Anxiety and Parkinson's Disease



Like people with other chronic diseases, those living with Parkinson's disease (PD) often struggle with mental health. While PD is known to affect many aspects of movement, research from the Parkinson's Outcomes Project has found that anxiety is a common symptom that can impact overall health and quality of life.

Feeling worried is an understandable reaction to a Parkinson's diagnosis. When feelings of constant worry or nervousness start to interfere with daily life, a person may experience anxiety, which is more serious.

Forms of Anxiety

Anxiety is not simply a reaction to the diagnosis of Parkinson's but is, instead, a part of the disease itself caused by changes in brain chemistry. Up to 40% people with PD will experience one of these forms of anxiety:

Generalized Anxiety Disorder, is characterized by feelings of nervousness and recurring thoughts of worry and fear. Physical symptoms that may accompany these feelings include butterflies in the stomach and nausea, trouble breathing or swallowing, racing of the heart, sweating and increased tremors.

Anxiety Attacks, or panic attacks, usually start suddenly with a sense of severe physical and emotional distress. Individuals may feel as if they cannot breathe or are having a heart attack. These episodes usually last a few minutes to an hour, particularly when associated with "off" periods (times of day when medication is not working), though they can last for longer periods of time.

Social Avoidance, or social anxiety disorder, involves avoiding everyday social situations because of a fear of embarrassment caused by having PD symptoms, such as tremor, dyskinesia (involuntary movements) or noticeable trouble walking in public.

Obsessive-Compulsive Disorder (OCD) may cause persistent, unwelcome thoughts or images (obsessions), and the urgent need to engage in certain rituals (compulsions) to try to control or rid themselves of these thoughts.

Anxiety can begin before a PD diagnosis or develop much later on. While some people with Parkinson's experience anxiety on its own, many are diagnosed with anxiety along with depression. Anxiety is less well-studied than depression, but it may be just as common.

Causes of Anxiety

Psychological Factors - Common fears and worries that go along with PD may trigger anxiety. One fear is of being unable to function independently, particularly during a sudden "off" period.

Biological Factors - Many of the brain pathways and chemicals affected by Parkinson's are the same as those that influence anxiety and depression. In some cases, anxiety is directly related to changes in motor symptoms. Specifically, people who experience "off" periods can develop severe anxiety or anxiety attacks during these states.

How is anxiety diagnosed?

Anxiety is usually diagnosed by a primary care physician, or a mental health professional, who will ask questions about your symptoms, in particular, any mood or behavioral changes you

have experienced. For people with an anxiety disorder, symptoms can become so intense that they are unable to function normally in life.

In general, symptoms of anxiety may include:

- Excessive fear and worry
- Uncontrollable or unwanted thoughts
- Sudden waves of terror
- Nightmares
- · Ritualistic behaviors
- Problems sleeping
- · Pounding heart
- · Cold and sweaty hands
- Dizziness
- Nausea

With Parkinson's, an anxiety disorder diagnosis is made only if the symptoms involve a clear change in a person's previous behavior and are not easily confused with motor symptoms. For example, even though there may be a legitimate concern that a tremor or change in walking ability may be noticed in public, a diagnosis of social avoidance is only made if the person realizes that the concern is excessive and interferes with the person's social or work life.

Treating Anxiety

There are several treatment options for anxiety, including medications, psychological counseling (psychotherapy) and complementary therapies. Depending on the severity of symptoms, psychotherapy can be used alone or combined with medication. Care should be tailored to each person's individual needs.

Psychotherapy

Psychotherapy or "talk therapy" refers to many varieties of counseling. This treatment can help people with anxiety understand and better manage their symptoms. Psychotherapy offers two advantages: no drug side effects and coping skills that can be used over the long term.

Cognitive behavioral therapy (CBT) is effective at helping people change negative thinking patterns and behaviors to solve their problems and engage in life. CBT encourages people to develop more positive thoughts about themselves, the environment around them and their future. Counselors can provide vital support, understanding and education to individuals, couples, families or in a group context.

Complementary Therapies for Anxiety

Complementary therapies are often integrated with other anxiety treatments. Some of these include:

- · Relaxation techniques
- · Massage therapy
- Acupuncture
- Aromatherapy
- Meditation
- Music therapy

Tips for Living with Anxiety

- Educate yourself about PD and its symptoms, including anxiety.
- Keep a diary of your moods, medications and PD symptoms.
- ✓ Notice what triggers your anxiety.
- ✓ Talk with your doctor about anxiety.
- Share your feelings with loved ones, so they can understand your emotions better and help you cope.
- Find a support group for people with PD.
- Be flexible in your approaches to coping with anxiety; if one coping strategy doesn't work, explore others.
- Know that everyone experiences anxiety differently.

Call our Helpline for more information at 1-800-4PD-INFO (1-800-473-4626).

