Parkinson’s disease (PD) is a progressive neurodegenerative disorder that causes a gradual loss of brain cells that produce dopamine, a chemical necessary for movement. As dopamine decreases over time, movement becomes more difficult for people with PD. Dopamine also affects mood and motivation. In addition to dopamine, Parkinson’s changes several other brain chemicals.

How common is Parkinson’s?
Nearly one million people in the U.S. and 10 million people worldwide are living with PD. About 90,000 Americans are diagnosed with Parkinson’s each year. It is the second most common neurodegenerative condition after Alzheimer’s. The number of people with PD will increase substantially in the next 20 years due to our aging population.

What are the symptoms of Parkinson’s?
The most visible and well-known signs of PD are movement (or motor) symptoms such as tremor, slow movement, stiffness and balance issues. However, most people also develop non-movement (or non-motor) symptoms that impact mood and quality of life. These can include anxiety, sleep issues and thinking changes.

Initial symptoms can be mild and sometimes mistaken for signs of aging. To learn about early signs of Parkinson’s, visit Parkinson.org/EarlySigns.

How does Parkinson’s progress?
Parkinson’s is a complex disease that affects everyone differently. For most people with PD, symptoms develop gradually over many years and worsen over time.

Who does Parkinson’s affect?
Parkinson’s is typically diagnosed after 60, but people under 50 can also have PD. This is known as young-onset Parkinson’s disease (YOPD). About 4% of people with Parkinson’s have YOPD. Men are 1.5 times more likely to have Parkinson’s than women, and certain geographic areas and ethnic groups experience higher rates of PD.

What causes Parkinson’s?
Researchers believe that Parkinson’s is caused by a combination of genetic, environmental and other factors. About 10 to 15% of people with PD have a genetic link.
How is Parkinson's diagnosed?
There is no single test for Parkinson's. A doctor makes a diagnosis based on a person's symptoms, medical history and a physical examination. Sometimes conditions that look like PD can be ruled out by additional lab tests and imaging. To consider a diagnosis of Parkinson's disease, a person must have bradykinesia (slow movement) in addition to one or more of the following:

- Shaking or tremor in a limb that occurs while it is at rest
- Stiffness or rigidity of the arms, legs, or trunk
- Trouble with balance and falls

A PD diagnosis can take time. When symptoms first appear, many people choose to speak to their family doctor, who may provide a referral to a neurologist if Parkinson's is suspected. Some neurologists, called movement disorder specialists, have additional training in diagnosing and treating PD and other movement disorders.

How is Parkinson's treated?
Though Parkinson's varies from person to person, most people with PD need to take medications that boost, mimic or replace dopamine to manage their symptoms. Studies show that regular exercise also can benefit movement and non-movement symptoms and can improve overall quality of life. For some people, surgical intervention may be an option.

People with PD can experience a wide range of complex symptoms, so building a team of healthcare professionals is key. This team may include physical, occupational and speech therapists as well as other specialists, including mental health professionals, a urologist or gastrointestinal doctor. To learn more about medications and other treatments for Parkinson's, visit Parkinson.org/Treatment.

About the Parkinson's Foundation
We make life better for people with Parkinson's disease by improving care and advancing research toward a cure. In everything we do, we build on the energy, experience and passion of our global Parkinson's community.