

People with Parkinson's disease (PD) may experience low blood pressure (*hypotension*) at some point during their disease progression. In fact, one in five people with PD are affected by orthostatic hypotension, also called postural hypotension: low blood pressure that is experienced when changing positions (e.g., moving from lying down or sitting to standing up). This occurs because PD can impair the body's natural reflex mechanism that causes automatic adjustments of your blood pressure when you change position, exercise, eat, or are out in warm or cold weather. Also, anti-Parkinson's medications (and many other drugs) can lower blood pressure.

Blood pressure decreases when blood vessels relax or lose their ability to constrict. If there is less fluid in the body, the circulating blood volume is decreased and blood pressure drops. Normal blood pressure range is usually 100/60 to 140/90. While some people will not experience any warning signals, drops in blood pressure below 100/60 may result in dizziness, lightheadedness, or weakness. If severe, hypotension can lead to fainting and/or falling. Individuals have also used terms such as giddiness, sleepiness, tiredness, and mental or visual blurring to describe what has actually turned out to be low blood pressure.

These sensations will often intensify upon standing or after walking. Although any time of day is possible, many report the occurrence more in the early morning hours and/or 1-2 hours after receiving a dose(s) of medication.

It is important to understand the cause and treat the problem before an episode of fainting or falling occurs. Monitoring blood pressure – lying down as well as standing up – should be routine. Here are a number of simple measures which can be used to restore normal blood pressure regulation.

Evaluate Medications

Ask your doctor to re-evaluate your complete medication list. Adjustments of the medications themselves or the timing sequence might be all that is needed.

Increase Fluids and Salty Foods

Interventions such as increasing fluids and salt in the diet can be very effective. Drinking eight glasses of water per day and eating salty foods are commonly recommended. With more fluid in the body, circulating blood volume is enhanced and blood pressure increases.

Caffeine

In addition to adding fluid, drinking caffeinated coffee enhances blood vessel constriction, thus increasing blood pressure.

Frequent, small meals

Blood pressure is often lowered after a large meal, so it can help to eat frequent, smaller meals. Alcohol should be avoided, as it has a tendency to dilate blood vessels, contributing to lower blood pressure.

Environment

Warm weather, hot baths, or any activities that cause blood vessels to relax should be avoided.

Clothing

Waist-high compression/support hose (e.g., Jobst® stockings or Sigvars® pantyhose) can be helpful in maintaining blood pressure.

Slow Position Change

When rising from a lying position, sit on the edge of the bed for a few minutes, then stand up slowly, holding on to a secure support.

Bed Position

Raise the head of the bed 30-40 degrees; lying flat for a prolonged period of time can contribute to lower blood pressure.

Medication

Occasionally, salt tablets or medications such as droxidopa (Northera™), fludrocortisone (Florinef®), and Proamatine (Midodrine®) are prescribed. By increasing blood volume and promoting vascular constriction, these drugs help raise blood pressure. The risks associated with using these drugs can be controlled with close medical supervision. Some patients respond better using a combination of treatments.