



EVIDENCE SEARCH RESULTS

Question/subject of request:	I would like to find resources and evidence to support - early therapy intervention (OT, Physio, Pharmacy and mental health) for people with Parkinson's disease - other self-management groups for people with Parkinson's that have any recommendations or outcomes
Date requested:	11 th March 2025
Date completed:	7 th April 2025
Compiled by:	Cate Newell – Knowledge & Library Services Manager

CITING THIS SEARCH

If you reference this search in any paper, publication or presentation, please let us know. The citation format is:

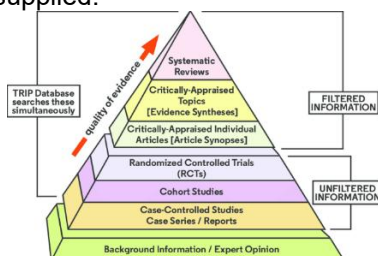
- Newell, C., (2024). *Evidence summary: early intervention and support for Parkinson's Disease*. Taunton, UK: Somerset Foundation Trust Knowledge and Library Services.

CONTACT DETAILS

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Quality Improvement Team:	<p>Email: jessica.pawley@somersetFT.nhs.uk Website: Somerset Collaboration Hub - Home</p>
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Librarian's Comments:

Abstracts are provided where available and relevant. Some articles have full text availability, as indicated by a corresponding link. If you have any problems accessing the links or would like an article which does not have immediate full text access, please contact a member of the library staff who will arrange for the article to be supplied.



The results are presented according to the hierarchy of evidence which is used to rank the relative strength of results obtained from scientific research.

The design of the study and the endpoints measured affect the strength of the evidence.

Evidence hierarchies are often applied in evidence-based practices and are integral to evidence-based medicine.



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Contents (click to jump to each section):

[Examples of other Living with Parkinson's Groups \(associated with hospitals\)](#)

[Evidence for early interventions](#)

[Evidence for group support](#)

Summary of search results:

Early interventions

See [Evidence for early interventions](#) for article links.

The evidence I found points towards positive outcomes for early intervention in Parkinson's Disease for:

- **Exercise**
(Chen 2025, Chang 2025, Li 2024, Lindholm 2024, Tucak 2024, Yang 2022, Li 2021, Frazzitta 2015)
- **Mental health**
(Xiao 2024, Yamaoka 2022, Zarotti 2021, Terashi 2019, Martens 2016)
- **OT and PT**
(Sadural 2022, Macdonald 2021, Ellis 2021)
- **Swallowing/dysphagia**
(Yeo 2024, Stegemoller 2017)
- Cognitive impairment (Li 2025)

I have also included some articles which may be relevant on:

- **Telehealth** (Cotelli 2025, Long 2024)
- **Quality of life/qualitative research** (Carmody 2024, Vistven 2024, Morel 2022)
- And **General overviews on support groups** (Longhurst 2024, Kimber 2021, Sharpe 2020).

Group support

As you know [Parkinson's UK](#) have a network of local support groups that anyone can tap into.

I have curated a short list of [NHS Trusts that directly provide Parkinson's support groups](#) – who you might like to contact for knowledge exchange.

I have collated some articles on [Parkinson's self-management and support groups](#) and their outcomes, which may be of interest. Examples include exercise groups, singing groups and educational groups.

I hope this is helpful. Please do let us know if you need any further information.



The Knowledge & Library Service have a growing archive of completed evidence summaries on [inSPIRE](#) – the organisation's knowledge, research and evidence repository. You can browse the evidence summaries [here](#).

These results of this search will only be shared in the repository if you have given your permission to do so (we ask this in the evidence search request form).

Thank you.





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Examples of other Living with Parkinson's Groups (associated with hospitals)

[Therapy programmes for Parkinsons - University Hospitals Coventry & Warwickshire](#)

[Supported Self Management - CHFT](#)

[Occupational therapy - South Tees Hospitals NHS Foundation Trust](#) (Parkinson's Group coming soon)

[Parkinson's disease specialist nursing – Rotherham Doncaster and South Humber NHS Foundation Trust \(RDaSH\)](#)

Evidence for early interventions

Evidence Search Results from your Knowledge & Library Service

1. The impact of combined aerobic and resistance exercise on the prognosis of early Parkinson's disease patients

Authors: Chen, Yumei and Chen, Yanbin

Publication Date: 2025

Journal: Technology & Health Care 33(1), pp. 205–214

Abstract: BACKGROUND: Although literature suggests that exercise can improve symptoms in Parkinson's Disease (PD) patients, research on the effects of aerobic exercise and resistance training (AE&RT) in early-stage PD remains limited. Understanding the synergistic effects of these exercise modalities can provide valuable insights for optimizing exercise interventions for PD patients, particularly in the early stages of the disease, where interventions may have the greatest impact on long-term functional outcomes. OBJECTIVE: This study aimed to investigate the effects of a combined AE&RT program on motor function, postural stability, and cognitive processing speed in early stage PD patients. METHODS: A total of 236 participants with early-stage PD were assigned to either the Aerobic Exercise Group (AE group) (n = 112) or the AE&RT Group (n = 124) in this controlled randomized trial. The study employed a one-year supervised exercise program, with the AE Group participating in aerobic activities and the AE&RT Group engaging in combined AE&RT. Outcome measures included symptom improvement, motor function, postural stability, cognitive processing speed, peak oxygen consumption, quality of life evaluation, and the incidence of adverse



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events. **RESULTS:** The AE&RT Group demonstrated greater improvements in tremor, muscle rigidity, gait instability, sleep problems, and hyposmia compared to the AE Group. Additionally, the combined exercise group exhibited better cognitive processing speed, as well as enhanced motor function and postural stability. Peak oxygen consumption was significantly higher in the AE&RT Group. However, the quality of life evaluation indicated a statistically higher quality of life in the AE Group. There was no significant difference in the incidence of adverse events between the two groups. **CONCLUSION:** The findings suggest that the integration of AE&RT in early-stage PD patients leads to more comprehensive improvements in motor symptoms, cognitive function, postural stability, and cardiovascular fitness compared to aerobic exercise alone. These results have important implications for developing tailored exercise interventions to enhance the physical and cognitive well-being of individuals with early-stage PD.

Access or request full text: <https://libkey.io/10.3233/THC-240821>

2. Smart Digital Solutions for EARLY Treatment of COGNitive Disability (EARLY-COGN³): A Study Protocol.

Authors: Cotelli, Maria;Baglio, Francesca;Gobbi, Elena;Campana, Elena;Pagnoni, Ilaria;Cannarella, Giovanna;Del Torto, Alessandro;Rossetto, Federica;Comanducci, Angela;Tartarisco, Gennaro;Calabro, Rocco Salvatore;Campisi, Simona;Maione, Raffaella;Saraceno, Claudia;Dognini, Elisa;Bellini, Sonia;Bortoletto, Marta;Binetti, Giuliano;Ghidoni, Roberta and Manenti, Rosa

Publication Date: Feb 24 ,2025

Journal: Brain Sciences 15(3)

