Outline



- 1. Non-motor symptoms of PD
- 2. What are depression, anxiety & apathy
- 3. Causes of depression, anxiety & apathy
- 4. Impact on quality of life
- 5. Treatment of depression, anxiety & apathy



The Seven Stages of Grief for Chronic Disease						
Denial	Pleading, Bargaining and Desperation	Anger	Anxiety and Depression	Loss of Self and Confusion	Re-evaluation of Life, Roles and Goals	Acceptance

Responses to disease



- Engulfment disease disrupts all domains of life
- Rejection neglecting and avoiding disease
- Acceptance part of identity, not overwhelmed
- Enrichment positive changes, enables growth



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Identity



How the hell did I come to be like this? Because this isn't me.



Identity crisis





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Shifting perspectives model of chronic illness



How much does my disease define who I am? Story of your life Different trajectory



Identity



Body stops working the way it used to Don't look the same or act the same Can't do the same things Loss of self + suffering



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Identity



What is the most challenging loss to accept?

Feelings of isolation?



Complexity of PD





Diagnosis, symptomatology, progression, debility, QoL, adjustment to disease, etc.

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Complexity



Fundamental problem
Life can be so complex you'd rather be dead
Things get beyond your control
Multiple catastrophes at the same time
Life gets too complicated
No way out

Fluctuations





- Different abilities/challenges from day to day, hour to hour
- Difficult to make plans "lets see how I feel"
- Medication wearing off worse depression, anxiety, cognition, fatigue, irritability, pain, motor symptoms

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Fluctuations



- · Different in various settings with various people
- Hard to have consistent expectations



Impact on family



- "Is this John? Is this the Parkinson's? Is he just not trying?
- Manipulative? Malingering? Genuine? Authentic?
- · Hard to know when to push and when to lay off
- Should I be mad at him? Can I not blame him?
- Disease? Personal responsibility?
- · Outside of his control? Just doesn't care?
- Don't want to be insensitive want to help

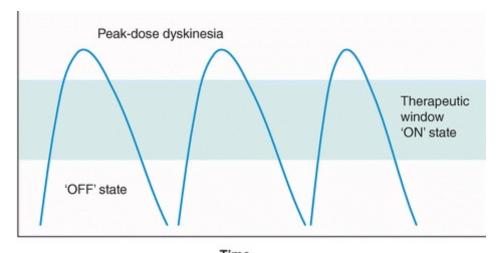


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Relationships







Relationships







3 OUT OF 4 MARRIAGES ENDS IN DIVORCE WHEN ONE SPOUSE HAS CHRONIC ILLNESS













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Meaning making Religion Spirituality Existentialism



Outline



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Treatment for people w/ PD and family



Talk to family, friend, and/or medical providers



Treatment



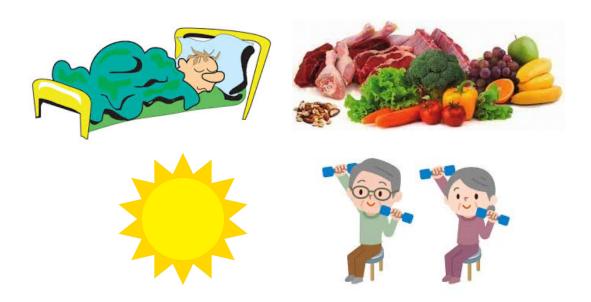
- Talk with your doctor about medication changes
- Psychotherapy
- Electroconvulsive therapy
- Transcranial Magnetic Stimulation (TMS)
- Light therapy
- Relaxation techniques
- Massage therapy
- Acupuncture
- Aromatherapy
- Meditation
- Music therapy
- · Parkinson's support group



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Daily practice





Remember



- · Pain and effort go hand in hand
- Dopamine spike needed to crave something, dip in dopamine to motivate us to move
- Did we get dopamine spike when we experienced what what we wanted?
- Repeat or cease
- Wait, next dose is coming
- Don't wait until you feel like doing it



7.

