

Skin and sweating problems in Parkinson's

People with Parkinson's sometimes have problems with their skin, and how much or how little they sweat. Some people may only have minor issues while others may have more severe problems that can affect daily life.

This information sheet explains what symptoms you may experience and what you can do to manage them.

Skin and scalp problems

Oily skin

The skin has glands that produce an oily substance called sebaceous matter or sebum. Sebum is important as it protects the skin and keeps it supple. People with Parkinson's may produce more sebum than normal. This condition is known as seborrhoea. It means the skin, particularly the face and scalp, becomes greasy and shiny. If you experience this, remember that oily skin can affect anyone and there are a number of treatments available.

How to manage oily skin

Try using a mild soap or a gentle cleanser and water, or an oil-free soap substitute. Avoid cosmetic products that contain alcohol, or that irritate your skin. Speak to your GP or pharmacist for more advice on suitable products.

Seborrhoeic dermatitis

This is a condition where areas of the skin that have lots of sebaceous glands become red, itchy and sore. The skin also peels and flakes, and may develop thick crusts or scales. Seborrhoeic dermatitis is a common problem, although people with Parkinson's are likely to develop it.

The main areas affected include:

- the scalp – in mild cases skin can flake off as dandruff. In more severe cases, people may have a red, scaly scalp, sometimes with a weeping rash

- the face – this can look red and sore, and sometimes scaly. Skin around the nose and inner parts of the eyebrows are often affected. Eyelids can also become red and sensitive. This is known as blepharitis
- the ears – areas around and in the ears can be affected. If the inner canal becomes inflamed this can cause it to become blocked
- the front of the chest
- the bends and folds of skin – such as under the breasts and arms, and in the groin

It is not known what causes seborrheic dermatitis, but it's thought that a type of yeast found on the skin may play a part. It is not caused by poor personal hygiene.

How to manage seborrhoeic dermatitis

There is no cure for seborrhoeic dermatitis but there are treatments that can control it. Be aware that if you stop the treatments the condition may come back. It can also flare up when you are stressed.

Try to avoid cosmetics that contain alcohol, and soaps and shaving creams that irritate your skin. You should also switch to using non-greasy special moisturising creams (emollients) and emollient soap substitutes. Some people may find certain foods make the condition worse, so you could try keeping a diary to see if anything in your diet is causing problems.

The following treatments are recommended for the scalp and beard.

- Loosen any crusts or scales on the scalp by rubbing on olive or mineral oil several hours before washing your hair. Or you can also use a de-scaling agent containing coal tar or salicylic acid – these can be brought over the counter in your local pharmacy.
- Wash your hair and your beard, if you have one, with a medicated shampoo, or those containing coal tar or salicylic acid, which you can buy over the counter. Alternatively, your GP can prescribe shampoos containing ketoconazole and selenium sulphide.
- If you have severe itching on your scalp, your GP can prescribe a steroid-based cream or ointment, for you to use as a short-term solution.
- Use shampoos that contain tea tree oil.

The following treatments are recommended for the face and body.

- A cream containing ketoconazole can be prescribed by your GP. You can use this until the skin has improved.
- A mild steroid cream, which may contain an antifungal agent, can also be used to reduce inflammation and soreness. However, if the symptoms have not cleared up within six months you should see your GP or a dermatologist (skin expert) for advice.
- If your eyelids are affected, clean them daily with cotton buds moistened with baby shampoo. If this does not help, see your GP or a dermatologist for advice.

“ I have very oily skin, to the extent that on hot days I have to wash my face again in the late afternoon because it's shining. On the plus side, people always think I am a lot younger than I am...”

Titan, from our online forum

Talk to your GP if your symptoms do not improve with treatment. They may refer you to a dermatologist – a doctor who specialises in skin conditions. You can also ask your pharmacist for advice on treatments that may be available.

Sweating

People with Parkinson's may have problems with the part of the nervous system that controls sweating. This can lead to excessive sweating (known as hyperhidrosis), which most often happens if your Parkinson's drugs 'wear off'. Sometimes, people with Parkinson's can also experience sweating at night.