Abstract: Background: Healthy cognitive functioning is a primary component of well-being, independence, and successful aging. Cognitive deficits can arise from various conditions, such as brain injury, mental illness, and neurological disorders. Rehabilitation is a highly specialized service limited to patients who have access to institutional settings. In response to this unmet need, telehealth solutions are ideal for triggering the migration of care from clinics to patients' homes. **Objectives:** The aim of EARLY-COGN³ will be threefold: (1) to test the efficacy of a digital health at-home intervention (tele@cognitive protocol) as compared to an unstructured cognitive at-home rehabilitation in a cohort of patients with Chronic Neurological Diseases (CNDs); (2) to investigate its effects on the biomolecular and neurophysiological marker hypothesizing that people with CNDs enrolled in this telerehabilitation program will develop changes in biological markers and cortical and subcortical patterns of connectivity; (3) to analyze potential cognitive, neurobiological, and neurophysiological predictors of response to the tele@cognitive treatment. **Method:** In this single-blind, randomized, and controlled pilot study, we will assess the short- and long-term efficacy of cognitive telerehabilitation protocol (tele@cognitive) as compared to an unstructured cognitive at-home rehabilitation (Active Control Group-ACG) in a cohort of 60 people with Mild Cognitive Impairment (MCI), Subjective Cognitive Complaints (SCCs), or Parkinson's Disease (PD). All participants will undergo a clinical, functional, neurocognitive, and quality of life assessment at the baseline (T0), post-treatment (5 weeks, T1), and at the 3-month (T2) follow-up. Neurophysiological markers and biomolecular data will be collected at T0 and T1. **Conclusions:** EARLY-COGN³ project could lead to a complete paradigm shift from the traditional therapeutic approach, forcing a reassessment on how CNDs could take advantage of a digital solution. (clinicaltrials.gov database, ID: NCT06657274).



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Access or request full text: <https://libkey.io/10.3390/brainsci15030239>

3. Early Detection and Management of Cognitive Impairment in Parkinson's Disease: A Predictive Model Approach

Authors: Li, Li;Tang, Shan;Hao, Bin;Gao, Xiaoqin;Liu, Haiyan;Wang, Bo and Qi, Hui

Publication Date: 2025

Journal: Brain & Behavior 15(3), pp. 1–9

Access or request full text: <https://libkey.io/10.1002/brb3.70423>

4. An Ethnographic Study of Patient Life Experience in Early-Stage Parkinson's Disease in the United States and Germany

Authors: Carmody, Todd;Park, Rebekah;Bennett, Elisabeth;Kuret, Emily;Klein, Beyza;Costa, Àngels;Messner, Simon and Hursey, Amelia

Publication Date: 2024

Journal: Neurology & Therapy 13(4), pp. 1219–1235

Abstract: Introduction: Existing qualitative research on early-stage Parkinson's disease draws on patients' reported disease experience, aiming to capture the symptoms and impacts most relevant to patients living with the disease. As a complement to this research, the present study investigated the patient experience of early-stage Parkinson's disease from a holistic, ethnographic perspective. We explored the attitudes, beliefs, and social structures that shape how people understand and adapt to life with early-stage Parkinson's disease. Methods: Researchers interviewed 30 people with early-stage Parkinson's disease, 10 relatives, and 10 neurologists and movement disorder specialists in the USA and Germany. Many of these interviews took place in-person, allowing researchers to spend time in participants' homes and witness their daily lives. A multidisciplinary team of social scientists, clinical researchers, and patient organization representatives led the mixed-methods study design and analysis. In-depth ethnographic interviews yielded qualitative insights, with a quantitative survey following to assess their prevalence in a larger sample of 150 patients. Results: In addition to developing a patient life experience pathway of early-stage Parkinson's disease, we identified five key thematic findings that provide insight into how the clinical features of the disease become meaningful to patients on the context of their daily lives, family relations, and subjective well-being: (1) People with early-stage Parkinson's disease start coming to terms with their disease before receiving a medical diagnosis; (2) Acceptance is not a finalized achievement, but a cyclical process; (3) People with early-stage Parkinson's disease "live in the moment" to make the future more manageable; (4) Slowing disease progression is an important goal driving the actions of people with early-stage Parkinson's; and (5) People with early-stage Parkinson's disease value information that is grounded in lived experience and relevant to their stage of disease progression. Conclusion: This holistic, ethnographic approach to patient life experience provided five key thematic findings that complement insights from qualitative and quantitative datasets on early-stage Parkinson's disease. An enhanced understanding of how early-stage Parkinson's symptoms impact patients' health-related quality of life and their broader social lives can help us better understand how patients make decisions about their usage of healthcare services and therapies. Plain Language



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Summary: This study aimed to understand the experience of people living with early-stage Parkinson's. In addition to looking at how symptoms impact people's daily lives, this research examined how people think about and give meaning to early-stage Parkinson's. The first step was to conduct interviews with people with early-stage Parkinson's, their relatives, and doctors. These interviews covered topics such as how people with early-stage Parkinson's are eventually diagnosed, where they go for information, and how they approach the future. In the second step recordings and transcripts of the interviews were analyzed in detail. The ideas and themes that emerged from analysis were used to create a picture of how people experience early-stage Parkinson's as part of their broader lives. Researchers identified five key insights: (1) people often begin to come to terms with Parkinson's before being diagnosed; (2) accepting Parkinson's is an ongoing process; (3) people with early-stage Parkinson's value living in the moment; (4) people with early-stage Parkinson's see slowing the worsening of the disease as an important goal; and (5) learning from the first-hand experience of others can be more valuable than scientific information. Ultimately, this research shows that understanding how early-stage Parkinson's fits into people's everyday lives can help researchers, doctors, and patient organizations provide more effective support and care.

Access or request full text: <https://libkey.io/10.1007/s40120-024-00632-7>

5. Distinct effects of long-term Tai Chi Chuan and aerobic exercise interventions on motor and neurocognitive performance in early-stage Parkinson's disease: a randomized controlled trial

Authors: Chang, Cheng-Liang;Lin, Tsu-Kung;Pan, Chien-Yu;Wang, Tsai-Chiao;Tseng, Yu-Ting;Chien, Chung-Yao and Tsai, Chia-Liang

Publication Date: 2024

Journal: European Journal of Physical and Rehabilitation Medicine 60(4), pp. 621–633

Abstract: Background: Parkinson's disease (PD) is a neurodegenerative condition characterized by movement disorders and probable cognitive impairment. Exercise plays an important role in PD management, and recent studies have reported improvement in motor symptoms and cognitive function following aerobic and Tai Chi Chuan exercise.; Aim: To explore the different effects of Tai Chi Chuan and aerobic exercise on the clinical motor status and neurocognitive performance of patients with early-stage PD.; Design: A randomized controlled trial.; Setting: Parkinson's Disease Center at Kaohsiung Chang Gung Memorial Hospital and National Cheng Kung University Hospital.; Population: Patients with idiopathic PD.; Methods: Fifty-six patients with PD were recruited and divided into three groups: aerobic exercise (AE, N.=14), Tai Chi Chuan exercise (TE, N.=16), and control (CG, N.=13). Before and after a 12-week intervention period, we used unified Parkinson's disease rating scale Part III (UPDRS-III) scores and neuropsychological (e.g., accuracy rates ARs] and reaction times RTs]) and neurophysiological (e.g., event-related potential ERP] N2 and P3 latencies and amplitudes) parameters to respectively assess the patients' clinical motor symptoms and neurocognitive performance when performing a working memory (WM) task.; Results: Compared to baseline, UPDRS-III scores were significantly lower in the AE and TE groups after the intervention period, whereas those for the CG group were higher. In terms of the neurocognitive parameters, when performing the WM task after the intervention period, the AE group exhibited significantly faster RTs and larger ERP P3 amplitudes, the TE group exhibited an improvement only in ERP P3 amplitude, and the CG group exhibited a significantly reduced ERP P3 amplitude. However, neither the TE nor the AE group exhibited improved ARs and ERP N2 performance.; Conclusions: The present



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study supported the distinct effectiveness of Tai Chi Chuan and aerobic exercise for improving motor symptoms and providing neurocognitive benefits in PD patients.; Clinical Rehabilitation Impact: These results have important implications regarding the use of these exercise interventions for managing PD, particularly in the early stages.

