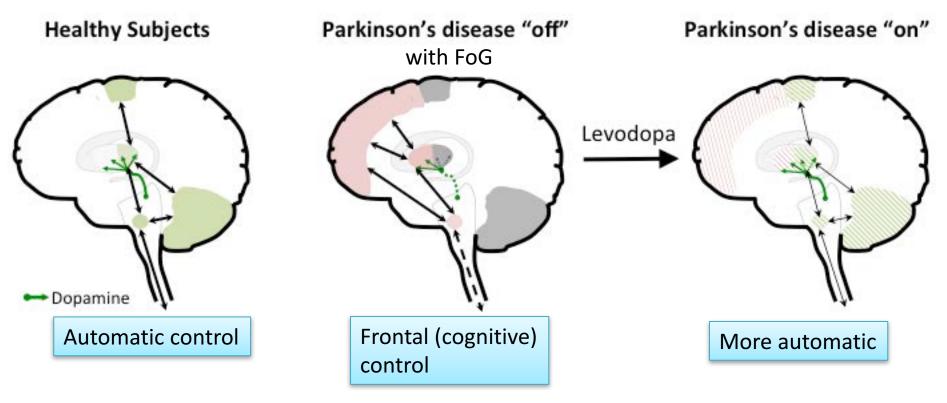
More variable turns may reflect less automatic turns.

Mancini et al, 2016





Why are Balance and Walking Less Automatic in PD (especially with FoG)?



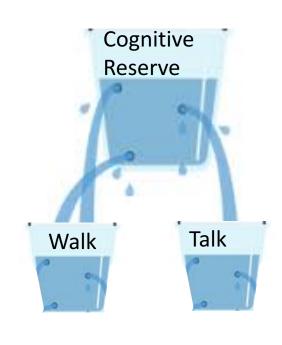
Gilat et al. 2017

Balance and Walking Need Attention More Attention in PD, esp. with FoG!



Walking slows when talking Thinking slows when walking





More Difficult the Balance Task, the More Attention is Needed



But practice can make walking and turning more and more automatic





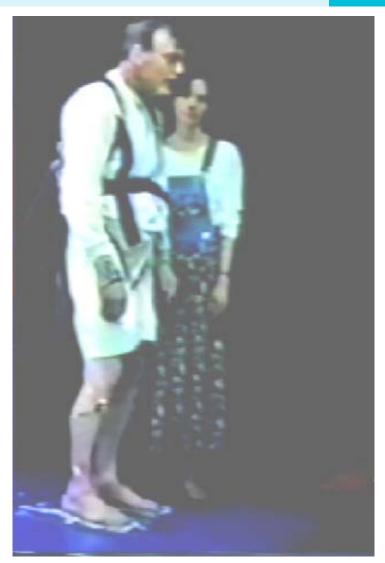
Balance Stepping Response is Impaired by Dual Tasking