Sweating excessively can also happen in the 'on' state (when your Parkinson's drugs are working at their best) especially if you have dyskinesia (uncontrollable muscle movements or spasms).

Because some people with Parkinson's may have a reduced sense of smell, they may not be aware of body odours caused by excessive sweating.

How to manage sweating

Excessive sweating can be distressing, but there are things you can do to help keep it under control.

- Try to identify any food or drinks that may trigger sweating (these may include alcohol, caffeine or spicy foods).
- Use an antiperspirant frequently to reduce sweating (a deodorant will only reduce odour).
- Don't wear clothes that are tight-fitting or made of synthetic materials (eg nylon).
- Wear clothes that don't show sweat marks.
- Use dress shields (also known as armpit or sweat shields) to absorb excess sweat and protect your clothes. Your local pharmacist may be able to advise you where you can purchase them from or you could look online.
- Wear socks that are made of natural fibres, such as cotton, or sports socks that are designed to absorb moisture. Change your socks twice a day if possible.
- Wear leather shoes and change them (or take them off) often.
- Try to avoid situations that may trigger sweating, such as crowded rooms or situations you may find stressful.

If these don't work, or if you feel your symptoms are having a major impact on your life, speak to your GP, specialist or Parkinson's nurse. They may be able to suggest medication or other treatments, like botox injections, to help you control the sweating. Be aware that the availability of botox injections on the NHS may vary depending on where you live.

Sweating too little

Some people with Parkinson's may not sweat enough, which is caused by a condition known as hypohidrosis. This may be a side-effect of anticholinergics, a type of medication used to treat Parkinson's. Lack of sweating may affect parts, or all of the body.

Sweating is normal and helps your body regulate its temperature. If you sweat very little or not at all, particularly when it is hot or when you feel hot, speak to your GP, specialist, or Parkinson's nurse. This is because a lack of sweating, or reduced ability to sweat, may put you at risk of over-heating.

More information and support

[British Association of Dermatologists](#)

For information on dermatology services and support groups.

0207 383 0266

admin@bad.org.uk

www.bad.org.uk

[Hyperhidrosis Support Group](#)

UK-based support offering information and advice for people that suffer from excessive sweating.

www.hyperhidrosisuk.org

[The International Hyperhidrosis Society](#)

www.sweathelp.org

[National Eczema Society](#)

Advice and support for people with itchy, sore skin. This charity also has a local support groups.

0800 089 1122

helpline@eczema.org.uk

www.eczema.org.uk

[NHS Choices](#)

www.nhs.uk

[Psoriasis Association](#)

A national charity that helps people whose lives are affected by psoriasis.

0845 676 0076

mail@psoriasis-association.org.uk

www.psoriasis-association.org.uk

Parkinson's nurses

Parkinson's nurses provide expert advice and support to people with Parkinson's and those who care for them. They can also make contact with other health and social care professionals to make sure your needs are met.

The role of the Parkinson's nurse varies. Each will offer different services, aiming to meet local needs. Some nurses are based in the community, whereas others are based in hospital settings.

Many Parkinson's nurses are independent prescribers. This means they can prescribe and make adjustments to medication, so someone with Parkinson's doesn't always need to see their specialist for changes to or queries about their Parkinson's drugs.

Parkinson's nurses may not be available in every area, but your GP or specialist can give you more details on local services.

You can find out more at **parkinsons.org.uk/nurses**

Information and support from Parkinson's UK

You can call our free confidential helpline for general support and information. Call **0808 800 0303** (calls are free from UK landlines and most mobile networks) or email **hello@parkinsons.org.uk**.

We run a peer support service if you'd like to talk on the phone with someone affected by Parkinson's who has faced similar issues to you. The service is free and confidential – ring the helpline to talk to someone about being matched with a volunteer.

Our helpline can put you in touch with one of our Parkinson's local advisers, who give one-to-one information and support to anyone affected by Parkinson's. They can also provide links to local groups and services.