Access or request full text: <https://libkey.io/10.23736/S1973-9087.24.08166-8>

6. Self-directed physical activity interventions for motor symptoms and quality of life in early and mid-stage Parkinson's disease: A systematic review and meta-analysis.

Authors: Li, Hanzhang;Cao, Chunhao and Li, Yanan

Publication Date: 2024

Journal: Archives of Gerontology & Geriatrics 116, pp. 105159

Abstract: BACKGROUND: Self-directed physical activity (SDPA) has been found in previous research to alleviate some of the symptoms of early and mid-stage Parkinson's disease (PD) patients. So, this study aimed to determine the impact of SDPA on these patients in the areas of motor symptoms, and quality of life (QoL). **METHOD:** PubMed, Embase, the Cochrane Library, the Web of Science, Scopus, and ProQuest were all searched. The risk-of-bias tool of Cochrane for randomized trials, Version 2 (RoB 2), was also used to assess the credibility of studies in terms of their procedures. **RESULTS:** 15 eligible studies were analyzed. SDPA improved motor function and mobility, including timed up and go (TUG) test [standardized mean difference (SMD), -0.55 (95% CI, -0.91 - -0.18), p = 0.003], 6-minute walking (6MW) test [1.11 (0.75 - 1.47), p : 15 eligible studies were analyzed. SDPA improved motor function and mobility, including timed up and go (TUG) test [standardized mean difference (SMD), -0.55 (95% CI, -0.91 - -0.18), p = 0.003], 6-minute walking (6MW) test [1.11 (0.75 - 1.47), p : 15 eligible studies were analyzed. SDPA improved motor function and mobility, including timed up and go (TUG) test [standardized mean difference (SMD), -0.55 (95% CI, -0.91 - -0.18), p = 0.003], 6-minute walking (6MW) test [1.11 (0.75 - 1.47), p **CONCLUSION:** The motor symptoms of those with early to mid-stage PD improved with SDPA, however the research found no enhancement in FOG or QoL. Copyright © 2023. Published by Elsevier B.V.

Access or request full text: <https://libkey.io/10.1016/j.archger.2023.105159>

7. Balance and gait disorders in de novo Parkinson's disease: support for early rehabilitation

Authors: Lindholm, Beata;Hagell, Peter;Odin, Per;Hansson, Oskar;Siennicki-Lantz, Arkadiusz;Elmståhl, Sölve;Dahlin, Lars B. and Franzén, Erika

Publication Date: 2024

Journal: Journal of Neurology 272(1), pp. 11

Abstract: Background: Postural instability is considered a late complication of Parkinson's disease (PD). However, growing evidence shows that balance and gait problems may occur early in the disease.; Objective: To describe balance, gait, and falls/near falls in persons with newly diagnosed, untreated PD ("de novo"), and to compare this with persons with mild-moderate PD (Later PD). In addition, we evaluated differences relative to PD subtypes in de novo PD.; Methods: De novo (n = 54) and Later (n = 58) PD were assessed regarding motor symptoms, balance, gait, and falls/near



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falls.; Results: At least 25% of de novo PD had impaired reactive balance and/or comfortable gait speed ≤ 1.0 m/s. At least 50% had abnormal dynamic balance. A third reported balance problems during dual-tasking. Five persons (9%) reported falls/near falls. The median (q1-q3) motor symptom score was 21 (14-28) in de novo PD and 13.5 (9-20) in Later PD ($p < 0.001$). Later PD performed worse on more balance-demanding tests and a higher percentage of individuals reported falls/near falls ($p \leq 0.048$). De novo PIGD PD ($n = 10$) exhibited worse motor symptoms, reactive and dynamic balance, gait speed, mobility, and freezing of gait as compared to the non-PIGD de novo PD ($n = 37$) ($p \leq 0.049$).; Conclusion: Balance and gait were impaired in de novo PD and most pronounced in PIGD subtype. In addition, balance difficulties during dual-tasking and falls/near falls were evident during this early stage. The lower scores of motor symptoms in Later PD did not result in better mobility, balance, or less falls/near falls indicating that medications have less effect on these symptoms.

Access or request full text: <https://libkey.io/10.1007/s00415-024-12804-4>

8. Design & Baseline Characteristics of Preactive-PD Telehealth Coaching to Increase Physical Activity in Early-Stage Parkinson's Disease: A Randomized Controlled Trial

Authors: Long, Katrina M.;Quinn, Lori and Pacheco, Alissa C.

Publication Date: 2024

Journal: AJOT: American Journal of Occupational Therapy 78

Abstract: PURPOSE: Parkinson's Disease (PD) is a progressive neurodegenerative disorder. Engagement in exercise and physical activity (PA) produces positive effects in people with PD (PwP), including improvements in motor and cognitive functions, and decreased symptom progression. Recently diagnosed PwP are 1/3 less active than healthy adults and PA levels continue to decline throughout the course of the disease The purpose is to evaluate the feasibility of an OT telehealth coaching intervention to improve self-management of PA routines, and its effects on PA & exercise levels, self-efficacy, motivation, and self-perception of performance. DESIGN: This single-blind, randomized controlled feasibility design will randomize 50 adults with early-stage PD (H&Y 1-2) into either the OT intervention or education group, with special focus on enrolling underserved and diverse participants. Each participant will be assessed at baseline and again at month four and six. The intervention is available in English and Spanish, and participants will receive six 1-1 telehealth sessions with an OT over the course of 4 months to provide direct support regarding routines, habits and individualized goals, with check-ins on alternate weeks. Fitbit devices will be provided to track progress and facilitate coaching. RESULTS: 96 individuals have been referred (15 Spanish speakers, 81 English): 23 did not meet inclusion criteria, 24 declined to participate, 9 did not respond, and 40 were screened. 24 people have been randomized. CONCLUSION: The PreActive-PD intervention is expected to produce new findings about telehealth coaching and inform tailored OT interventions to support physical activity habits and routines in adults with early-stage PD. Special consideration must given to technology literacy and access especially to underserved populations. MOCA scores, social and environmental supports should also be considered when determining the best modality for PA coaching interventions.

Access or request full text: <https://libkey.io/10.5014/ajot.2024.78S2-PO312>



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9. Increasing trends in utilization of physical and occupational therapy services in early Parkinson's disease

Authors: Longhurst, Jason K.;Chrusciel, Timothy and Ahmad, Syed O.

