Diagnosis Parkinson’s disease: You are not alone
**DIAGNOSIS: **Parkinson’s Disease

“I couldn’t stop the tremor in my left hand, and mentioned it to my internist during a routine check-up. He looked at my hand, nodded and referred me to a neurologist. The neurologist noted the tremor, had me walk away from him, turn and walk back. He checked my balance. Then he turned to me and said, ‘You’re in the very early stages of Parkinson’s disease. See me again in three months.’ That was it. I left the hospital and walked down the street in a daze. I remember thinking, I’m no longer one of the multitude. I’m someone with a chronic, debilitating illness. My world has changed.”

Lilly*, 68 | age 65 when diagnosed

You may see yourself in the above story. Or your experience may have been different. Unexplained rigidity, perhaps…difficulty getting out of a chair…stiffness about the neck and shoulders. Your friends ask if something is wrong…muscle spasms, particularly in your legs…slow or shuffling gait — people start passing you on the street…feelings of depression, for no discernible reason…a family history of Parkinson’s.

A sense that something was not right led you to make an appointment with a doctor.

You hoped to hear that the problem was minor and easily treatable. Then you learned:

**The diagnosis was Parkinson’s.**

*All names have been changed to protect privacy.*
“I fell, for no reason. I was heading from the men’s room to my office when my feet stopped still and I fell forward. When I told my wife about it, she insisted that I see a doctor. Following a series of tests, the doctor began to explain Parkinson’s disease. I can’t tell you what he said…I was stunned.”

Brian, 66 | age 61 when diagnosed

Most likely, your doctor offered some explanation of the illness. You heard words and phrases: chronic…progressive…treatment…dopamine…research. Perhaps, like Brian, you found it difficult to focus. Now, with that visit behind you, you think of questions you wish you had asked.

**Doctors understand that. As one neurologist put it:**

“When I tell a patient that he or she has Parkinson’s, I assume that there will be a gap between what I say and what they hear in the initial meeting. I want them to understand that handling the illness will be a step-by-step process. I expect that they will have more questions as time goes by.”

We trust you will find answers to some of your questions in this booklet. And that you’ll also find support. And hope.
YOU ARE NOT ALONE!

When you’re told that you have Parkinson’s, you may feel very much alone. That is not the case. As many as one million people in the United States have Parkinson’s disease. The average age of onset is 57 years, but it is not unheard of for people to be diagnosed with Parkinson’s in their 30’s, as well as in their 80’s. Men and women are almost equally affected.

You need not be alone. There are many professionals and organizations dedicated to helping people with Parkinson’s, and devoted to finding a cure. There are also many opportunities for you to meet and learn from others who have experienced what you are going through, and to raise public awareness and commitment to research through advocacy, fundraising and other initiatives.

“Parkinson’s is a part of my life, but it is not life itself.”

David, 56 | three years after diagnosis
UNDERSTANDING Your Diagnosis

WHAT IS PARKINSON’S DISEASE?

“...My handwriting became slow and tiny. I saw a neurologist who thought I had dystonia (an impairment of muscle tone), and suggested that I see a specialist in movement disorders. That doctor diagnosed my problem as Parkinson’s. My first thought? ‘Oh, good, it’s only Parkinson’s.’ Obviously, I really didn’t know anything about the disease.”

Judith, 48 | age 41 when diagnosed

In simplest terms, Parkinson’s is a chronic, slowly progressive disease of nerve cells (neurons) in the part of the brain (the substantia nigra) that controls muscle movement. Normally, these nerve cells produce a substance called dopamine, a chemical messenger that is responsible for transmitting signals from one group of cells to another, allowing coordinated function of the body’s muscles and facilitating smooth movement. When the cells die — and dopamine production is correspondingly reduced — people may experience tremors, movement problems such as bradykinesia (slowness), rigidity and impaired balance. Problems with thinking and behavior may also occur.

HOW IS THE DIAGNOSIS MADE?

Typically, your visit to the doctor begins with the doctor taking a medical history — in which your symptoms and concerns are noted — and continues with a neurological examination.