Expert Briefings Parkinson's Foundation

No Cognitive Task

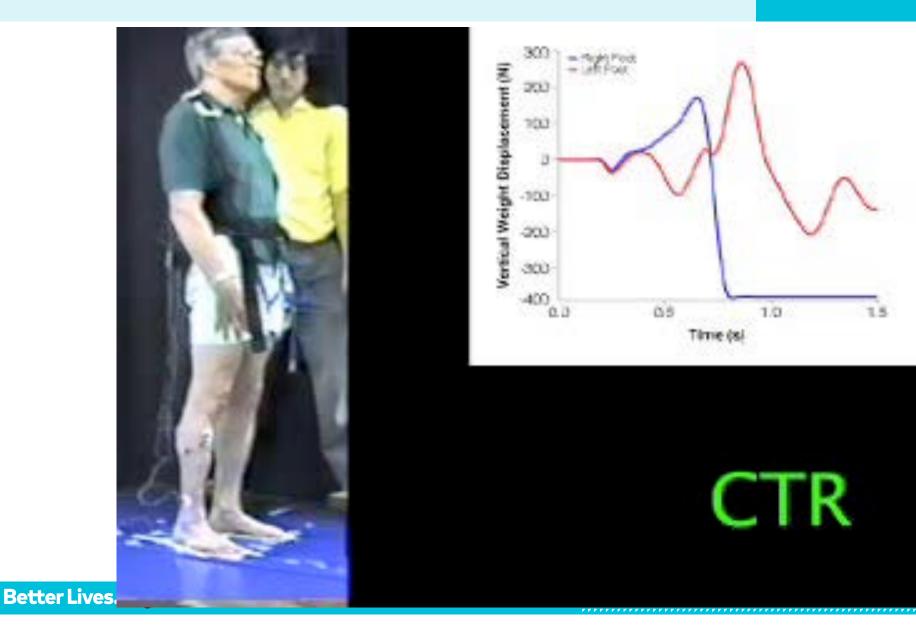






Stepping to Recover Balance Requires Weight Shifts



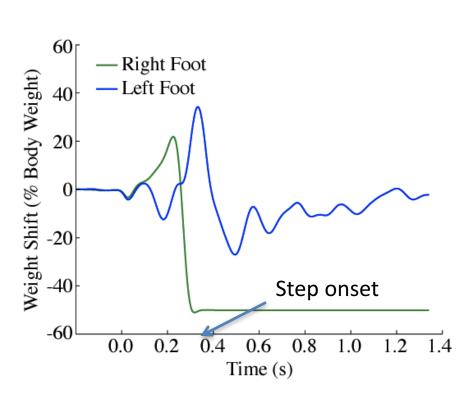


Freezing is Associated with Multiple Postural Weight Shifts: As if Can't Inhibit Balance to Start Walking

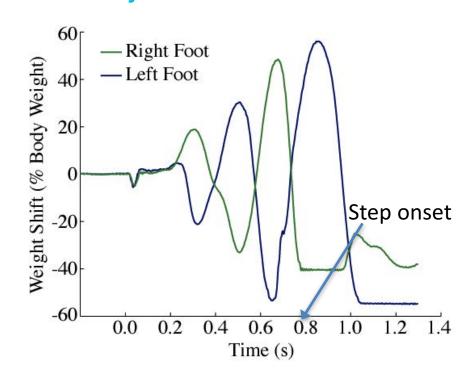


Jacobs et al, Exp Neurology 2009

Control Subject



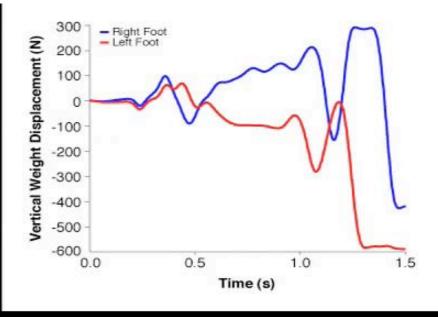
PD Subject

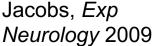




Freezer Using Multiple Weight Shifts with Small Steps for Stepping Response.



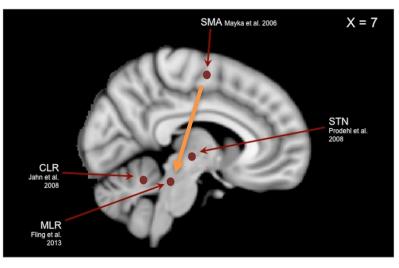


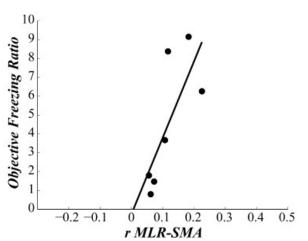


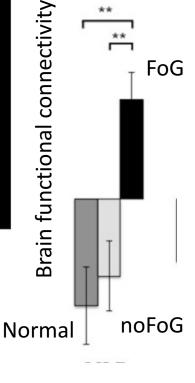


FoG is Associated with Too Much Frontal Cortex Control of Brainstem







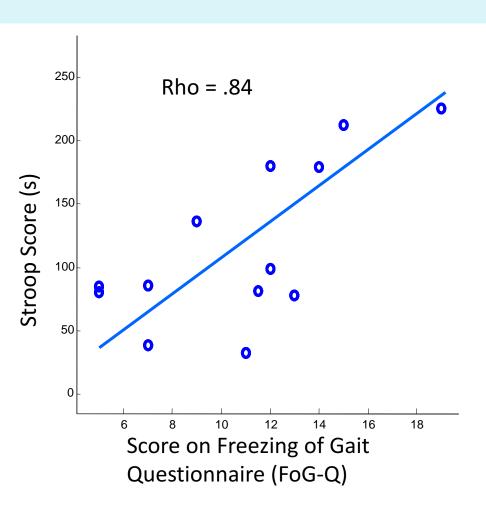


FoG involves too much cognitive control of balance/gait so less automatic.