Publication Date: 2024

Journal: Journal of Parkinson's Disease 14(8), pp. 1594–1601

Abstract: Background: Best practice guidelines in Parkinson's disease (PD) calls for the immediate initiation of rehabilitation therapies (inclusive of physical (PT) and occupational therapy (OT)) to prevent or ameliorate the loss of function and quality of life associated with disease progression. Objective: The purpose of this study was to determine the utilization of PT and OT services within the first 2 years following PD diagnosis and to observe longitudinal trends in PT and OT utilization early following PD diagnosis. Methods: This retrospective cohort study accessed 12 years (2011 to 2023) of data from electronic health records at a midwestern US healthy system. Patients with new PD diagnoses and two-years of visit history were included. The primary outcome was utilization of PT or OT services within two-years of PD diagnosis. Data extracted included demographics and PD therapies. Records of 9720 patients were included in the analyses. Results: Overall, 36.9% of the cohort (n = 3586) received either physical or occupational therapy within two years of receipt of PD diagnosis. Increasing age, higher comorbidity index, female gender, use of dopamine replacement therapies, and African American race were all positively associated with receipt of PT or OT services (ps < 0.007). The longitudinal trend revealed an average year over year increase in PT/OT utilization of 1.4% between 2013 and 2021 (p < 0.001). Conclusions: This study shows a promising increase in utilization of PT and OT services over previous reports and longitudinally, however it continues to convey how far clinical practice continues to lag behind best practice and scientific recommendation. Plain language summary: This study looked at how often people with Parkinson's disease (PD) use physical therapy (PT) and occupational therapy (OT) in the first two years after being diagnosed. These therapies are important because they can help maintain a person's ability to function and improve their quality of life as the disease progresses. The researchers analyzed data from 9720 patients diagnosed with PD between 2011 and 2023. They wanted to see how many of these patients received PT or OT within two years of their diagnosis and to track how the use of these therapies changed over time. The study found that only about 37% of patients received PT or OT within the first two years of their PD diagnosis. Certain groups of people were more likely to use these therapies, including older adults, women, African Americans, those with other health conditions, and those taking medication to manage PD symptoms. Over time, the use of PT and OT increased slightly each year by about 1.4% between 2013 and 2021. The findings suggest that while more people are using PT and OT after a PD diagnosis than in the past, many still aren't receiving these important therapies as recommended. This highlights a gap between what is considered best practice and what is actually happening in clinical care. More efforts may be needed to ensure that all people with PD have access to the therapies that can help them live better with the disease.

Access or request full text: <https://libkey.io/10.1177/1877718X241291991>

10. The 'PD Warrior' exercise programme improves motor outcomes and quality of life in patients with early Parkinson disease: results of a pilot study



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Authors: Tucak, Claire;Chih, HuiJun;Mastaglia, Frank and Rodrigues, Julian

Publication Date: 2024

Journal: Internal Medicine Journal 54(5), pp. 823–832

Abstract: Background: 'PD Warrior' (PDW) is a popular exercise programme for Parkinson disease; however, there are no published studies on the outcomes of the programme. Aims: To investigate short-term functional and quality of life (QoL) outcomes after the PDW 10-week programme in a pilot study of individuals with early Parkinson Disease (PD). Methods: Twenty individuals with PD (Hoehn & Yahr 1–3) attending a hospital outpatient clinic were recruited into the PDW 10-week programme, comprising a weekly 1-h supervised class complemented by an individualised daily home exercise programme. Participants had the following assessments at baseline and after completion of the programme: Movement Disorder Society Unified Parkinson Disease Rating Scale (MDS-UPDRS) Part III, timed up-and-go (TUG), 10-m walk test (10mWT), 6-min walking test (6MWT), balance tests, fine motor skills, 7-day Parkinson KinetiGraph (PKG) and PDQ-39 QoL scale. Results: Seventeen individuals completed the programme. Significant improvements were observed in MDS-UPDRS motor score ($P = 0.019$, $d = 0.68$, MCID 7); 6MWT distance ($P < 0.001$, $d = 1.16$); walking time during motor or cognitive dual tasking ($P = 0.006$, $d = 0.77$; $P = 0.005$, $d = 0.79$, respectively); and the PDQ-39 emotional well-being subdomain ($P = 0.009$; MCID 4.2); as well as improvements trending to significance in bradykinesia ($P = 0.025$, $d = 0.73$), 10mWT walking time ($P = 0.023$, $d = 0.61$) and borderline improvement in balance ($P = 0.056$, $d = 0.50$). Conclusions: The outcomes of this study support the efficacy of the PDW programme in individuals with early PD and provide justification for future trials and investigation of its effects.

Access or request full text: <https://libkey.io/10.1111/imj.16301>

11. Acupuncture for early Parkinson's disease with mild to moderate depression: a randomized controlled trial protocol with functional MRI

Authors: Xiao, Hongli;Ren, Yashuo;Yang, Haosen;Wang, Zixi;Li, Zhuohao;Song, Yuguo;Yuan, Xiaojia;Liu, Xiaopeng and Chen, Peng

Publication Date: 2024

Journal: Frontiers in Neurology , pp. 1–9

Abstract: Introduction: Depression is a common non-motor symptom of Parkinson's disease (PD), which seriously affects the quality of life of patients with PD. The main clinical treatment method for depression in Parkinson's disease is medication treatment. However, the medication treatment has a long cycle and many adverse reactions. Acupuncture as a non-pharmacological intervention method, has been widely used in the treatment of patients with Parkinson's disease and depressive disorders in China. Therefore, the study of acupuncture in the treatment of early Parkinson's disease with mild to moderate depression has important practical significance. Methods and analysis: In this randomized, single-blinded, and placebo-controlled study, a total of 88 patients with depression in Parkinson's disease (DPD) will be randomly allocated to either an acupuncture group or a control group in parallel in a 1:1 allocation ratio. Each group will receive 30 min acupuncture treatments or sham acupuncture treatments, 3 times a week, for 12 weeks, followed by a 36-week follow-up period. The primary outcome is the response rate of the Hamilton Depression Rating Scale-17 at 12 weeks. Data will be collected at baseline, at the end of the 12-week treatment period, and during



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the 12-week and 36-week follow-up. Discussion: This study hypothesized that acupuncture may treat DPD by restoring pathological alterations in brain neural activity. The findings will provide scientific evidence for acupuncture in the treatment of early PD with mild to moderate depression. Ethics and dissemination: This clinical trial has been approved by the Medical Ethics Committee of the Beijing Hospital of Traditional Chinese Medicine (Approval No. 2023BL02-013-01). This trial has been registered with the Chinese Clinical Trials Registry (Registration No. ChiCTR2300069310). The results will be published in a peer-reviewed academic journal.

Access or request full text: <https://libkey.io/10.3389/fneur.2024.1457787>

12. Experiences of an intensive interdisciplinary rehabilitation for people with early-stage Parkinson's disease

Authors: Vistven, Annette and Groven, Karen Synne

Publication Date: 2023

Journal: European Journal of Physiotherapy 25(2), pp. 92–99

Abstract: There has been little research on the experiences of individuals in the early stages of Parkinson's disease (PD) when they participate in intensive interdisciplinary rehabilitation programs emphasising self-management. In addition, little is known about such individuals' transition back to everyday life following rehabilitation. This paper seeks to provide insights into such experiences. A qualitative approach was utilised in the study on which this paper is based. Semi-structured interviews were conducted with seven individuals approximately three months after they had completed a 3-week interdisciplinary rehabilitation program. Following transcription, the interviews were analysed on the basis of Brown & Clarke's six stage framework for thematic analysis. Analysis of the data yielded three core themes: being oneself during rehabilitation; believing in oneself again; and managing one's everyday life following rehabilitation. Our results demonstrate how an intensive interdisciplinary rehabilitation program can contribute to improved physical function and self-esteem for individuals in an early phase of PD. The results also reveal ambivalence regarding relational aspects of the rehabilitation program and point to the need for more emphasis on including emotional, mental and family aspects into the program. ABSTRACT FROM AUTHOR]; Copyright of European Journal of Physiotherapy is the property of Taylor & Francis Ltd and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use. This abstract may be abridged. No warranty is given about the accuracy of the copy. Users should refer to the original published version of the material for the full abstract. (Copyright applies to all Abstracts.)