Making an accurate diagnosis of Parkinson’s — particularly in its early stages — is difficult, but a skilled practitioner can come to a reasoned conclusion that it is PD. To find a neurologist who specializes in movement disorders and is up-to-date on research and approaches...
to therapy, ask your family doctor or call a patient advocacy organization. The Parkinson’s Disease Foundation (800) 457-6676, the American Parkinson Disease Association (800) 223-2732 and the National Parkinson Foundation (800) 327-4545, maintain lists of PD specialists.

The doctor looks to see if your expression is animated. Your arms are observed for tremor, which is present either when they are at rest, or extended. Is there stiffness in your limbs or neck? Can you rise from a chair easily? Do you walk normally or with short steps, and do your arms swing symmetrically? The doctor will pull you backwards. How quickly are you able to regain your balance? These and other observations provide information about your condition.

A patient’s good response to levodopa (which temporarily restores dopamine action in the brain) may support the diagnosis. But this is not relevant if your doctor thinks you do not need any medication at this time. If in doubt about your diagnosis or if you need further information, you may want to seek a second opinion.

**FINDING THE RIGHT DOCTOR**

“My neurologist isn’t easy to reach. So, no, he’s not the handholding type. But I do feel that he’s at the cutting edge of what’s going on in the field. I want someone who has that kind of knowledge.”

*Patricia, 61 | seven years with this doctor*

Locating a qualified physician is a first step; next is considering whether the person you’ve seen is the right doctor for you. Keep in mind that you’ll be working with this specialist for many years. If the doctor/patient fit doesn’t feel right to you, it is alright — even recommended — that you seek a different match. You’ll be glad you did.
Think about the questions provided below when deciding if your doctor is the right doctor for you.

**Some things to consider:**

- Are you comfortable speaking with your physician?
- Do you feel respected by your doctor?
- Are questions answered to your satisfaction or do you come away from a visit feeling that you have not been taken seriously?
- Can you get in touch with the doctor between visits?

**IS PD HEREDITARY?**

Although there are a few families in which Parkinson’s is clearly inherited, for most people the genetic component is small. We do know that people over 60 who have a close relative with Parkinson’s have a two-to-four percent increased risk of being diagnosed compared with a one-to-two percent risk among the general population in this age group. In other words, the risk is low even in families which include more than one person with PD.

**WHAT CAN I EXPECT? WHAT CHANGES MIGHT I ANTICIPATE?**

Parkinson’s disease acts differently in different people. Some experience tremor; others do not. Handwriting may become small and cramped in some cases, but not in others. You may experience “freezing” — a feeling of being stuck in place — or you may not. Voice volume may be lowered in some cases, and speech may become slurred in others. The changes can be few or many, are often subtle, can change over time and are — for the most part — manageable.

Be aware: it is a mistake to look at someone with advanced Parkinson’s disease and believe you are looking into your own future! In some people, the disease progresses quickly. In most, change comes slowly. There are varying treatments for different stages. While there is, as yet, no cure for PD, there continue to be new and better ways to deal with the symptoms. Managing your illness is a step-by-step process, to be taken by you in close consultation with your doctor.
EXPLORING Treatment Options

EVERY ACHE AND PAIN IS NOT NECESSARILY PARKINSON’S

“...The worst day of this disease was the day I was diagnosed. The best day was when I understood that I could do something about it. It gave me back a sense of control in my life, and some power.”

Phyllis, 63 | five years after diagnosis

After learning that you have Parkinson’s, you may find yourself worrying over every real or perceived change in your body. A cold? You think your resistance is down. A strained shoulder? You’re frightened that the disease is progressing. The best thing to do is to speak to your doctor. A strained shoulder may be just a strained shoulder, and may respond to physical therapy. Or it may be a manifestation of Parkinson’s that can be managed with medication. Find out what’s really going on, and take the appropriate steps.

WILL MEDICATION HELP?

“When do I start medication? One doctor said I should start medication immediately; another said that was not necessary. So now I’m thinking, I have to be part of that decision. I need to become an informed consumer.”

