Depression and Parkinson’s

It can be common for people with Parkinson’s to experience depression. Symptoms can feel overwhelming, but with the right help, support and treatment, you can manage depression and enjoy a good quality of life.

This information looks at what depression is, how it is linked to Parkinson’s and what help is available to treat symptoms.

What is depression?

Depression is usually diagnosed when you have feelings of extreme sadness or a sense of emotional ‘emptiness’ for a long time. It’s more than temporary feelings of sadness, unhappiness or frustration. These feelings may affect your ability to carry out day-to-day activities.

You may be depressed if you have one or more of these symptoms:

- A lack of interest in, or pleasure from, usual activities.
- Feeling down or hopeless nearly every day.
- Feeling anxious, or feeling constantly worried or afraid.

If you’re depressed you might also experience:

- difficulty concentrating
- low energy and tiredness
- trouble sleeping (waking in the early hours of the morning can be a typical sign) or excessive sleeping
- a loss of appetite, usually connected with weight loss
- increased appetite and weight gain
- feelings of worthlessness or guilt
- in severe cases, thoughts of death or self-harm, and suicidal ideas
Like any illness, depression can affect anyone at any time. It’s no one’s fault, and it’s not a sign of weakness.

**Do I have depression?**

Some of the symptoms of depression are also common in Parkinson’s, which means it’s often difficult to diagnose.

For example, many people with Parkinson’s experience sleep and night-time problems. These can make you feel tired and lacking in energy, but they don’t necessarily mean you’re depressed.

Fatigue, an overwhelming sense of tiredness, can also be a symptom of both Parkinson’s and depression.

Your mood may go up and down because of the fluctuating nature of your Parkinson’s symptoms throughout the day. These changes in mood aren’t necessarily a sign of depression. Sometimes, these feelings may be related to changes in your Parkinson’s medication.

Find out more: see our information on fatigue and Parkinson’s, and sleep and night-time problems in Parkinson’s.

**Apathy**

Apathy is being increasingly recognised in Parkinson’s. It’s described as a lack of enthusiasm and emotion for everyday activities. This can feel like depression.

Unlike depression though, apathy is not linked to low self-esteem or a negative outlook on the future. So just because you experience apathy, it doesn’t mean you have depression.

Apathy needs to be diagnosed so it can be treated. Speak to your GP, specialist and Parkinson’s nurse. If necessary, they can refer you to a mental health specialist or counsellor.

**What causes depression in people with Parkinson’s?**

We don’t know for sure why people with Parkinson’s get depression. There are several possible explanations.

Some research suggests that a lack of dopamine, which causes the symptoms of Parkinson’s, can be a trigger for depression, worry and anxiety.

Being diagnosed with Parkinson’s can be very stressful and upsetting for many reasons and the condition can have an impact on every aspect of life. So it’s completely understandable that you might sometimes experience feelings of depression because of Parkinson’s.

For example, as Parkinson’s symptoms progress, some people may find they have to reduce certain activities like socialising. This could lead to loneliness and isolation, which may increase the risk of depression.

In some cases people have experienced depression months before they notice any Parkinson’s symptoms.

Depression can also be part of non-motor fluctuations. This is linked to the effect of levodopa ‘wearing off’ before the next dose is due. This type of depressed mood or anxiety usually gets better after the next dose of levodopa starts working.

More generally, depression can also be related to genetics. So if you have a family history of depression, you are more likely to experience depression yourself.

**How can I get help for my depression?**

With the right treatment and support, many people who experience depression can get better.

The first step is to talk to your GP, specialist or Parkinson’s nurse to make sure your Parkinson’s drugs are working well.
Treatment will depend on how severe your symptoms are and what's helped in the past. Treatments should be introduced step by step, starting with the simplest self-help measures.

There is some limited evidence to suggest that some dopamine agonists – for example, bromocriptine or pramipexole (Mirapexin) – may improve a person’s mood as well as any mobility problems. But there can be side effects, so this treatment might not be an option for everyone.

**How can I help myself?**

One way of helping mild depression is to understand it better. Many organisations in our useful contacts section produce guides or books about how you can help yourself to manage depression. Others have helplines where you can share your feelings.

Other types of self-help include:

**Exercise** – if you have Parkinson's, exercise can be as important as your medication to help you manage your symptoms. Research has also shown that exercising two to three times a week, especially as part of a group, can help with depression. It can also boost your mood and help you sleep well.

Find something that suits you and go for it. This could be as simple as chair-based exercise or a brisk walk that gets your heart rate up.

To get started, a physiotherapist can recommend exercise that is right for you. Also, your GP, local council or sports centre may organise exercise referral schemes in your local area.

