What is Parkinson’s disease?
Parkinson’s disease (PD) is caused by the deterioration of neurons in the brain that produce dopamine, an essential neurotransmitter that controls smooth, coordinated muscle function. When approximately 60-80% of dopamine-producing cells are damaged, motor symptoms of PD appear.

How common is PD?
An estimated 10 million people around the world suffer from Parkinson’s. In the United States, 60,000 new cases are diagnosed each year, and approximately 1 million Americans currently live with PD. It is the 14th leading cause of death in the United States and the second most common neurodegenerative condition after Alzheimer’s. The prevalence of PD will increase substantially in the next 20 years due to the aging of the population.

Who does PD affect?
Statistics show that men are slightly more likely to get PD than women; however, PD recognizes no social, ethnic, economic, or geographic boundaries. While it usually develops after age 60, 15% of those diagnosed are under 50 years old. Between 5 and 10% of patients are diagnosed under the age of 40, which is called Young-Onset Parkinson’s disease.

How is PD diagnosed?
Diagnosis can be difficult because there is no standard test for PD other than clinical examination. The disease should be diagnosed by a neurologist or a movement disorder specialist. While there have been considerable advances in treatment and care, the cause is still unknown. Scientists now believe that a combination of genetic and environmental factors cause PD.

Is there a cure for PD?
There is no cure for PD, but there are medications, therapies and surgical treatment options. No standard treatment for PD applies to every patient.

What does the future hold for people living with PD?
PD generally progresses slowly—people with PD can live for 20 years or more from the time of diagnosis. Medication is only part of the treatment plan for effectively managing PD. Exercises may help slow progression and maintain balance, mobility and daily living activities. Patients benefit from comprehensive care teams, including social workers, physical therapists, nutritionists, speech-language pathologists and psychiatrists. Individualized treatment and care plans can enhance quality of life.