Access or request full text: <https://libkey.io/10.1080/21679169.2021.1987517>

13. Awareness of Dysphagia-Related Complications and Risks and the Importance of Early Intervention in Patients with Parkinson's Disease: A Qualitative Study



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Authors: Yao, Kaifeng; Wang, Lihua and Zhang, Lihua

Publication Date: 2023

Journal: International Journal of Clinical Practice , pp. 1–10

Abstract: Objective. To investigate the awareness of dysphagia-related complications and risks and the importance of early intervention in patients with Parkinson's disease (PD). Methods. Using the phenomenological approach of the qualitative study, 18 patients with PD in a Grade A tertiary hospital in Nantong were selected, and semistructured personal in-depth interviews were conducted. The interview content was analyzed using Colaizzi's seven-step method, and the topics and subtopics were further refined. Results. Awareness of dysphagia-related complications and risks and the importance of early intervention in patients with PD can be summarized into three topics: lack of knowledge about PD and dysphagia, changes in emotional cognition, and low need for early intervention for dysphagia. Conclusions. Patients with PD have a low awareness of dysphagia, do not follow any preventative measures, and have difficulty in recognizing the disease symptoms; hence, there is a vital need for early intervention. Medical staff need to create awareness among patients and their families, provide health education through multiple channels, popularize the knowledge of PD complications such as dysphagia, improve patient compliance with respect to medication, regular consultation, and medical treatment, guide the transformation of negative emotions in patients to positive emotions, and help patients with PD to actively prevent dysphagia and other complications and improve their quality of life.

Access or request full text: <https://libkey.io/10.1155/2023/9514851>

14. Patient Experience in Early-Stage Parkinson's Disease: Using a Mixed Methods Analysis to Identify Which Concepts Are Cardinal for Clinical Trial Outcome Assessment

Authors: Morel, Thomas; Cleanthous, Sophie; Andrejack, John; Barker, Roger A.; Blavat, Geraldine; Brooks, William; Burns, Paul; Gallagher, Casey; Gosden, Lesley; Siu, Carroll; Slagle, Ashley F.; Trenam, Kate; Boroojerdi, Babak; Ratcliffe, Natasha and Schroeder, Karlin

Publication Date: 2022

Journal: Neurology and Therapy 11(3), pp. 1319

Abstract: Qualitative research on patient experiences in early-stage Parkinson's disease (PD) is limited. It is increasingly acknowledged that clinical outcome assessments used in trials do not fully capture the range of symptoms/impacts that are meaningful to people with early-stage PD. We aimed to conceptualize the patient experience in early-stage PD and identify, from the patient perspective, those cardinal symptoms/impacts which might be more useful to measure in clinical trials. Methods In a mixed-methods analysis, 50 people with early-stage PD and nine relatives were interviewed. Study design and results interpretation were led by a multidisciplinary group of patient, clinical, regulatory, and outcome measurements experts, and patient organization representatives. Identification of the cardinal concepts was informed by the relative frequency of reported concepts combined with insights from patient experts and movement disorder specialists. Results A conceptual model of the patient experience of early-stage PD was developed. Concept elicitation generated 145 unique concepts mapped across motor and non-motor symptoms, function, and impacts. Bradykinesia/slowness (notably in the form of "functional slowness"), tremor, rigidity/stiffness, mobility (particularly fine motor dexterity and subtle gait abnormalities), fatigue,



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depression, sleep/dreams, and pain were identified as cardinal in early-stage PD. "Functional slowness" (related to discrete tasks involving the upper limbs, complex mobility tasks, and general activities) was deemed to be more relevant than "difficulty" to patients with early-stage PD, who report being slower at completing tasks rather than encountering significant impairment with task completion. Conclusion Patient experiences in early-stage PD are complex and wide-ranging, and the currently available patient-reported outcome (PRO) instruments do not evaluate many early-stage PD concepts such as functional slowness, fine motor skills, and subtle gait abnormalities. The development of a new PRO instrument, created in conjunction with people with PD, that fully assesses symptoms and the experience of living with early-stage PD, is required.

Access or request full text: <https://libkey.io/10.1007/s40120-022-00375-3>

15. Occupational Therapy for People with Early Parkinson's Disease: A Retrospective Program Evaluation

Authors: Sadural, Alan;MacDonald, Jillian;Johnson, Joelle;Gohil, Kavita and Rafferty, Miriam

Publication Date: 2022

Journal: Parkinson's Disease (20420080) , pp. 1–8

Abstract: Purpose. Clinical practice guidelines establish that occupational therapy (OT) services are indicated for people with early Parkinson's disease (PD). However, OT is uncommon compared to other rehabilitation services. This study describes the development and evaluation of a proactive, consultative OT program for people with early PD as a part of an integrated care approach. Materials and Methods. The program was developed by an occupational therapist adapting practice guidelines for people with early PD. Retrospective program evaluation occurred at an outpatient rehabilitation clinic. The consultative OT program for early PD includes a 90-minute evaluation with instruction in self-management techniques, individually tailored exercises, and follow-up recommendations. The program was evaluated with the RE-AIM framework. Postprogram semistructured interviews provided patient-reported program effectiveness and satisfaction. Results. In 2018, 23 individuals used OT out of 77 people with early PD who attended the proactive rehabilitation program. Most individuals (n = 16, 69.6%) were within Hoehn and Yahr stages 1-2 and were seen within 3 years of PD diagnosis. Participants presented with deficits in hand strength (60.0 ± 23.4 pounds) and dexterity (right hand 30.0 ± 8.0 seconds) and reported complaints about basic and/or instrumental activities of daily living (n = 15, 65.2%). Semistructured interviews (n = 16) revealed that most individuals (75%) reported high satisfaction. Of the 10 who recalled a home exercise program, 60% reported continued adherence. Consultative OT was delivered with fidelity in 22/23 individuals (96%). After one year, only two occupational therapists at one clinic had adopted the program, and the program is maintained in the organization. Conclusion. Occupational therapists reached people in the early stages of PD when a specific program was tailored to evaluate and target their specific needs. Motor activity deficits noted in individuals with early PD support future scaling and sustainability efforts of OT within this population. Quality improvement suggestions are discussed for future implementation and clinical trials.

Access or request full text: <https://libkey.io/10.1155/2022/1931468>



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16. Effectiveness of electroconvulsive therapy for apathy accompanied by psychosis in early-onset Parkinson's disease.

