Many people with mid-stage to advanced Parkinson’s disease (PD) experience “freezing.” Freezing is the temporary, involuntary inability to move. Not all people with PD experience freezing episodes, but those who do have a greater risk of falling. The problem can occur at any time. Some people are more prone to freezing episodes than others. Usually, it only lasts a few seconds, but it is one of the more frustrating and often dangerous symptoms of PD.

What is freezing?
When a person experiences freezing, they may feel like their feet are stuck in place or it may be difficult to get up from a chair. Freezing may also affect other parts of the body or your speech. While the cause is unknown, many people with Parkinson’s freeze when they are due for the next dose of dopaminergic medications. This is called “off” freezing. Usually, freezing episodes lessen after taking the medicine.

What triggers a freezing episode?
Freezing episodes can happen at any time, but tend to happen more often when a person with Parkinson’s is in transition. This can include starting to move — transitioning from standing to walking — or transitioning within a space, like walking through doorways, turning a corner, turning around or stepping from one type of surface to another. Freezing can increase in stressful situations or can be triggered by attempted multitasking.

Is freezing dangerous?
About 38 percent of people living with PD fall each year. PD-related falls occur mostly when turning or changing directions and are often related to a freezing episode. Not everyone living with PD will experience freezing episodes, but those who do are at a much higher risk of falling. Freezing creates a danger of falling because the beginning and end of a freezing episode are unpredictable. The unpredictability of freezing, along with efforts by well-meaning companions to force the person with PD to move, may cause loss of balance and falls.

Managing freezing episodes
Talk to your doctor about freezing episodes. Adjusting your treatment may be helpful. You should also ask about seeing a physical and/or occupational therapist. Physical therapists trained in Parkinson’s disease can teach you techniques that reduce your risk of falling. An occupational therapist can help you to minimize the risk of falls in your home.

How can a friend or family member help?
If your loved one is frozen, remain calm. Wait patiently for several seconds to see if the episode passes and be sure not to rush or push the individual during a freezing episode. If the person is unable to move without assistance, try placing your foot perpendicular to the person and ask them to step over it. You can encourage the individual to try marching or counting, or to try some of the other tips mentioned on the back of this page. If your loved one stays frozen, you can try to help rock them gently from side to side.
TIPS: How to Get Moving When You Freeze

✓ Be aware of freezing triggers and prepare strategies in advance.
✓ March or goose step (swing your leg high and parallel to the ground with knees locked).
✓ Shift the weight of your body from one leg to another.
✓ Turn on music and step in time with the rhythm. If you freeze frequently, wearing a radio or smart phone can help. If you are not able to turn on music while you are frozen, try humming, singing or counting.
✓ Imagine a line to step over or focus on a target on the floor to step on. Consider using a mobile laser device to create a line in front of you to step over.
✓ Turn by walking half a circle or square instead of by a pivot turn.

If you or your loved one experience freezing episodes and want to learn more, watch our Expert Briefing webinar “Freezing or Sweating Falls When Walking with Parkinson’s Disease,” or call the Parkinson’s Foundation Helpline at 1-800-4PD-INFO (473-4636).