Fling, et al, 2015

Freezers Have Difficulty Releasing Inhibition So Can "Go"







BLUE GREEN YELLOW

PINK RED ORANGE

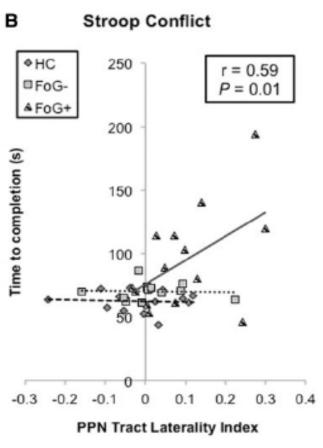
GREY BLACK PURPLE

TAN WHITE BROWN

Cohen et al, 2014
Park and Related Disorders

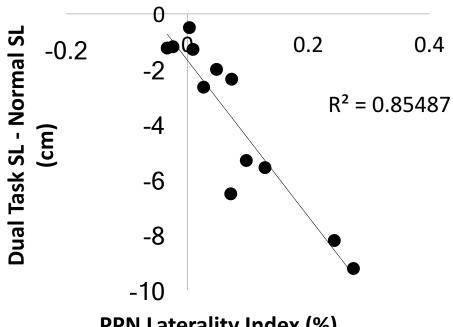
Stroop Cognitive Task and Dual Task Cost on Gait are Both Related to Brain Inhibition Pathway from Frontal Cortex to Brainstem.





Brain Inhibition Pathway

Fling et al. Brain 2013



PPN Laterality Index (%)

Brain Inhibition Pathway

Peterson et al. 2017

Why Is it Hard to Walk and Chew Gum?



Attention is required for balance!

 It is difficult for the brain to control balance and thinking at the same time

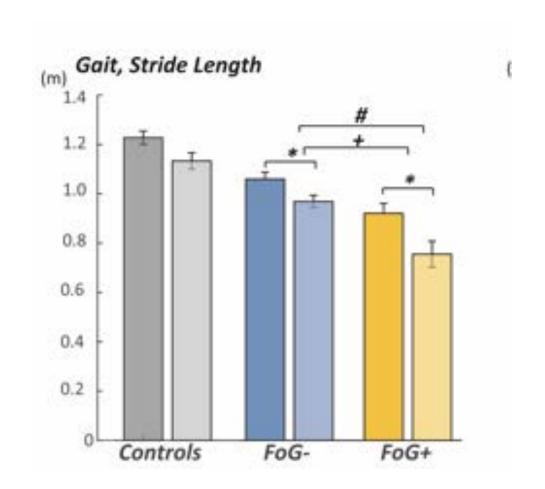


- Poor balance requires more attention
- Attention can be reduced by aging and PD
- As skilled tasks become more AUTOMATIC, they require less attention

Freezers Require More Attention for Balance and Walking



Dual Task Cost is larger in Freezers than Nonfreezers for balance and walking.

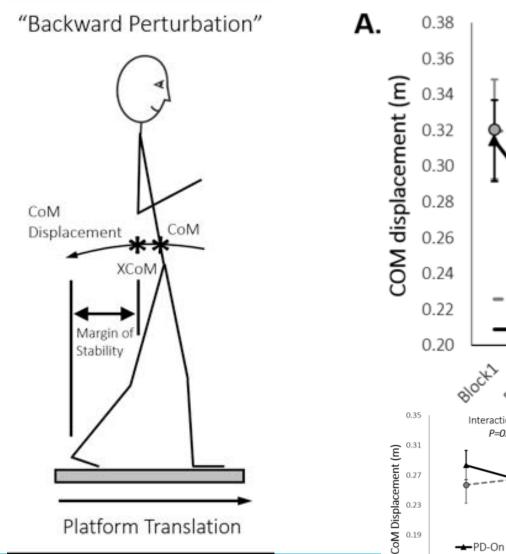


Bienvenida Gait and Posture, 2017

Can PD Balance be Improved? YES!



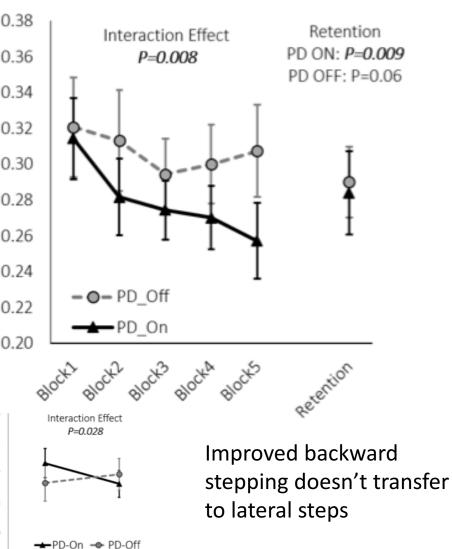
But take your levodopa for learning!