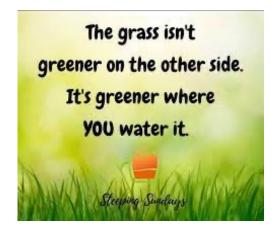
You are not your illness



Does your illness define you?

Mindset and perspective

Everybody is dealing with something! -relationships, debt, everyone has a challenge



Choices



- 1) Nothing you do means anything
 - -You don't have to do anything. No responsibility
- 2) Everything you do matters
- -If you make a mistake, if you betray someone, you must be responsible. Responsibility = meaning



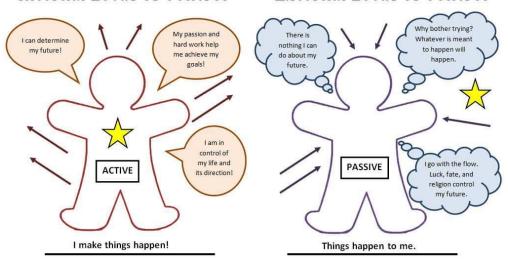
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Choices

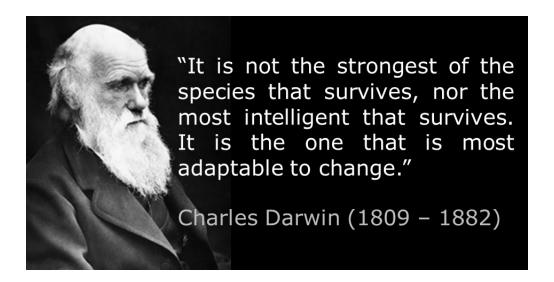


Internal Locus of Control

External Locus of Control







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Reinventing your identity



New activities and new sense of self
What can we still do?
What kind of activities will support your new identity?
Reconstituting new sense of self



What we think and feel matters



Patterns of resentment, selfcriticism, guilt over the past, fear over the future

Negative patterns create dis-ease

Patterns of love, joy, forgiveness are the healers



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Coping with Parkinson's









We developed negative coping skills because they worked to help us survive.

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Create structure



- Lack of order in life can cause someone to get overwhelmed
- Do you have a job?
- Need structure and a routine
- Do not wait until you feel like doing it!
- Schedule engaging activities



Lessons learned



Being present in the here and now

Life is not about being happy

Identification of values

What matters most to you?

What do you want your health for?

Committed action in line with values



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Parkinson's Foundation

National PADRECC



Parkinson's Disease Research, Education, and Clinical Centers

Veterans diagnosed with PD who served in-country or on the inland waterways of Vietnam between January 9, 1962 and May 7, 1975 are presumed exposed to Agent Orange or other herbicides and are eligible for presumptive service-connection.

<u>Agent Orange website</u> or call 1-800-749-8387, the Special Health Issues Toll-Free Helpline.

Camp Lejeune past water contamination and Parkinson's disease

<u>Parkinsonism</u> added to list of presumptive service connected conditions associated with Agent Orange.

VA Military Exposures and Veterans' health concerns pages

WRIISC: War Related Illness & Injury Study Center, may have additional information

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The Parkinson's Foundation



- Offers an extensive collection of books
- Fact sheets
- Videos
- Webinars
- Podcasts
- Parkinson.org and Parkinson.org/Veterans
- · Care partners coping and resources website, book, blog

Ways to Connect



- PF Helpline Connect at 1-800-4PD-INFO (473-4636) or Helpline@parkinson.org
- PD Conversations online community forum to connect with peers
- PD Health @ Home weekly virtual educational, health and wellness programs
- VA parkinsons.va.gov
- VA Caregiver Support Program <u>www.caregiver.va.gov</u> or call the National Caregiver Support Line, at 1-855-260-3274.

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Upcoming Veterans Webinars



June 29



August 31



October 26

Veterans & Parkinson's: Planning for the Future December 14

Environmental Exposures in Veterans with Parkinson's

Learn more and register to attend at: www.Parkinson.org/Veterans

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