Lionel, 72 | two months after diagnosis

While a cure for Parkinson’s has yet to be discovered, there is now a variety of medications available to treat its symptoms — some of which may actually slow the pace of the disease’s progression. You will hear different names — Sinemet®, Mirapex®, Requip®, selegiline, amantadine, to name a few. The most common treatment for PD is Sinemet® — a combination of carbidopa and levodopa, sometimes referred to as the...
“gold standard” of PD medications. However, many experts have adopted the approach of treating early Parkinson’s with milder medications, such as amantadine or dopamine agonists, and adding levodopa when required for more symptom control.

Although your doctor will recommend a course of treatment that seems most appropriate to your stage and symptoms, keep in mind that you have a say! Consult reliable sources, such as books and the Internet (see the resources section at the end of this booklet for suggestions), and find out as much as you can about Parkinson’s and its treatments. Ask your doctor what you can expect. Learn about short and long-term side-effects of each medication. For a more detailed explanation of PD medications, call or email PDF at (800) 457-6676 or info@pdf.org.

I’VE BEEN ASKED TO JOIN A CLINICAL TRIAL. WHAT SHOULD I SAY?

“[Jonathan, 51] When the doctor suggested that I join a trial of a new medication, I said yes in a heartbeat. It made me feel that I was being pro-active in fighting this disease.”

Some people eagerly volunteer for research studies, also called “drug trials,” which test new treatments and medications. There are several good reasons to do so.

Joining a trial can give you early access to potentially helpful treatments and drugs that are not yet on the market. Once involved, you are likely to receive more frequent monitoring and medical attention.

Another reason to join a trial is to further the cause of research for Parkinson’s disease. Simply put, there is no other way for research to show that a proposed treatment works. You may also feel good about yourself when you volunteer to participate in a clinical research study.

Some people are concerned that joining a trial may be highly experimental or too risky. While taking any new medication can carry an element of risk, be assured that clinical trials are strictly regulated and controlled by the U.S. Food & Drug Administration (FDA), the National Institutes of Health (NIH) and the Institutional Review Board.
(IRB) at the hospital, university or research center where the trial is taking place. This helps to ensure that clinical trials are well designed and carefully constructed to protect the patient.

“As a ‘virgin’ (someone not yet on medication), I was a prime candidate to join a trial, but I balked at participation. I needed time, first, to accept my status as a PD patient. A year later, I was ready. I’m in a trial now, and feel the wait was right for me.”

Susanne, 59 | one-and-a-half years after diagnosis

Be aware that you may be randomly assigned to the comparison group, which means that you may receive a different dose of the “test” treatment, or a treatment that is already available that is considered standard therapy for the disease, or even a placebo (an inert substance that looks like the drug being tested but has no medical effect). But if the new drug does turn out to be of benefit, you will usually have easy access to it after this phase of the trial ends.

Sounds interesting, and it is. Volunteers are needed to take part in these studies. But you may be uncomfortable and decide against participation. That’s okay, too.

Undecided? Of course you’re going to talk the matter over with your doctor. You may find it helpful to share your concerns and questions with other people with Parkinson’s, who you can meet online through listserv groups or at a local support group. Visit the Parkinson Pipeline Project website, www.pdpipeline.org, to get a patient perspective on clinical trials.

SHOULD I CONSIDER SURGERY?
Surgical intervention may be indicated as an appropriate option when someone with Parkinson’s has exhausted the possibilities of medication. If and when surgery becomes an option, learn about its possibilities and risks. Since you are in the early stages of this illness, surgery is not something to contemplate at this time.
LIVING with Parkinson’s

HOW CAN I HANDLE MY SADNESS?

“Waiting in the reception area to see my doctor, I got to talking with another woman. She invited me to join her support group. I declined, but we did make a date to meet for lunch at a museum. At lunch, we were joined by a third woman…and later a fourth. So I guess I’m in a support group in spite of myself. I really like these women. It’s also freeing not to have to hide my tremors, and just focus on the conversation.”

