Uncovering Pain in Parkinson’s

Ellen Lin, MD
Advanced Spine & Pain Center
www.SAPain.com (San Antonio, TX)
General Considerations

• Essentials of diagnosis
• All ethnic groups and gender
• Common onset: 45-65 years old
• Main cause: unknown
• Other causes: some drugs, some toxins, genetics
Pain and Parkinson’s

- Painful symptoms and physical discomfort seen in 30-85% of Parkinson’s population
- Most common symptoms:
  - Painful aching
  - Stiffness
  - Numbness and tingling at some point in the course of illness
Pain Syndromes and Discomfort

Usually arise from 1 of these 5 causes:

1. Musculoskeletal problems *(posture)*
2. Nerve pain or root pain *(neck / back arthritis)*
3. *Dystonia*-caused pain *(involuntary muscle contractions)*
4. Extreme restlessness-caused discomfort *(akathisia: constant movement)*
5. Rare pain syndrome *(central pain)*
1. Musculoskeletal Problems

- Rigidity (stiffness)
- Lack of spontaneous movement
- Abnormal posture
Musculoskeletal Complaints

• Shoulder stiffness most common complaint
  – “Frozen shoulder”

• Treatment
  – Medication (NSAIDS)
  – Physical therapy
  – Steroid injections
Musculoskeletal Treatment

- Physical therapy (LSVT Big®)

- Video 1 to be inserted here
Musculoskeletal Treatment

• Insert video 2 here
2. Nerve Pain or Root Pain

- Described as a lightening-like sensation that travels down to extremities
Nerve Pain or Root Pain

- Electrodiagnostic and neuroimaging can confirm nerve pain location

- MRI scan can help pinpoint for pinched nerves
Nerve Pain or Root Pain

Radicular (radiating) pain treatments are successful with conservative methods:

1. Physical therapy
2. Medications
Nerve Pain or Root Pain

2. Medications – pain medication
   - NSAIDS (ibuprofin, naproxen) for pain relief
   - Muscle relaxants (baclofen, zanaflex) for muscle spasms
   - Nonnarcotic analgesic (tramadol) for moderate pain
   - Narcotics (hydrocodone, oxycodone, codeine) for moderate / severe pain
Nerve Pain Treatments

If the conservative methods fail, then:

1. Steroid injection (temporary solution) for radiating pain
2. Nerve block
   - Followed by radiofrequency ablation (rhizotomy)
Pain From Dystonia

Often the most painful symptom of Parkinson’s:

- Involuntary sustained severe twisting muscle spasm
- Most common
  - Painful curling of toes and feet
Pain From Dystonia Treatments

- Maintaining a dopaminergic drug by increasing Levodopa (increasing dose or frequency)
- Botox injections (every 3 months)
- Deep Brain Stimulation
Discomfort Due to Extreme Restlessness

• Restless Leg Syndrome
  – Abnormal movement limbs during sleep

• Treatment options include:
  – Dopamine Agonist (Ropinerole®, Pramipexole®)

• Medication side effects include:
  – Confusion, hallucinations
Central Pain

- Not the result of dystonia or musculoskeletal problems
- Described as
  - Stabbing
  - Burning
  - Scalding
  - Radiating through the abdomen, chest, mouth, rectum or genetalia
Central Pain

Treatment

- Painkillers
- Opiates
- Antidepressants
  - Duloxetine (Cymbalta®)
Tracking Your Pain

- Important to communicate pain with doctor
- Log your pain in a way that works for you
  - Written journal
  - Phone app’s
  - Print out weekly fill-in sheet
Tracking Your Pain

- Take this information to your doctor’s appointment
- You are the specialist on your pain, become an active participant in your healthcare!
Action Steps

• See physical therapist after pain diagnosis
• Exercise daily
• Discuss your pain history and genetics with your doctor (7-8% genetically inherit pain)
• Track your pain and bring to next doctor’s appointment
• Seek treatment if you recognize depression
Pain doesn’t just show up in our lives for no reason. It’s a sign that something in our lives needs to change.

Live Well
Make a change.
Questions?

Ellen Lin, MD
Advanced Spine & Pain Center
www.SAPain.com (San Antonio, TX)
References

- www.ncbi.nlm.nih.gov/pmc/articles/PMG1032658/?page=1
- www.youngparkinson.org/articles/restless-leg-syndrome-and-parkinsons-disease