0.15

Day 1

Day 2



Improved Balance Responses with Practice: Especially When ON Levodopa

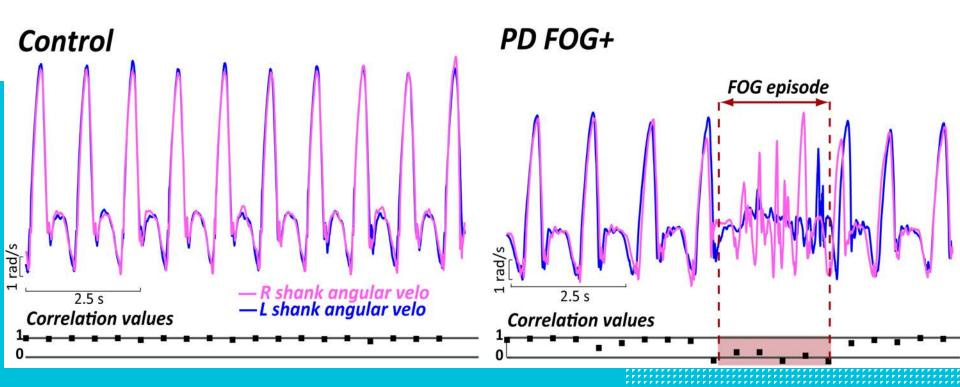








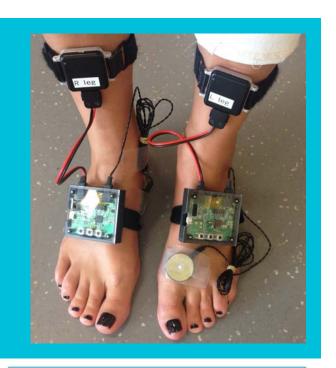
Biofeedback to Reduce Freezing of Gait



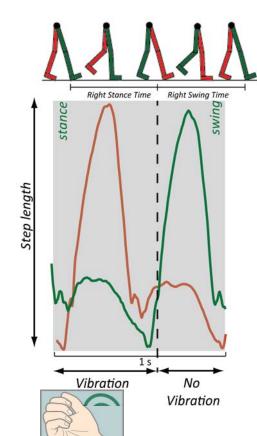
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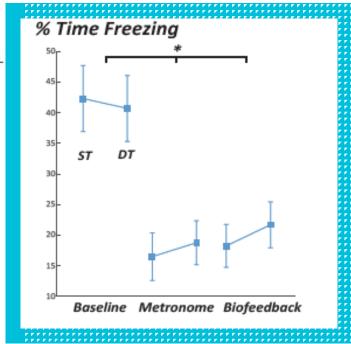


Tactile Biofeedback During Stance Phase Reduces FoG



Mancini, et al, MDS, 2016





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Vibrotactile Biofeedback Can Reduce FoG





Baseline Freezing during Turns



Less Freezing with Vibrotactile Biofeedback

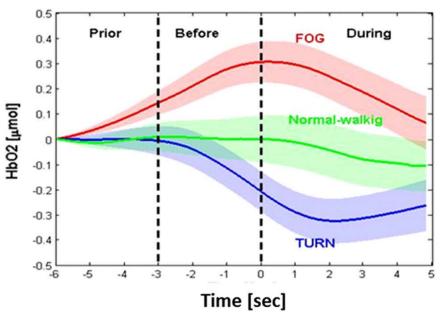


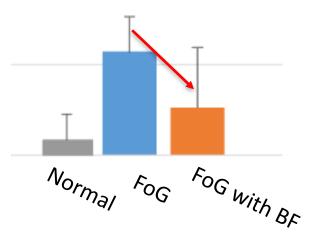


Frontal Brain Activity Increases Before FoG Biofeedback Can Reduce this Hyperactivity











Exercise



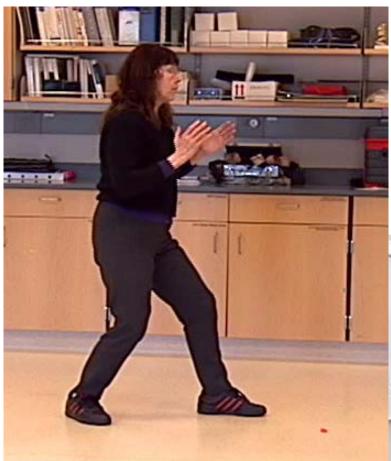
 The only intervention that significantly reduces risk of falling!