Authors: Yamaoka, Kenji; Masuda, Yoshikazu and Wada, Ken

Publication Date: 2022

Journal: Psychiatry & Clinical Neurosciences 76(7), pp. 344–345

Access or request full text: <https://libkey.io/10.1111/pcn.13365>

17. Early implementation of intended exercise improves quality of life in Parkinson's disease patients

Authors: Yang, Yang; Chen, Lifeng; Yao, Jiarui; Wang, Na; Liu, Dandan; Wang, Yuliang; Liu, Dan; Wu, Weiping; Jiang, Tianyu and Wang, Zhenfu

Publication Date: 2022

Journal: Neurological Sciences : Official Journal of the Italian Neurological Society and of the Italian Society of Clinical Neurophysiology 43(3), pp. 1761–1767

Abstract: Objective: Recent data have shown that regular exercise may ameliorate motor symptoms in Parkinson's disease (PD). This study aims to investigate how intended exercise impacts motor and non-movement symptoms of PD.; Methods: Eighty-eight patients were randomly assigned to an early exercise group (E-EG), late exercise group (L-EG), or a control group (CG) using a randomized delayed-start design. The E-EG carried out a rigorous, formal exercise program for 1 h, twice per week, for 18 months (May 2018–November 2019). The L-EG took part in the exercise program in the final 6–12 months of the study. We assessed outcomes using the Unified Parkinson's Disease Rating Scale (UPDRS), PDQ-39 Questionnaire, Line A test, Line B test, Nine-hole column test, 30 s squat and stand-up test (30 s SST), 10-m walk test (10mW), Balance Evaluation Systems Mini Test (MiniBESTest), FAB, and Time Up and Go Test (TUG).; Results: The patients with PD in the E-EG had lower performance in the UPDRS and Line B test compared to those in the L-EG at post-exercise ($p < 0.05$). Moreover, the patients with PD in the E-EG had much lower performance in the PDQ-39 and 9-Hole Peg test compared to those in the L-EG at post-exercise ($p < 0.01$).; Conclusion: Implementation of an exercise regimen improved the movement abilities and quality of life in PD patients, especially in the E-EG. This data supports the idea that intended exercise should be implemented as part of the treatment strategy for PD patients as early as possible. (© 2021. Fondazione Società Italiana di Neurologia.)

Access or request full text: <https://libkey.io/10.1007/s10072-021-05530-6>

18. Evidence for Early and Regular Physical Therapy and Exercise in Parkinson's Disease

Authors: Ellis, Terry D.; Colón-Semenza, Cristina; DeAngelis, Tamara R.; Thomas, Cathi A.; Hilaire, Marie-Hélène Saint; Earhart, Gammon M. and Dibble, Leland E.

Publication Date: 2021

Journal: Seminars in Neurology 41(2), pp. 189–205

Abstract: Advances in medical management of Parkinson's disease (PD) have resulted in living longer



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with disability. Although disability worsens over the course of the disease, there are signs of disability even in the early stages. Several studies reveal an early decline in gait and balance and a high prevalence of nonmotor signs in the prodromal period that contribute to early disability. There is a growing body of evidence revealing the benefits of physical therapy and exercise to mitigate motor and nonmotor signs while improving physical function and reducing disability. The presence of early disability coupled with the benefits of exercise suggests that physical therapy should be initiated earlier in the disease. In this review, we present the evidence revealing early disability in PD and the effectiveness of physical therapy and exercise, followed by a discussion of a secondary prevention model of rehabilitation to reduce early disability and optimize long-term outcomes.

Access or request full text: <https://libkey.io/10.1055/s-0041-1725133>

19. Approach to the patient with early Parkinson disease: diagnosis and management

Authors: Kimber, Thomas E.

Publication Date: 2021

Journal: Internal Medicine Journal 51(1), pp. 20–26

Abstract: This article presents an evidence-based approach to the patient with newly diagnosed Parkinson disease (PD). It includes a discussion of the current understanding of the aetio-pathogenesis of PD and of clinical features, both motor and non-motor, that assist the clinician in making this diagnosis. An approach to the management of early stage PD is discussed, including emerging evidence of the benefits of physical exercise in this condition, and issues to consider in the selection of dopaminergic medication. The newly diagnosed patient with PD is often keen to know what the future holds for them, as they face this progressive neurodegenerative condition. While currently available medical therapies are symptomatic, rather than disease-modifying, in nature, it is hoped that improved understanding of the aetio-pathogenesis of PD will pave the way for future disease-modifying therapies.

Access or request full text: <https://libkey.io/10.1111/imj.15148>

20. Health behaviors a year after an early intervention exercise and education program for people with Parkinson's disease.

Authors: Li, Gillian;Horne, Jeremy and Paul, Serene S.

Publication Date: 2021

Journal: Neurodegenerative Disease Management 11(1), pp. 65–75

Abstract: Aim: To evaluate the impact of an early intervention program on exercise behavior and mood in people with Parkinson's disease (PD) 1 year following participation. **Patients & methods:** Education and exercise program participants (n = 152) were followed up for 1 year. Changes in exercise behavior and mood and factors associated with these changes were examined. **Results:** At follow-up, 28% more participants exercised (p < 0.05). **Conclusion:** An education and exercise program promoted positive exercise behavior change sustained for a year, supporting the importance of early intervention for people



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with PD. Future research should explore sustainable ways to encourage prolonged behavior change, including regular follow-up.

Access or request full text: <https://libkey.io/10.2217/nmt-2020-0031>

21. Sustainment of proactive physical therapy for individuals with early-stage Parkinson's disease: a quality improvement study over 4 years.

Authors: MacDonald, Jillian;Doyle, Laura;Moore, Jennifer L. and Rafferty, Miriam R.

Publication Date: Sep 27 ,2021

Journal: Implementation Science Communications 2(1), pp. 111

Abstract: BACKGROUND: Implementation science frameworks aided the development of a new, evidence-based clinical physical therapy program. The purpose of this report is to describe the process of sustaining a clinical program in practice for over 4 years. We present a framework for integrating tools for sustainability with the Knowledge-to-Action model in the context of a proactive physical therapy (PAPT) program for individuals with early-stage Parkinson's disease. **METHODS:** Sustainability of implementation strategies was addressed using the Dynamic Sustainability Framework and sustainability assessment tools. Repeated retrospective medical record reviews and phone interviews were used to evaluate the reach and adoption of the PAPT over 4 years. Characteristics of those who engaged with PAPT, implementation fidelity, and clinical effectiveness were assessed for year 1 and year 3. Sustainability was measured using RE-AIM, NHS Sustainability Model, and Clinical Sustainability Assessment Tool. **RESULTS:** Reach increased from 28 to 110 total patients per year and spread occurred from one to three sites. PAPT user age, sex, Hoehn and Yahr rating, time since diagnosis, and type of insurance were similar in year 1 and year 3 ($p > 0.05$). The program sustained its effect to help participants increase or maintain self-reported exercise (Y1, 95%; Y3, 100%). However, upon evaluation PAPT users in year 3 had longer time since symptom onset and worse UPDRS motor scores compared to the PAPT users in year 1 ($p > 0.05$). The program sustained its effect to help participants increase or maintain self-reported exercise (Y1, 95%; Y3, 100%). However, upon evaluation PAPT users in year 3 had longer time since symptom onset and worse UPDRS motor scores compared to the PAPT users in year 1 ($p > 0.05$). **CONCLUSIONS:** Integrating multiple sustainability models and assessments supported continued effectiveness, spread, and sustainment of PAPT for 4 years. Effective planning, anticipating common healthcare changes, and addressing sustainability determinants early in program implementation were essential aspects of long-term success. Copyright © 2021. The Author(s).