Elaine, 52 | three years after diagnosis

Depression may exist with or without Parkinson’s (although the incidence is somewhat higher among people who have the condition). It is not unusual for someone with a chronic and progressive illness to experience moments of sadness. The length and severity of these sad periods determine whether they would benefit from treatment for depression.

If you feel sad for several weeks, tell your doctor. Join a support group. Try to be physically and mentally active. There are medications that can address the sadness and help you feel better.

SHOULD I SEEK OUT A SUPPORT GROUP?
Support groups can be important sources of practical and emotional help. You may be concerned that attending a group will bring you into contact with people who are much further along in the illness, and that will be discouraging. You may have to shop around to find the group that you like, but finding the right support group can be a very positive experience.
“Whether to tell” is a question posed by many people in the early stages of the disease. Although no one can make this decision for you, the thoughts and experiences of others might help. Here’s what they say.

A man who was diagnosed in his mid 40’s:

“I didn’t tell for a long time because I was afraid that the revelation might jeopardize my job. Also, I didn’t want other people feeling sorry for me, and for my kids.”

A woman in her late 50’s:

“I think people hold on to the secret longer than they need to because they want to maintain their privacy and because once you tell, it’s out there and you can’t take it back. I held on to the secret for several years. Then I sent a letter to some of my close friends, informing them. Once I did tell, I felt greatly relieved. And, I could get some support.”

A man in his early 60’s:

“I told everyone, and it was very liberating.”

A 54-year-old woman:

“I kept the information from my colleagues and friends for years. It’s hard enough to cope with this disease, and to also cope with the tension of hiding it. When I finally came out of the closet, it turned out that many of my friends either suspected or knew. It was such a relief!”

A 36-year-old man:

“When people ask about my limp, I tell them I have Parkinson’s disease. They’re surprised because I am so young. Too many people keep this disease a secret because of embarrassment, and I think that hurts us. The more people who know about PD, how prevalent it is, the more successful fundraising may become.”
“I don’t care how tired I am or how bad the weather, I never miss the monthly meeting of my support group. It’s the one place where I don’t have to be on my guard, can say whatever I want, and feel free to just be me. It’s my anchor.”

Sally, 59 | five years after diagnosis

You can learn about support groups by contacting the major Parkinson’s organizations, your local hospital, or you can ask your doctor to help put you in touch with other people with Parkinson’s so you can start a group. You can also find support through Internet chat rooms. Be persistent. You’ll be grateful for the company and the comfort.

IS PHYSICAL EXERCISE ADVISABLE?

“After I learned I had Parkinson’s, I went into a depression, and stopped working out. My waist size went from 34” to 36”. I knew I had to do something, so I began exercising again. Once I started to look better, I started to feel better — or the other way around. I’m also on antidepressant medication, and it’s helping.”

Matthew, 49 | two-and-a-half years after diagnosis

Staying in the best of shape is always a good idea. It is especially important for people whose control of movement has changed because of Parkinson’s. People with Parkinson’s consistently report that they feel better when they engage in a regular exercise routine. Choose an exercise routine that you enjoy.

If you have never regularly exercised, a personal trainer or physical therapist who is skilled in working with people with Parkinson’s can help you devise a routine that encourages flexibility, improves stamina and helps to
maintain balance. There is some evidence that tai chi and yoga help maintain flexibility and improve posture.

PDF has produced Motivating Moves for People with Parkinson's, a seated exercise video program. It offers a great routine to help maintain a wide range of motion and flexibility. It’s fun, too! Please contact PDF for more information.

DOES DIET MAKE A DIFFERENCE?
A good, balanced diet is recommended. In addition, adding fiber and fluids to your diet may be helpful in preventing constipation, a common symptom of the illness. Drinking water is also helpful if you have excessively dry or oily skin — a frequent problem. The standard rule is to drink at least eight glasses of water each day.

HOW CAN I HELP ADVOCATE FOR A CURE?

“The way I see it, nobody’s more invested in finding a cure for this disease than I am. I expect to beat this thing, see my kids grow up, play with my grandkids. So I have to use my energy to make my dream come true. That’s why I’m devoting myself to advocacy, and why I think we all need to be involved.”