**Find out more:** see our information about exercise and Parkinson’s.

**Sleep** – to help improve the amount and quality of your sleep, make sure your bedroom is quiet and comfortable, and go to bed at the same time each night.

**Relaxation** – you may find relaxation therapies, such as aromatherapy, useful. You could also try complementary therapies, such as massage, meditation, or exercises such as tai chi or yoga.

**Self-help computer programmes** – some GPs provide access to computerised cognitive behavioural therapy (CBT) courses. Examples include ‘Beating the Blues’ and MoodGYM. If you're interested in any of these activities, speak to your GP.

**Treatment and therapies for depression**

If self-help measures don't improve your symptoms, or if your depression is severe, your GP may suggest a course of talking therapy. This includes counselling and cognitive behavioural therapy (CBT).

**Cognitive behavioural therapy (CBT)**

For persistent or significant depression, group or individual therapy using cognitive behavioural techniques can be useful.

It’s a therapy designed to change your emotions and lift depression. It looks at how you think about yourself, your environment and the people around you, and how these thoughts affect your mood and behaviour.

Your therapist will try to teach you new skills to help deal with negative thoughts and problems more effectively. They may use techniques including relaxation, distraction and goal setting.

**Counselling**

A counsellor can work with you to understand any underlying issues that may be contributing to your depression.

Some GP practices have a counsellor, or your GP, specialist or Parkinson's nurse can refer you.

You can also find your own counsellor. To find one in your area, contact the British Psychological Society or the British Association for Counselling and Psychotherapy. See 'More information and support' for their contact details.

**Antidepressants**

Antidepressants are drugs that can be used to treat moderate to severe depression. There are three main types of antidepressant, and they work by stimulating chemicals in the brain. They may be prescribed alone, or alongside a course of talking therapy.
It’s important to remember that some antidepressants will be more suitable for you than others – it depends on your symptoms and what other medications you’re taking. If your GP or specialist thinks that antidepressants are right for you they can talk through your options.

Your specialist will also be able to advise you on how to take antidepressants alongside your Parkinson’s medication. Taking antidepressants won’t always improve your mood immediately, and it may take two to four weeks before you notice any change in your symptoms.

As with most medications, antidepressants can have side effects, but they are generally safe. Speak to your GP, specialist or Parkinson’s nurse if you have any concerns about the potential side effects.

There is no evidence that antidepressants are addictive, although some people may experience symptoms, such as irritability or nausea, when they stop taking them.

It is very important that you take antidepressants as prescribed, even if you feel better. Treatment will normally continue for six months after your symptoms improve, but may be be longer, depending on your health professional’s advice.

St John’s Wort

St John’s Wort, a herbal remedy that can be used for depression, is not recommended for people with Parkinson’s. This is because it can interact with your Parkinson’s drugs.

St John’s Wort is also often mixed with other components to create different brands of the herbal remedy. This could increase the possibility of side effects and interactions.

Support groups

Some people find it useful to talk to others who may understand how they feel because they have been in a similar situation.

People in support groups tend to share problems or experiences, and can offer understanding based on what has helped them in the past, which you may find useful.

Parkinson’s UK has local groups across the UK that offer friendship and support. Parkinson’s UK can provide information on these local groups and how to contact them. Call our helpline on 0808 800 0303 or email hello@parkinsons.org.uk

Advice for family, friends and carers

Sometimes, a carer, or someone close to a person with Parkinson’s, may recognise the symptoms of depression more clearly than the person themselves. If this is the case, you should share your concerns with the person and encourage them to talk to their GP, specialist or Parkinson’s nurse.

It’s important for family, friends and carers to recognise that the mood of someone with Parkinson’s can negatively affect their own emotions. If you care for someone who has Parkinson’s and depression, you may want to think about support for yourself too.

It’s quite normal for a loved one to feel many of the same feelings as the person with Parkinson’s. These feelings may include difficulty accepting the diagnosis, fear about the future, anxiety, depression and fatigue.

You might also experience confusion about the changes to your role and relationship with the person you care for.

Because of this family, friends and carers should also try to look after their physical and mental health as much as they can. This can be difficult, but it’s important to remember that by taking care of your own health you will be better able to care for the person with Parkinson’s and not burn out.

If you are worried about your own mental health, you should talk to your GP. Many carers also find it helpful to join a support group where they can meet other people in a similar situation.

