

PARKINSON'S PATHOCHART

PATHOPHYSIOLOGY

Progressive, degenerative neurological disorder caused by atrophy of substantia nigra leading to the depletion of dopamine. Decreased dopamine leads to the termination of acetylcholine inhibition which causes increased amount of acetylcholine activity. Acetylcholine is a neurotransmitter that the nervous system uses to communicate. The patient loses their ability to control their movements, especially fine motor movements. Since this is a slow progressive disease, you may find many different signs and symptoms for each patient.



ASSESSMENT FINDINGS

- Bradykinesia
- Muscle rigidity
- Resting tremors
- Pill rolling tremor
- Akinesia
- Blank facial expression
- Shuffling gait
- Stooped stance
- Drooling and dysphagia
- Slow/disorganized thoughts

DIAGNOSTICS

- No specific diagnostics
- Clinical findings and history
- Trial on medication shows improvement

NURSING PRIORITIES

- Prevent Aspiration
- Prevent Falls
- Optimize Functional Ability
- Encourage Coping

THERAPEUTIC MANAGEMENT

- Assistive devices
- PT, OT, ST
- Active and passive ROM
- Small, frequent, meals
- Monitor diet and weight
- Swallow screens
- Avoid foods high in Vit. B6
- Medications for side effects

MEDICATION THERAPY

- Dopaminergics
- Dopamine agonist
- Anticholinergics
- Drugs will eventually stop working