Robert, 48 | six years after diagnosis

Getting involved with advocacy is a proven way for someone diagnosed with a long-term condition like Parkinson's to advance the "cause" while empowering themself. Every person can make a difference by educating others about Parkinson's disease.
"You have to be part of the solution. I feel much better knowing I’m involved in advocacy efforts, and that I’m doing the best I can."

Estelle, 62 | nine years after diagnosis

As a person with Parkinson’s, you can make your concerns about funding and research known to your Representatives and Senators, both local and national. The Parkinson’s Action Network (PAN), based in Washington, DC, is particularly focused on action and advocacy to end Parkinson’s disease. To learn what’s happening and how to join their efforts, check their website, www.parkinsonsaction.org.

The diagnosis was Parkinson’s…but you can do something about it.

- Confirm the diagnosis.
- Find a doctor who is right for you.
- Learn about the disease, and become an informed consumer.
- Learn about medications and treatments — when in doubt, ask questions.
- Join a clinical trial.
- Pay attention to your moods and seek help if sadness becomes persistent or overwhelming.
- Join a support group.
- Follow an exercise regimen.
- Eat a healthy diet.
- Engage in advocacy efforts to bring about a cure.

Above all, don’t forget to love; don’t forget to laugh; don’t forget to hope.
RESOURCES For Information And Support

Many organizations are dedicated to supporting people with Parkinson’s disease. What follows is a selective list of those offering information, services and support to patients and caregivers.

NATIONAL VOLUNTARY PATIENT ADVOCACY GROUPS

These national organizations are excellent resources for support, information and services, and also maintain websites with helpful links to other Parkinson’s web resources. For information on regional PD groups, visit www.pdf.org.

Parkinson’s Disease Foundation (PDF)
www.pdf.org
Ph: (800) 457-6676
Email: info@pdf.org

A leading organization involved in Parkinson’s disease research, patient education and advocacy. See the website for the most frequently asked questions about PD. The “Ask the Expert” website feature allows you to submit a question to the PDF physician team and receive a personalized answer.

American Parkinson Disease Association (APDA)
www.apdaparkinson.org
Ph: (800) 223-2732
Email: apda@apdaparkinson.org

Involved in research, patient and family support and education with local network chapters across the U.S. Booklets and pamphlets are available online.

The Michael J. Fox Foundation for Parkinson’s Research
www.michaeljfox.org
Ph: (800) 708-7644
Provides grants to help guarantee that new and innovative research avenues are thoroughly funded and explored.
National Parkinson Foundation (NPF)
www.parkinson.org
Ph: (800) 327-4545
Email: contact@parkinson.org

NPF funds scientific research and provides information, support and education to patients, their families and healthcare professionals. “Ask the Doctor” is an informative and popular service found on NPF’s website. “Ask the Parkinson Dietician” is also helpful.

The Parkinson Alliance
www.parkinsonalliance.org
Ph: (800) 579-8440
Email: admin@parkinsonalliance.org

Raises funds through local events, including the Parkinson’s Unity Walk in New York City, to support scientific research programs of other PD organizations.

INTERNET RESOURCES FOR PARKINSON’S DISEASE

The following is a list of useful Internet resources for the Parkinson’s community. For a more inclusive list, request PDF’s Web Resources for People with Parkinson’s booklet at www.pdf.org or call (800) 457-6676.

Caregivers
CARE

Caregivers Are Really Essential (CARE) is a listserv dedicated to caregivers. Register by sending an email to: listserv@listserv.muohio.edu, including “Subscribe CARE” and your full name in the message.

National Family Caregivers Association
www.nfcacares.org

NFCA is a grassroots organization that was created to educate, support and empower the millions of Americans who care for chronically ill, aged or disabled loved ones of all diagnoses.
Clinical Trials
Advancing Parkinson’s Therapies (APT) Clinical Trials Website
www.PDtrials.org

Search for a specific clinical trial or browse a listing of Parkinson’s clinical trials that are currently enrolling patients.

