

Name -
 NHS No -
 Patient Address -

DOB -

Post Code -

ANTICIPATORY CARE PLAN

FOR PATIENTS WITH PARKINSON'S DISEASE AT HOME WITH A CARE PACKAGE OR IN RESIDENTIAL OR NURSING HOME SETTINGS

PROBLEM	INFORMATION	ACTION TO BE TAKEN IF NEEDED
Sudden Deterioration of Parkinson's Symptoms.	<p>People with Parkinson's disease sometimes experience a worsening of their symptoms. It is unusual for a rapid deterioration to be caused by the Parkinson's disease alone. Often there are other reasons.</p>	<p>IF YOUR CLIENT IS CLEARLY VERY ILL EG EXTREMELY BREATHLESS, LOSING CONSCIOUSNESS OR IN CONSIDERABLE PAIN, SEEK MEDICAL HELP OR DIAL 999 IMMEDIATELY.</p>
Has the patient's anti Parkinson's treatment recently been changed?	<p>When treatments for Parkinson's disease are changed, most people notice an improvement in their symptoms. Occasionally a change in medication can cause a worsening of symptoms particularly if a dose has been reduced. If the dose has recently been increased or a new treatment started, the risk of side effects is higher.</p> <p>Common side effects include:</p> <ul style="list-style-type: none"> • Nausea and vomiting • Feeling dizzy or lightheaded (sometimes due to low blood pressure) • Feeling tired and sleeping excessively during the day • Involuntary writhing movements (called dyskinesias) • Confusion • Hallucinations (seeing or hearing things that are not real) <p>Sometimes the introduction of new drugs for another condition or an increase in its dose may worsen symptoms.</p>	<p>Ensure all Parkinson's medication is given at the times suggested by the Parkinson's Team. These times are usually found on letters following appointments. If you are not sure, contact the patient's PD Nurse Specialist.</p> <p>If you suspect a change in medication has caused your patient to feel unwell, contact your Parkinson's Nurse, Neurologist, GP, Pharmacist or the Parkinson's UK helpline to discuss the issue. DO NOT abruptly stop PD medication without first discussing it with a healthcare professional.</p> <p>Drug information can be found on the leaflet supplied with medication. Further information regarding the drug treatment of Parkinson's is available in the 'Drug Treatment for Parkinson's' booklet available from your PD Nurse or Parkinson's UK.</p>

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IS THE PERSON HAVING ANY OTHER PROBLEMS?		
SYMPTOM	INFORMATION	ACTION
Urinary Tract Infection	<p>Urine infections can cause a worsening of PD symptoms and even cause confusion in some people. Symptoms of urine infection can include:</p> <ul style="list-style-type: none">• Passing urine more often• Discoloured or cloudy urine (Some drugs used to treat PD may discolour urine)• Unusually unpleasant smelling urine• Pain on passing urine• Passing blood in the urine• Abdominal or back pain• Generally feeling unwell• Raised temperature or feeling feverish	<p>If a urine infection is suspected, seek advice from the patient's GP. If the patient is known to District Nurses you could also tell them.</p> <p>A sample of urine may be required for testing and antibiotics are usually effective.</p> <p>If symptoms persist once an antibiotic course has finished it may be necessary to re-test the urine.</p>
Chest Infections	<p>Chest infections may also worsen Parkinson's. Symptoms include:</p> <ul style="list-style-type: none">• Persistent chesty cough• Feeling breathless or wheezy• Coughing up yellow or green phlegm• Raised temperature• Chest pain• Generally feeling unwell	<p>If a chest infection is suspected, seek advice from the patient's GP. Not all infections require antibiotics and mild infections usually resolve on their own in around 3 weeks. If the patient is having problems with swallowing, this might be a cause of the chest infection. Please inform the PD Nurse or Neurologist if you suspect this is the case.</p>
Other infections	<p>These may also cause problems with PD.</p>	<p>Again if infection is suspected, seek advice from the patient's GP. You will need to rest and drink plenty of fluids. Regular Paracetamol (max 4g a day) should help to treat fever and any aches and pains.</p>

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Dehydration	<p>Dehydration is common in the general population. Sometimes if severe this can make the Parkinson's worse. A person should aim to drink 6 to 8 glasses of fluid a day, possibly more in hot weather or if ill with diarrhoea etc.</p> <p>Symptoms of mild dehydration include:</p> <ul style="list-style-type: none">• Thirst• Dizziness or light-headedness• Headache• Tiredness• Dry mouth, lips and eyes• Concentrated urine (dark yellow)• Passing only small amounts of urine infrequently (less than three or four times a day) <p>To avoid severe dehydration increase fluid intake and address any potential causes such as diarrhoea or infections.</p> <p>Symptoms of severe dehydration include:</p> <ul style="list-style-type: none">• Dry, wrinkled skin that sags slowly into position when pinched up• An inability to urinate or not passing urine for eight hours• Irritability• Sunken eyes• Low blood pressure (hypotension)• Weak pulse• Rapid heartbeat• Cool hands and feet• Fits (seizures)• Low level of consciousness• Feeling tired (lethargic) or confused• Blood in your stools (faeces) or vomit	<p>Severe dehydration is a serious condition. You will need to seek medical help quickly as the patient may require admission to hospital for an intravenous drip.</p>
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Constipation	<p>Constipation is common in the general population particularly as we age. Mild constipation is not uncommon in PD and can result in a worsening of PD. Constipation can usually be managed by a healthy diet with plenty of dietary fibre, fluids and exercise. Sometimes laxatives may be required: see the Parkinson's UK fact sheet 'Looking after your bladder and bowels' for further information.</p> <p>Chronic constipation can increase the risk of faecal impaction (where dried, hard stools collect in the rectum and anus). Once faecal impaction occurs, it is very unlikely that you will be able to get rid of the stools naturally. Faecal impaction worsens constipation because it makes it harder for stools and waste products to pass out of the anus as the path is obstructed. Faecal impaction can lead to a number of other complications. These include:</p> <ul style="list-style-type: none">• Swelling of the rectum• Losing sensation in and around the anus• Faecal incontinence (uncontrollable leaking of soft or liquid stools)• Bleeding from the anus• Rectal prolapse (when part of the lower intestine falls out of place and protrudes from the anus)	<p>The leaking of liquid stools is sometimes mistaken for diarrhoea and any treatments for diarrhoea will only make the problem worse. If you suspect faecal impaction and laxatives have not helped, then suppositories or enemas will be required. If help is required administering suppositories or enemas, please contact the GP surgery.</p> <p>If the faecal impaction does not resolve or if the patient feels unwell, please contact the GP or district nurse.</p>
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Once the underlying cause for the deterioration of the Parkinson's Symptoms has been successfully treated, the Parkinson's should return to how it was after a few weeks. If after 4 weeks the Parkinson's is still causing concern, please contact the Parkinson's Nurse for a review.

Further information and support

- Out of Hours Doctors (via the number on your GP telephone service)
- Parkinson's UK free helpline: 0808 800 0303 Mon–Fri 9am–7pm, Sat 10am–2pm
- NHS Choices Website: <http://www.nhs.uk/Pages/HomePage.aspx>
- NHS Direct: Tel **111** – You should use the NHS 111 service if you urgently need medical help or advice but it's not a life-threatening situation

Footnotes:

People should be aware that stress and anxiety can have a significant effect on symptoms and so it is always worth enquiring whether the person with Parkinson's is experiencing additional stress, and to take appropriate action from there.

If you have been diagnosed with vascular Parkinsonism further vascular events can suddenly cause a worsening of symptoms which will need to be discussed with your GP or specialist