We have a self-management programme for people with Parkinson's, partners and carers. It is an opportunity to reflect on life with the condition, learn about self-management and think about the future. To find out if there is a group near you, visit **parkinsons.org.uk/selfmanagement**

Our website **parkinsons.org.uk** has a lot of information about Parkinson's and everyday life with the condition. You can also find details of your local support team and your nearest local group meeting at **parkinsons.org.uk/localtoyou**

Visit **parkinsons.org.uk/forum** to chat to other people with similar experiences on our online discussion forum.

Thank you

Thank you very much to everyone who contributed to or reviewed this information sheet:

Dr Ronald Pearce, Consultant Neurologist and Honorary Senior Lecturer, Charing Cross Hospital, London

Caroline McMahon, Parkinson's Disease Nurse Specialist, Western Health and Social Care Trust, Northern Ireland

Thanks also to our information review group and other people affected by Parkinson's who provided feedback.

Can you help?

At Parkinson's UK, we are totally dependent on donations from individuals and organisations to fund the work that we do. There are many ways that you can help us to support people with Parkinson's.

If you would like to get involved, please contact our Supporter Services team on **0800 138 6593** or visit our website at **parkinsons.org.uk/donate**. Thank you.

Our information

All of our most up-to-date information is available at **parkinsons.org.uk/information-support**. If you'd prefer to read one of our printed leaflets or booklets, find out how to place an order at **parkinsons.org.uk/orderingresources** or by calling **0300 123 3689**.

We make every effort to ensure that our services provide current, unbiased and accurate information. We hope that this will add to any professional advice you receive and help you to make any decisions you may face. Please do continue to talk to your health and social care team if you are worried about any aspect of living with Parkinson's.

If you'd like to find out more about how we put our information together, including references and the sources of evidence we use, please contact us at **publications@parkinsons.org.uk**



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If you have comments or suggestions about this information sheet, we'd love to hear from you. This will help us ensure that we are providing as good a service as possible. We'd be very grateful if you could complete this form and return it to **Editorial and Creative Services, Parkinson's UK, 215 Vauxhall Bridge Road, London SW1V 1EJ**. Or you can email us at **publications@parkinsons.org.uk**. Thanks!

Please tick...

- I have Parkinson's. When were you diagnosed?
- I'm family/a friend/a carer of someone with Parkinson's
- I'm a professional working with people with Parkinson's

Where did you get this information sheet from?

- GP, specialist or Parkinson's nurse
- Parkinson's UK local group or event
- Our website
- Information and support worker
- Ordered from us directly
- Other

How useful have you found the information sheet? (1 is not useful, 4 is very useful) 1 2 3 4

Have you found the publication easy to read/use? Yes No

Has this resource given you information that might help you manage your condition better?

- NA
- It hasn't helped
- It has helped a little
- It has helped a lot

What aspects did you find most helpful?

Were you looking for any information that wasn't covered?

Do you have any other comments?

If you would like to become a member of Parkinson's UK, or are interested in joining our information review group, please complete the details below and we'll be in touch.

- Membership
- Information review group (who give us feedback on new and updated resources)

Name.....

Address.....

Telephone..... Email.....

- What is your ethnic background? Asian or Asian British Black or Black British Chinese Mixed White British White other Other (please specify)

Every hour, two people in the UK are told they have Parkinson's – a brain condition that turns lives upside down, leaving a future full of uncertainty.

Parkinson's UK is here to make sure people have whatever they need to take back control – from information to inspiration.

We want everyone to get the best health and social care. So we bring professionals together to drive improvements that enable people to live life to the full.

Ultimately, we want to end Parkinson's. That's why we inspire and support the international research community to develop life-changing treatments, faster. And we won't stop until we find a cure.

Together we can bring forward the day when no one fears Parkinson's.

Parkinson's UK

Free confidential helpline **0808 800 0303**

Monday to Friday 9am–7pm, Saturday 10am–2pm. Interpreting available.

NGT Relay **18001 0808 800 0303** (for use with smart phones, tablets, PCs and other devices).

For more information see **www.ngts.org.uk**

hello@parkinsons.org.uk

parkinsons.org.uk



Last updated May 2015. We review our information within three years.
Please check our website for the most up-to-date versions of all our information.
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