National Institutes of Health (NIH)
www.clinicaltrials.gov

A resource site developed by the NIH to provide patients, family members and members of the public with current information about clinical research studies.

Parkinson Pipeline Project
www.pdpipeline.org

This website, created and maintained by people with Parkinson’s, provides the patient perspective on the therapeutics development process. (This website depends on the work of volunteers; contact the webmaster if you would like to help.)

Listservs for PD community
Braintalk
www.braintalk.org

Described as the world’s largest online neurological patient support group, these forums are owned and maintained by the Department of Neurology at Massachusetts General Hospital.

Parkinson’s Information Exchange Network Online (PIENO)
www.parkinsons-information-exchange-network-online.com

The Toronto-centered group shares information, advice, friendship and news on PD. To subscribe send an email to: listserv@listserv.utoronto.ca. In your message type: SUBSCRIBE PARKINSN and your first and last name.
**Medical Information Websites**

**Aetna InteliHealth**
www.intelihealth.com

Learn about the latest in general health topics and Parkinson’s specifically by searching the medical dictionary.

**MEDLINEplus**
www.nlm.nih.gov/medlineplus/parkinsonsdisease.html

MEDLINEplus offers extensive information from the NIH and other trusted sources on over 600 diseases and conditions. The above link directs browsers to the section on Parkinson’s disease.

**Neurology Channel**
www.neurologychannel.com

Developed and monitored by physicians, this site provides medical information and resources for consumers and medical professionals.

**Parkinson’s Control**
www.parkinsonscontrol.com

Medical experts designed this site to provide a full range of information about Parkinson’s disease, current treatment options and the latest research.

**The Parkinson’s Web**
pdweb.mgh.harvard.edu

A comprehensive source of PD information and resources that is both personal and factual.

**WebMD Parkinson’s Disease Condition Center**
www.webmd.com

Designed to provide services that help physicians and consumers navigate the healthcare system. Click on “condition center” and select Parkinson's from the “Nervous System and Brain” category.
RESOURCES FOR INFORMATION AND SUPPORT

Political Advocacy

Coalition for the Advancement of Medical Research (CAMR)
www.camradvocacy.org

An umbrella organization for academic, research, disease and patient organizations that support investigative freedom in such areas as stem-cell research and somatic cell nuclear transfer.

The Parkinson’s Action Network (PAN)
www.parkinsonsaction.org

PAN is the unified education and advocacy voice of the PD community. Contact PAN to find out what’s happening in Congress.

Resources and Services

AARP
www.aarp.org

The AARP is a non-profit membership organization dedicated to improving the quality of life for people over 50 years of age.

Official U.S. Government Website for People with Medicare
www.medicare.gov

This government website answers questions about Medicare and Medicaid enrolling, billing and plan choices.

Social Security Online
www.ssa.gov

Visit this website for information on retirement, Medicare and the qualifying criteria for social security and disability.

Science News

National Institute of Neurological Disorders and Stroke
www.ninds.nih.gov

NINDS aims to lead the neuroscience community in shaping the future of research and its relationship to brain diseases.
**Science Daily**
www.sciencedaily.com

Described as one of the Internet’s leading online magazines and web portals devoted to science, technology and medicine.

**WE MOVE**
www.wemove.org

WE MOVE is a nonprofit organization providing a comprehensive resource for movement disorder information and education for professionals, patients and families.

**Support Services**

**Self-Help Group Source Book Online**
www.mentalhelp.net/selfhelp/

Contains a database to search specifically in Parkinson’s disease for support groups and network resources in your area, and includes information on how to start a support group.

**Younger audiences**

**Young Onset Parkinson’s Association**
www.yopa.org

Access helpful tips, mind-stretching games and discussion lists that offer support to those living with young onset Parkinson’s disease.

**PARKINSON’S DISEASE FOUNDATION PUBLICATIONS**

The following publications can be ordered, free of charge, at www.pdf.org or by calling (800) 457-6676. The PDF exercise program, *Motivating Moves for People with Parkinson’s*, can also be ordered online or by telephone for $14.95 plus shipping and handling.

