Parkinson’s Exercise Recommendations

Exercise and physical activity can improve many motor and non-motor Parkinson’s symptoms:

**Aerobic Activity**
- 3 days/week for at least 30 mins per session of continuous or intermittent at moderate to vigorous intensity
- **TYPE:** Continuous, rhythmic activities such as brisk walking, running, cycling, swimming, aerobics class
- **CONSIDERATIONS:** Safety concerns due to risks of freezing of gait, low blood pressure, blunted heart rate response. Supervision may be required.

**Strength Training**
- 2-3 non-consecutive days/week for at least 30 mins per session of 10-15 reps for major muscle groups; resistance, speed or power focus
- **TYPE:** Major muscle groups of upper/lower extremities such as using weight machines, resistance bands, light/moderate handheld weights or body weight
- **CONSIDERATIONS:** Muscle stiffness or postural instability may hinder full range of motion.

**Balance, Agility & Multitasking**
- 2-3 days/week with daily integration if possible
- **TYPE:** Multi-directional stepping, weight shifting, dynamic balance activities, large movements, multitasking such as yoga, tai chi, dance, boxing
- **CONSIDERATIONS:** Safety concerns with cognitive and balance problems. Hold on to something stable as needed. Supervision may be required.

**Stretching**
- >2-3 days/week with daily being most effective
- **TYPE:** Sustained stretching with deep breathing or dynamic stretching before exercise
- **CONSIDERATIONS:** May require adaptations for flexed posture, osteoporosis and pain.

See a physical therapist specializing in Parkinson’s for full functional evaluation and recommendations.

Safety first: Exercise during on periods, when taking medication. If not safe to exercise on your own, have someone with you.

It’s important to modify and progress your exercise routine over time.

Participate in 150 minutes of moderate-to-vigorous exercise per week.

Helpline: 800.473.4636/Parkinson.org