Find out more: see our information about caring for someone with Parkinson’s.
More information and support

National organisations
British Association for Counselling and Psychotherapy
You can find contact details for local counsellors and psychotherapists on their website.
01455 883300
bacp@bacp.co.uk
www.bacp.co.uk

British Psychological Society
Contact the society or use its website to find a clinical or counselling psychologist in your area.
0116 254 9568
info@bps.org.uk
www.bps.org.uk

Carers Trust
Provides support, information and centres for carers in England, Scotland and Wales.
0300 772 9600
0300 772 7701 (Scotland)
0300 772 9702 (Wales)
info@carers.org
www.carers.org

Carers UK
Carers UK provides information and support to people who are caring at home.
0808 808 7777
info@carersuk.org
www.carersuk.org

Mind and Mind Cymru
The charity provides support and advice on all kinds of mental health problems, including depression.
0300 123 3393
info@mind.org.uk
www.mind.org.uk
www.mind.org.uk/about-us/mind-cymru/

Samaritans
The Samaritans provides a place for you to explore your feelings in confidence and without prejudice.
UK and ROI 116 123
jo@samaritans.org
www.samaritans.org

Northern Ireland
AWARE
This charity provides support to people living with depression in Northern Ireland.
Derry/Londonderry 028 7126 0602
Belfast 028 9035 7820
info@aware-ni.org
www.aware-ni.org

Inspire
In Northern Ireland, this organisation works together with people living with mental illness to ensure they reach their full potential.
02890 328 474
hello@inspirewellbeing.org
www.inspirewellbeing.org

Scotland
Breathing Space
A free confidential phone and web-based service for people (especially young men) in Scotland experiencing low mood, depression or anxiety.
0800 838 587
www.breathingspace.scot

Scottish Association for Mental Health
For people living in Scotland, the organisation provides information and support.
0344 800 0550
info@samh.org.uk
www.samh.org.uk

Wales
Hafal
Dedicated to improving the lives of people with a mental illness or physical disability and their carers in Wales.
01792 816 600
hafal@hafal.org
www.hafal.org
**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](http://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](mailto:hello@parkinsons.org.uk).

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.

Our website [parkinsons.org.uk](http://parkinsons.org.uk) has a lot of information about Parkinson’s and everyday life with the condition.

Visit [parkinsons.org.uk/forum](http://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.
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/informationsupport
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 infocontent@parkinsons.org.uk

Depression and Parkinson’s (INFOS0006/2021)
Do you have any feedback about this information? Your comments will help us ensure our resources are as useful and easy to understand as possible. Please return to Information Content team, Parkinson’s UK, 215 Vauxhall Bridge Road, London SW1V 1EJ, or email infocontent@parkinsons.org.uk. Thank you!

1. Please choose the option that best fits you.
   - I have Parkinson’s and was diagnosed in
   - I care for someone with Parkinson’s
   - I have a friend or family member with Parkinson’s
   - I’m a professional working with people with Parkinson’s
   - Other (please specify)

2. Where did you get this information from?
   - GP
   - Specialist
   - Parkinson’s nurse
   - Parkinson’s UK local group
   - Parkinson’s UK local adviser
   - Ordered directly from us
   - Call to the helpline
   - Other (please specify)

3. Has it answered all your questions?
   - Yes, completely
   - Yes, mostly
   - Not sure
   - Partly
   - Not at all

4. How easy was it to understand?
   - Very easy
   - Easy
   - Not sure
   - Quite difficult
   - Very difficult
We’re the Parkinson’s charity that drives better care, treatments and quality of life.

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

Parkinson’s UK
215 Vauxhall Bridge Road
London SW1V 1EJ

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

Order code: INFOS0006

Last updated January 2021. We review our information within three years. Please check our website for the most up-to-date versions of all our information.

5. Has it helped you manage your condition better, or make choices that have improved your life in some way?
☐ It helped a lot  ☐ It helped a little  ☐ No change  ☐ It didn’t help  ☐ It made things worse

6. What is your ethnic background?*
☐ Asian or Asian British  ☐ Black or Black British  ☐ Chinese  ☐ Mixed  ☐ White British  ☐ White other  ☐ Other (please specify)

*We ask about your ethnicity to ensure our information is reaching a broad range of people. However, this question is optional.

Want to hear more from us?
☐ I would like a response to my feedback  ☐ I would like to be a member of Parkinson’s UK
☐ I’m interested in joining the Information review group, to offer feedback on Parkinson’s UK information

If you’ve answered yes to any of these options, please complete your details below.

Name
Address
Email
Telephone

How would you prefer us to contact you?  ☐ Email  ☐ Post  ☐ Phone

We will not pass on your details to any other organisation or third party. To find out more, read our privacy policy at parkinsons.org.uk/termsandconditions