**The PDF Introductory Packet**
A comprehensive introductory packet containing a wide variety of educational materials, including several of the publications listed here and a one-year supply of the PDF *News & Review*. 
PDF Newsletter — News & Review
Our quarterly newsletter, *News & Review*, addresses topical issues relating to Parkinson's disease, provides updates on scientific advances and offers practical advice for patients and caregivers on coping with the disease.

Parkinson's Disease Q & A: A Guide for Patients
This booklet answers the most frequently asked questions about Parkinson’s disease. Movement disorder specialists from the Columbia University Medical Center address topics ranging from signs of Parkinson’s to treatment options to daily living issues.

Surgery for Parkinson’s Disease: A Guide for Patients, Families and Caregivers
This booklet addresses the newest area of surgical options in the treatment of PD symptoms — deep brain stimulation (or DBS) surgery — while also describing older surgical approaches used to treat PD.

Parkinson's Advocacy: The Keys to Empowerment
Use this informational brochure to learn how to harness your power as a person living with Parkinson’s and join the fight for a cure.

Web Resources for People with Parkinson’s
The Parkinson’s community has used the Internet to provide a wealth of information on treatment, coping, caregiving and more. This publication can also put you in touch with other people with Parkinson’s and the organizations that serve the PD community.

Parkinson’s Disease Foundation — Fulfilling the Hope
This brochure provides an overview of PDF’s services and programs.

Motivating Moves for People with Parkinson’s
*Motivating Moves* is a unique video/DVD program of 24 seated exercises for people with Parkinson's. Exercises address typical Parkinson's symptoms such as balance, flexibility, vocal range and facial expressivity. It is available for $14.95 plus shipping and handling.
RECOMMENDED READING


If you did not receive the companion video to this booklet, please contact the Parkinson’s Disease Foundation at (800) 457-6676 or email info@pdf.org to request your copy.
WE APPRECIATE YOUR FEEDBACK!

If you have comments or suggestions on the material in this booklet or on how we can better serve you, please use this form to send us your feedback.

You are not required to include your contact information unless you would like PDF to respond to your comments.

Name: ________________________________________________________________

Telephone: ____________________________________________________________

Email: _________________________________________________________________

☐ Yes, I would like PDF to contact me regarding my comments.

The best way to reach me is by ☐ phone ☐ email.

Comments on the material included in this booklet:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Suggestions for additions or changes to this booklet:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Please fax this form to:
(212) 923-4778

Or mail to:
Parkinson’s Disease Foundation (PDF)
RE: Diagnosis Parkinson’s Disease booklet
1359 Broadway, Suite 1509
New York, NY 10018
The Parkinson’s Disease Foundation (PDF) wishes to thank GlaxoSmithKline for an educational grant to support the production of this publication and its accompanying video. The company was in no way involved in the editorial content for which PDF, solely, is responsible. It is thanks to the generous support of companies such as GlaxoSmithKline that we are able to continue to provide quality educational materials to support Parkinson’s patients, their caregivers and families.
The Parkinson’s Disease Foundation

The Parkinson’s Disease Foundation (PDF) is a leading national presence in Parkinson’s disease research, patient education, and advocacy for increased federal funding. PDF is working for the nearly one million people in the U.S. living with Parkinson’s by funding promising scientific research and supporting people with Parkinson’s, their families and caregivers through educational programs and support services.

Since its founding in 1957, PDF has awarded over $50 million to fund scientific research into the causes of Parkinson’s.

**Our services to the Parkinson’s community include:**

- Provision of printed and audiovisual educational materials to support patients, families and caregivers who live with Parkinson’s.

- A support service run by trained health professionals and medical staff to answer questions from patients, caregivers, families and the community on any aspect of Parkinson’s disease through our telephone advice line, (800) 457-6676, and web-service, “Ask the Expert.”

PDF is a tax-exempt, charitable organization with offices in New York and Chicago.

For further information about our services or to support our work, please visit our website at [www.pdf.org](http://www.pdf.org) or write to us at the address below.

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[www.pdf.org](http://www.pdf.org)

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