PHYSICAL REHABILITATION MAY AFFECT DEPRESSION IN PARKINSON DISEASE PATIENTS

M. Alvarez¹, P. Grogan¹, M. Rodriguez²

¹Neurology, Wilford Hall Medical Center, ²Physical Therapy, AQTS, San Antonio, TX, USA

Introduction: Parkinson's disease (PD) is a neurodegenerative disorder characterized by progressive physical decline usually treated dopaminergic medications. Mood disorder like depression is common in PD and is primarily treated with antidepressant medication. Physical rehabilitation / therapy (PT) programs have been found to be effective in improving the motor and gait dysfunction in PD. We tested the effects of PT on depressive symptoms in PD using a validated depression scale, the Hamilton Depression Scale (HDS).

Aim: To investigate effects of physical therapy on depressive symptoms in PD.

Methods: Case series. 19 patients (6 female, 13 male; ages 54-84, mean 72) were followed for 8 weeks while involved in an active PT. No patient received antidepressant medications during the study except for PD medications. PT consisted of traditional intervention such as stretching, strengthening, and conditioning exercises to improve motor and gait function.

Results: UPDRS-III scores at baseline: 13-59 [mean 34.8]. HDS scores at baseline: 1-28 [mean 14.4]. One patient dropped out of the study after 4 weeks due to progression of PD and inability to participate. At the end of 2 months PT, UPDRS-III and HDS scores for the remaining 18 patients were (respectively): 10-42 [mean 28.2 (19% reduction), and 0-24 [mean 10.7 (26% reduction).

Conclusion: After 2 months of PT, HDS scores improved along with UPDRS. While this is a short follow up and not compared with other forms of treatment, this observation suggests that PT may potentially improve depression in PD.