

Many studies report that one third of people with Parkinson's experience anxiety and depression, some of the non-motor symptoms of the disease, during the course of their condition, making people with Parkinson's more susceptible to depression than the general population. Depression may also be an early symptom of the disease, with approximately 30% of people experiencing depression before experiencing any motor symptoms.

Some research has suggested that a lack of the chemical dopamine, which helps to regulate mood, can be a trigger for depression. It can also appear as medication wears off.

Being diagnosed with Parkinson's can also be very stressful and upsetting, leading to depression, as people cope with the symptoms, medication-adjustment periods and possibly leaving the workforce and isolation.

Depression can also be related to other physical conditions, such as thyroid problems and nutritional deficiencies.

Some of the symptoms of depression are also common in Parkinson's and can make it difficult to diagnose. For example, many people with Parkinson's experience slowness, sleep disturbances and fatigue, which resemble depression. Also, a motor-related inability to express emotions can be mistaken for a lack of interest found in depression.

In their study, Anguenot and collaborators observed that symptoms of depression manifested in Parkinson's patients by sleep disturbances, morning fatigue, feelings of hopelessness, loss of self-confidence, slowness and apathy.

As such, depression has a significant impact on Parkinson's and can affect patients' independence and quality of life if left untreated.

**It's important that you speak with your family doctor or neurologist as soon as the first symptoms appear so that an accurate diagnosis can be made and you can get the right treatment for you. Your medication may need to be adjusted.**



An assessment by a multidisciplinary team is also a good idea, such as a consultation with a psychologist and other mental health professionals, such as a psychiatrist. They can recommend therapy, prescribe medication or both.

Other strategies include:

- *Socialize and have fun:* by keeping in contact with friends, family and support groups.
- *Learn more about the disease:* by keeping abreast of new developments. This will enable you to be proactive and have more control over your life and condition.
- *Exercise:* by regularly following an exercise program recommended by a health care professional, such as a physiotherapist, which will ensure you move safely, within your own limits and preferences. Stretching, posture exercises, face gymnastics and yoga are some examples.

You can also join an exercise group by contacting Parkinson Québec.

- *Relax:* with relaxation techniques, such as meditation, breathing exercises, massage therapy, tai chi and soothing music.
- *Be creative:* Trying new things will help you develop strategies to adapt to transitions.
- *Improve your sleep:* by drinking fewer stimulants, such as coffee, tea and soft drinks for example, and by practising relaxation techniques before bedtime.



- *Eat well:* by eating healthy portion sizes and foods. Eating several smaller nutritious and energizing meals, preparing appetizing meals and sharing a meal in good company are all ways to eat well and enjoy it.
  - For more tips, contact a nutritionist at your local CLSC or contact the Ordre professionnel des diététistes du Québec through : [www.opdq.org/](http://www.opdq.org/).

It's also important to be aware of the mental health of caregivers. Having less time for oneself, fewer recreational activities and lack of sleep impact the lives of caregivers and can affect their quality of life.

Here are some useful resources for caregivers:

- Regroupement des aidants du Québec : [www.ranq.qc.ca/](http://www.ranq.qc.ca/)
- Care-ring Voice Network : [www.careringvoice.com/](http://www.careringvoice.com/)
- Ministère de la Famille, Aînés section : <http://www.mfa.gouv.qc.ca>
- Caregiver's Guidebook (in English and French ):
  - [http://stmaryshospitalfoundation.ca/Caregivers\\_Guidebook-ENG.pdf](http://stmaryshospitalfoundation.ca/Caregivers_Guidebook-ENG.pdf)
  - [http://www.stmaryshospitalfoundation.ca/130187\\_Caregivers\\_Guidebook\\_FR\\_Digital\\_R1.pdf](http://www.stmaryshospitalfoundation.ca/130187_Caregivers_Guidebook_FR_Digital_R1.pdf)

Other resources are available for people with mental health problems:



- Info-Santé : 8-1-1
- Suicide hotline : 1-866-277-3553
- Quebec Anxiety, Depressive and Bipolar Disorder Support Association : [www.revivre.org/home.php](http://www.revivre.org/home.php)
- Association québécoise de prévention du suicide : [www.apqs.info/](http://www.apqs.info/)
- Fédération des familles et amis de la personne atteinte de maladie mentale : [www.ffapamm.com](http://www.ffapamm.com)
- Canadian Mental Health Association : [www.cmha.ca](http://www.cmha.ca)

Call our toll-free information and referral line at 1 800 720.1307 for more information and to find out about support and exercise groups in your region. You can also watch the “Marcher sous la pluie” seminars on our [YouTube](#) channel.

### **Références**

*Depression and Parkinson's Information Sheet, Parkinson's UK*

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*Louise M, Édith A. Le traitement de la dépression dans la maladie de Parkinson. Pharmactuel 2004;37(2) :83-89.*

*Anguenot A, Loll PY, Neau JP, Ingrand P, Gil R. Dépression et maladie de Parkinson : étude d'une série de 135 parkinsoniens. Can J Neurol Sci 2002; 29 : 139-146*