Access or request full text: <https://libkey.io/10.1186/s43058-021-00205-x>

22. Psychological interventions for people with Parkinson's disease in the early 2020s: Where do we stand?

Authors: Zarotti, Nicolo;Eccles, Fiona J. R.;Foley, Jennifer A.;Paget, Andrew;Gunn, Sarah;Leroi, Iracema and Simpson, Jane



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Publication Date: 2021

Journal: Psychology & Psychotherapy: Theory, Research & Practice 94(3), pp. 760–797

Abstract: PURPOSE: To explore the heterogeneity of the literature on psychological interventions for psychological difficulties in people with Parkinson's disease (PD). **METHODS:** A scoping review was performed across five major databases (MEDLINE Complete, PsycINFO, CINAHL, Academic Search Ultimate, and Cochrane Library) up to June 2020. **RESULTS:** From an initial return of 4911 citations, 56 studies were included, of which 21 were RCTs. A relatively wide range of therapeutic models have been adopted with people with PD, from common therapies such as cognitive behavioural therapy (CBT) and mindfulness, to less frequent approaches, for example, acceptance and commitment therapy (ACT) and psychodrama. The clinical implications of the findings are discussed, and suggestions are provided for future research on intervention studies and key psychological outcomes. **CONCLUSIONS:** CBT appears to be effective in treating depression and sleep disorders in people with PD, while psychoeducation programmes alone should be avoided. The use of CBT to improve anxiety, quality of life, and impulse control, as well mindfulness-based interventions, should be undertaken with some caution because of insufficient research and inconsistent results. As we enter the new decade, more high-quality evidence is required for psychological interventions in people with PD in general and to corroborate preliminary positive findings on the adoption of less frequent approaches such as ACT. **PRACTITIONER POINTS:** Parkinson's disease is a progressive neurodegenerative condition associated with several psychological difficulties which be targeted by psychological interventions. Currently, cognitive behavioural therapy (CBT) can be recommended to treat depression and sleep disorders in people with Parkinson's, while psychoeducation alone should be avoided. Caution is advised regarding the use of CBT and mindfulness-based interventions to improve anxiety, quality of life, and impulse control. Further evidence is required for less common approaches, such as acceptance and commitment therapy, psychodrama, and EMDR. Copyright © 2020 British Psychological Society.

Access or request full text: <https://libkey.io/10.1111/papt.12321>

23. Non-pharmacological Treatment Challenges in Early Parkinson's Disease for Axial and Cognitive Symptoms: A Mini Review

Authors: Sharpe, Gabriella;Macerollo, Antonella;Fabbri, Margherita and Tripoliti, Elina

Publication Date: 2020

Journal: Frontiers in Neurology 11, pp. N.PAG

Abstract: Background: Parkinson's disease (PD) is now known to be a multisystemic heterogeneous neurodegenerative disease, including a wide spectrum of both motor and non-motor symptoms. PD patients' management must encompass a multidisciplinary approach to effectively address its complex nature. There are still challenges in terms of treating axial (gait, balance, posture, speech, and swallowing) and cognitive symptoms that typically arise with disease progression becoming poorly responsive to dopaminergic or surgical treatments. Objective: The objectives of the study are to further establish the presentation of axial and cognitive symptoms in early PD [Hoehn and Yahr (H&Y) scale ≤ 2] and to discuss the evidence for non-pharmacological approaches in early PD. Results: Mild and subtle changes in the investigated domains can be present even in early PD. Over the last 15 years, a few randomized clinical trials have been focused on these areas. Due to the low



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number of studies and the heterogeneity of the results, no definitive recommendations are possible. However, positive results have been obtained, with effective treatments being high-intensity treadmill and cueing for gait disturbances, high-intensity voice treatment, video-assisted swallowing therapy for dysphagia, and warm-up exercises and Wii Fit™ training for cognition. Conclusions: Considering the association of motor, speech, and cognitive function, future trials should focus on multidisciplinary approaches to combined non-pharmacological management. We highlight the need for a more unified approach in managing these "orphan" symptoms, from the very beginning of the disease. The concept "the sooner the better" should be applied to multidisciplinary non-pharmacological management in PD.

Access or request full text: <https://libkey.io/10.3389/fneur.2020.576569>

24. Association of daily physical activity with cognition and mood disorders in treatment-naive patients with early-stage Parkinson's disease.

Authors: Terashi, Hiroo;Taguchi, Takeshi;Ueta, Yuki;Mitoma, Hiroshi and Aizawa, Hitoshi

Publication Date: 2019

Journal: Journal of Neural Transmission 126(12), pp. 1617–1624

Abstract: To determine the association of daily physical activity with cognition, mood disorders, and olfactory function in treatment-naive patients with early-stage Parkinson's disease (PD). The study subjects were 52 treatment-naive patients with early-stage PD (²) of the PD group was significantly lower than that of healthy controls ($p < 0.001$). Moreover, the daily physical activity of the PD group was significantly associated with FAB (beta = 0.337, $p = 0.027$) and BADS (beta = 0.374, $p = 0.017$) scores, but not with MMSE, CDT, BDI-II, AS, and OSIT-J scores. The daily physical activity is significantly reduced in treatment-naive patients with early-stage PD, and the low activity correlates with frontal/executive function.

Access or request full text: <https://libkey.io/10.1007/s00702-019-02085-x>

25. Therapeutic singing as an early intervention for swallowing in persons with Parkinson's disease.

Authors: Stegemoller, E. L.;Hibbing, P.;Radig, H. and Wingate, J.

Publication Date: Apr ,2017

Journal: Complementary Therapies in Medicine 31, pp. 127–133

Abstract: OBJECTIVE: For persons with Parkinson's disease (PD), secondary motor symptoms such as swallow impairment impact the quality of life and are major contributors to mortality. There is a present need for therapeutic interventions aimed at improving swallow function during the early stages of PD. The purpose of this pilot study was to examine the effects of a group therapeutic singing intervention on swallowing in persons with PD with no significant dysphagia symptoms. **DESIGN:** Cohort study. **SETTING:** University in the United States. **PARTICIPANTS:** Twenty-four participants with PD. **INTERVENTION:** Eight weeks of group therapeutic singing. **MAIN OUTCOME MEASURES:** Electromyography (EMG) was used to assess muscle activity associated with swallow pre and post the group singing intervention. Swallow quality of life (SWAL-QOL) and the Unified Parkinson's Disease Rating Scale (UPDRS) were also obtained pre- and post-



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intervention. **RESULTS:** Participants reported minimal difficulty with swallowing, yet results revealed a significant increase in EMG outcome measures, as well as significant improvement in UPDRS total and UPDRS motor scores. No significant differences were revealed for SWAL-QOL. **CONCLUSION:** Increases in EMG timing measures may suggest that group singing results in the prolongation of laryngeal elevation, protecting the airway from foreign material for longer periods of time during swallow. Combined with the improvement in UPDRS clinical measures, therapeutic singing may be an engaging early intervention strategy to address oropharyngeal dysphagia while also benefiting additional clinical symptoms of PD. Copyright © 2017 Elsevier Ltd. All rights reserved.

Access or request full text: <https://libkey.io/10.1016/j.ctim.2017.03.002>

26. Anxiety is associated with freezing of gait and attentional set-shifting in Parkinson's disease: A new perspective for early intervention.

Authors: Martens, K. A. Ehgoetz; Hall, J. M.; Gilat, M.; Georgiades, M. J.; Walton, C. C. and Lewis, S. J. G.