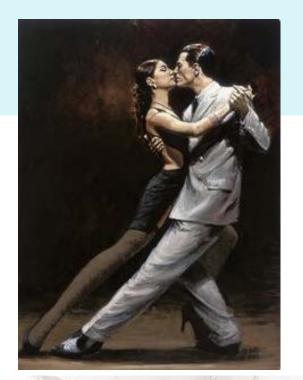
(Gillespie et al, Cochrane Review, 2009)

• People receiving <u>Balance Exercises</u> were 20% less likely to fall.

Exercises to Improve Balance



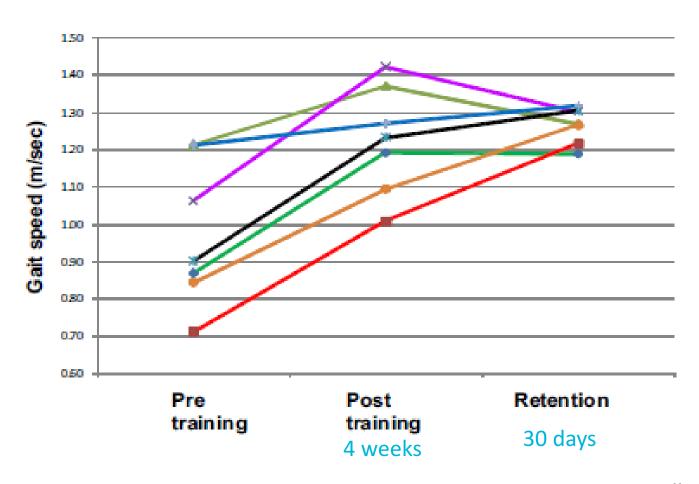






Dual Task Walking in People with PD Can Improve with Training!



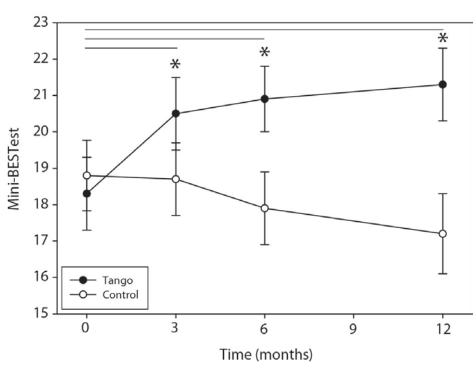


Killane, 2015

Tango Can Improve Balance in PD







Earhart, G, et al

Boxing Can Improve Balance



Before practice



After 4 weeks practice



Agility Boot Camp









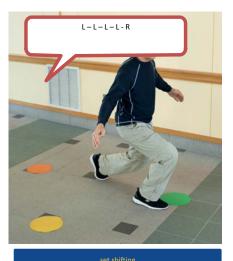














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FoG When Challenging and Stressful





