

# [Parkinson’s this information has recently become under](https://assignbuster.com/parkinsons-this-information-has-recently-become-under/)

Parkinson’s Disease whichis commonly abbreviated as PD is a chronic progressive neurological diseaseprocess that affects the dopamine production of the brain. The cells that aremost commonly affected are the substantia nigra, which produce dopamine thatenables the movements most people are unaware of on a daily basis. The eventualdeath of the substantia nigra causes the rigid or complete loss of motor skillsin those affected by Parkinson’s Disease.

However, this information hasrecently become under debate due to While Parkinson’s is relatively common, claiming thelives of over ten million people worldwide, no two cases are alike even thoughthey contain slight commonalities.  Parkinson’s Disease has recently beendiscovered as having a genetic factor involved in it although, The genetic factor has played a large part in beingable to detect young-onset Parkinson’s Disease which is defined as beingdiagnosed before the age of fifty. It has recently been discovered that thegenes affected are   Inatypical cases symptoms that can mirror Parkinson’s do present in a thejuvenile age group this has been labeled as Juvenile Parkinson’s and is mostcommonly associated to high risk Parkinson’s Disease gene mutations. Eventhough the age group of people whom are diagnosed with Parkinson’s can differsignificantly the general signs and symptoms remain the same. Earlychanges in the body posture typically go unnoticed by most that are diagnosed. The complications of these symptoms are what lead to the diagnosis ofParkinson’s.

Such things can be as small as added depression and anxietywithout outside factors being changed. These emotional changes can also then affectsleeping patterns. It is common for patients with Parkinson’s to havefrequently interrupted sleep patterns such as waking up multiple times a night, falling asleep too early in the evening, and taking an increasing number ofnaps throughout the day. A common but not widely known factor is losing thesense of smell, which is normally the first indication of Parkinson’s, orslowly not being able to distinguish the differences between like smellingodors. Once a patient has had significant changes in emotional and core sensesthe signs of the disease progress. Small changes in bowel incontinence can beseen or the inability to urinate all together.

With the decreasing musclecontrol most patients also see some mild constipation as even the digestion trackwill slow down. As the parasympathetic nervous system slows down from theapoptosis of motor neurons swallowing problems also develop. The muscles willbe slower to respond when swallowing leading to a buildup of saliva which cancause an increase in drooling and also propose an airway blockage problem.

Thesigns that are most talked about are Once these are present it becomes a very fast paced process while somemedications can slow the disease if it was diagnosed after the severe symptomshave set in they are unlikely to help. Due the difference in what symptoms andsigns can occur doctors have developed stages to define the disease process. Notevery person diagnosed with Parkinson’s Disease will have all of the symptoms, nor be in the same order, or in the same intensity as other patients.

However, there are patterns that are recognizable and therefore stages have been set upto track the progression of the disease. The stages are labeled as stage onethough stage five. In stage one symptoms are typically only on one side of thebody and do not interfere with daily activities. Most changes occur in walkingand body posture. By stage two body rigidity begins to set in, and tremorsoccur on both sides of the body. Daily tasks are getting harder and do takelonger to complete however, living alone is still a feasible option.

Stagethree is also called mid-stage were daily activities are significantly impairedand things such as eating and getting dressed will be near impossible tocomplete alone. Due to loss of balance in this stage falls become increasinglycommon. By stage four the disease symptoms are severe and limiting the affectedperson will require mobility equipment and assisted living situations. Thefinal stage five is ultimately debilitating when the tremors set intostiffness. Most patients are completely unable to walk and become bed ridden. In this stage hallucinations and delusions become common and the diseaseprocess now affects not only the motor skill set but also the psychologicalside.

There are two rating scales that doctors base these stages off of. TheHoehn and Yahr stages help define the severity of the physical symptoms duringthe stages and the Unified Parkinson’s Disease Rating Scale helps rate changesin non-motor issues, mood and social interactions. There is an additionalhypothesis that has recently developed called the Braak’s hypothesis whichstates While research and new developments are coming out constantly about where thedisease process starts and how long it takes to advance, one thing remains thesame it is a disease that has no cure. While it has no cure the patients diewith having Parkinson’s it is not a disease that you die from.

Thereare however drugs that you can take in order to combat the symptoms such astaking Selective Serotonin Reuptake Inhibitors to help with depression andanxiety changes that occur. The most common drug to be used for Parkinson’spatients is carbidopa-levodopa it must be given in large doses and will helpcontrol the tremors, this drug is also the most common way of diagnosingParkinson’s. Other medications that can be added to the treatment plan aredopamine agonists with mirror the dopamine effects in the brain and help toease the symptoms of Parkinson’s. MAO-B inhibitors also get subscribed whichhelp slow down the breakdown of naturally occurring dopamine. Catechol-O-methyltransferase (COMT) inhibitors can also be taken to prolong theinitial effects of the Levodopa which also helps stop the breakdown of dopamine.  Although all of these medications can besubscribed they do have a significant downfall of added risks of hallucinationsand increased dyskinesia in the late stages of the disease. The most dramaticof all “ fixes” is going through deep brain stimulation.

This option istypically only suggested to patients who have seen little to no effects fromthe above medications. The risks to having deep brain stimulation implanted issevere infection, stroke or brain hemorrhage. It can be adjusted in strength asthe disease process advances to help ease the increase physical symptoms. However, it is important to remember that while there are many medications andprocedures that can be used Parkinson’s still remains an incurable disease.