FoG Improves with Practice

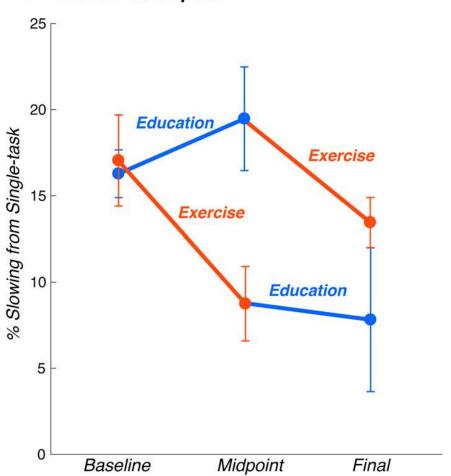


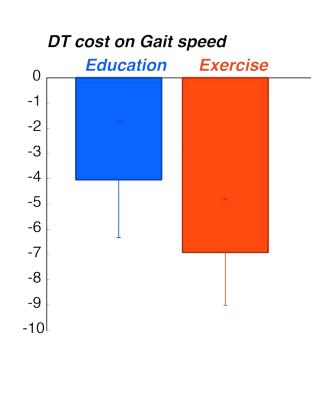


Exercise Can Improve Dual Task Cost



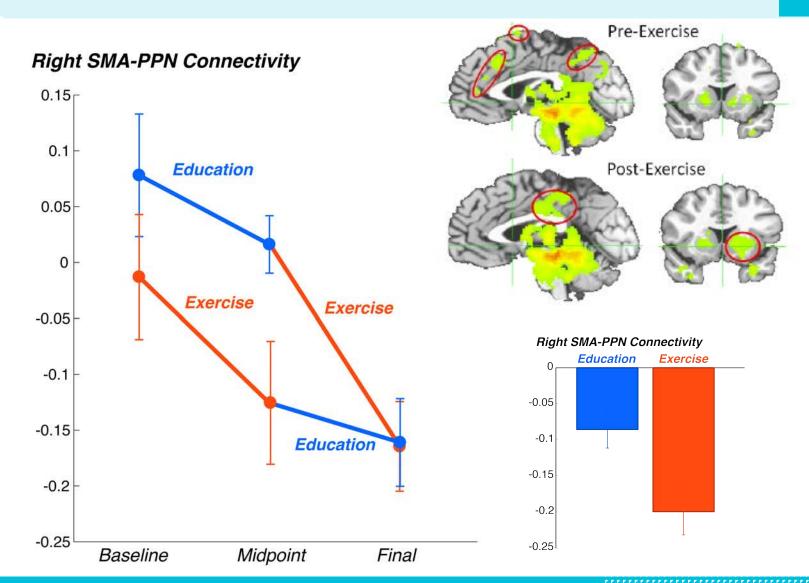
DT cost on Gait Speed





Exercise Can Improve Brain Connectivity

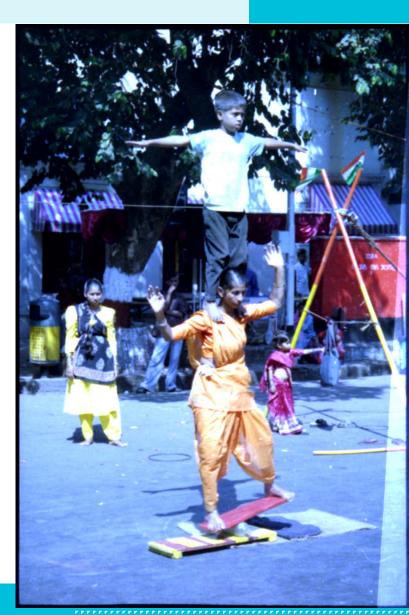




Good Exercises for PD



- Make you sweat (>80% HR)!
- At least 3x/week
- At least 30 minutes
- Get harder as you get better!
- Join others to stick with it!
- Variety is the spice of life!





Main Summary Points



- Balance and gait should be automatic.
- PD and FoG results in less automatic control of balance/gait.
- Freezing and falls in PD:
 - Small stepping responses
 - Lack of automaticity (dual-tasks)
 - Inability to stop inhibition (cognitive deficit)
- Exercise can reduce falls

OHSU Balance Disorders Laboratory



Sponsors:

- The NIH-National Institute on Aging
- The Kinetics Foundation
- The NIH-National Institute of Neurologic Disorders and Stroke
- NIH- National Center of Medical Rehab Research
- Oregon Health and Science University
- Department of Veterans Affairs

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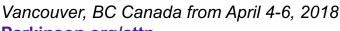


Upcoming Educational Programs



Allied Team Training for Parkinson's Disease™ (ATTP)

ATTP is a three-day course designed to increase knowledge of PD and build capacity for comprehensive inter-professional care in the treatment of Parkinson's disease.



Parkinson.org/attp



Apply to the Edmond J. Safra Visiting Nurse Faculty Program to help us prepare the next generation of nurses to care for the growing population of people with PD. Parkinson.org/edmondjsafranursing

Physical Therapy Faculty Program

Learn from internationally recognized PT experts in an intimate classroom setting and help change the future of physical therapy care in Parkinson's.

Parkinson.org/ptfaculty









Educational Resources





Order Materials

Information about Parkinson's symptoms, medications, resources and more.
Parkinson.org/books

Aware in Care Kit

Includes tools and information for people with PD to share with hospital staff during a planned or emergency hospital stay.

Parkinson.org/awareincare





National Helpline

Available at 1-800-4PD-INFO or helpline@parkinson.org Monday through Friday 9:00 AM – 5:00 PM ET.

Podcast: Substantial Matters

New episodes every other Tuesday featuring Parkinson's experts highlighting treatments, techniques and research. Parkinson.org/podcast