Publication Date: 2016

Journal: Gait & Posture 49, pp. 431–436

Abstract: Previous research has shown that anxiety in Parkinson's disease (PD) is associated with freezing of gait (FOG), and may even contribute to the underlying mechanism. However, limited research has investigated whether PD patients with FOG (PD+FOG) have higher anxiety levels when compared directly to non-freezing PD patients (PD-NF) and moreover, how anxiety might contribute to FOG. The current study evaluated whether: (i) PD+FOG have greater anxiety compared to PD-NF, and (ii) anxiety in PD is related to attentional set-shifting, in order to better understand how anxiety might be contributing to FOG. In addition, we explored whether anxiety levels differed between those PD patients with mild FOG (PD+MildFOG) compared to PD-NF. Four hundred and sixty-one patients with PD (231 PD-NF, 180 PD+FOG, 50 PD+MildFOG) were assessed using the Freezing of Gait Questionnaire item 3 (FOG-Q3), Hospital Anxiety and Depression Scale (HADS), Digit Span Test, Logical Memory Retention Test and Trail Making Tests. Compared to PD-NF, PD+FOG had significantly greater anxiety ($p < 0.001$). PD+MildFOG, however, demonstrated similar levels of anxiety as the PD+FOG. In all patients, the severity of anxiety symptoms was significantly correlated to their degree of self-reported FOG on FOG-Q3 ($p < 0.001$) and TMT B-A ($p = 0.039$). Similar results were found for depression. In conclusion, these results confirm the key role played by anxiety in FOG and also suggest that anxiety might be a promising biomarker for FOG. Future research should consider whether treating anxiety with pharmacological and/or cognitive behavioural therapies at early stages of gait impairment in PD may alleviate troublesome FOG. Copyright © 2016 Elsevier B.V. All rights reserved.

Access or request full text: <https://libkey.io/10.1016/j.gaitpost.2016.07.182>

27. Intensive Rehabilitation Treatment in Early Parkinson's Disease: A Randomized Pilot Study With a 2-Year Follow-up



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Authors: Frazzitta, Giuseppe;Maestri, Roberto;Bertotti, Gabriella;Riboldazzi, Giulio;Boveri, Natalia;Perini, Michele;Uccellini, Davide;Turla, Marinella;Comi, Cristoforo;Pezzoli, Gianni and Ghilardi, M. Felice

Publication Date: February 1 ,2015

Journal: Neurorehabilitation and Neural Repair 29(2), pp. 123–131

Abstract: Background. Although physical exercise improves motor aspects of Parkinson’s disease (PD), it is not clear whether it may also have a neuroprotective effect. Objective. In this 2-year follow-up study, we determined whether intensive exercise in the early stages of the disease slows down PD progression. Methods. Forty newly diagnosed patients with PD were treated with rasagiline and randomly assigned to 2 groups: MIRT Group (two 28-day multidisciplinary intensive rehabilitation treatments [MIRT], at 1-year interval) and Control Group (only drug). In both groups, Unified Parkinson’s Disease Rating Scale Section II (UPDRS II), UPDRS III, 6-minute walking test (6MWT), Timed Up-and-Go test (TUG); PD Disability Scale (PDDS), and l-dopa equivalents were assessed at baseline (T0), 6 months (T1), 1 year (T2), 18 months (T3), and 2 years (T4) later. Results. Over 2 years, UPDRS II, UPDRS III, TUG, and PDDS differentially progressed in the 2 groups: In the MIRT Group, all scores at T4 were better than at T0 (all Ps < .03). No changes were noted in the Control Group. l-dopa equivalent dosages increased significantly only in the Control Group (P = .0015), with a decrease in the percentages of patients in monotherapy (T1 40%; T2, T3, and T4 20%). In the MIRT Group, the percentages of such patients remained higher (T1 and T2 100%; T3 89%; T4 75%). Conclusions. These results suggest that MIRT might slow down the progression of motor decay, it might delay the need for increasing drug treatment, and thus, it might have a neuroprotective effect.

Access or request full text: <https://libkey.io/10.1177/1545968314542981>

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Evidence for group support

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1. Comparison of the Effectiveness of Acceptance and Commitment Group Therapy and Pharmacotherapy on Reducing Non-Motor Symptoms in Parkinson's Disease Patients

Authors: Javidtash, Zahra;Amini, Naser;Baghooli, Hossein;Barzegar, Majid and Ostovan, Vahid Reza

Publication Date: 2025

Journal: Journal of Assessment & Research in Applied Counseling 7(1), pp. 157–164

Abstract: Objective: The present study aimed to determine the difference in effectiveness between Acceptance and Commitment Group Therapy (ACT) and pharmacotherapy on reducing non-motor symptoms in Parkinson's disease patients who visited the Imam Reza Clinic in Shiraz, Neurology Department. Methods and Materials: In this quasi-experimental study, 36 participants were purposefully selected for two groups (each group = 18 participants). The tools used for the assessment and diagnosis of disorders by a clinical specialist included the Non-Motor Symptoms Scale (NMSS) for Parkinson's Disease. Findings: The findings confirmed the effectiveness of ACT and



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pharmacotherapy on non-motor symptoms, covering components such as cardiovascular, sleep/fatigue, mood/cognition, perceptual problems/hallucinations, attention/memory, gastrointestinal, urinary, sexual function, and miscellaneous issues ($P < 0.05$). The results indicated that the effectiveness of ACT was greater than that of pharmacotherapy, and this difference was statistically significant ($P < 0.05$). Conclusion: Therefore, it is recommended that centers associated with Parkinson's patients use ACT to improve the mentioned components and thereby enhance the well-being of this group of patients. ABSTRACT FROM AUTHOR]; Copyright of Journal of Assessment & Research in Applied Counseling is the property of KMAN Publication Inc and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use. This abstract may be abridged. No warranty is given about the accuracy of the copy. Users should refer to the original published version of the material for the full abstract. (Copyright applies to all Abstracts.)

Access or request full text: <https://libkey.io/10.61838/kman.jarac.7.1.18>

2. Effectiveness of Group Cognitive Behavioral Therapy on Quality of Life and Psychological Wellbeing of Patients With Parkinson Disease: A Randomized Controlled Trial

Authors: Narimisaie, Jale;Naeim, Mahdi;Nasiri, Zohreh;Imannezhad, Shima and Mohammadi, Yasaman

Publication Date: 2025

Journal: The Journal of Nervous and Mental Disease 213(3), pp. 78–81

Abstract: Abstract: This study investigates the impact of group cognitive behavioral therapy (CBT) on depression reduction and quality of life improvement among individuals with Parkinson disease. A randomized clinical trial with pretest and posttest measurements involved 90 participants referred to Roozbeh Hospital in Tehran in 2023, who were randomly assigned to either an experimental group ($n = 45$) or a control group ($n = 45$). The experimental group underwent a 3-month CBT intervention comprising 12 sessions of 90 minutes each. Both groups completed the Beck Depression Inventory and the World Health Organization Quality of Life Questionnaire preintervention and postintervention. Data analysis via multivariate analysis of covariance using SPSS-25 revealed significant improvements in reducing depression and enhancing quality of life in the experimental group compared with the control group ($p \leq 0.01$). These findings indicate that CBT is an effective treatment for reducing depression and improving the quality of life of individuals with Parkinson disease, demonstrating its clinical applicability in therapeutic settings. (Copyright © 2025 Wolters Kluwer Health, Inc. All rights reserved.)

Access or request full text: <https://libkey.io/10.1097/NMD.0000000000001822>

3. Group exercise for balance in people with Parkinson's disease: a systematic review with meta-analysis

Authors: States, Rebecca A.;Dewan, Birendra;Lynam, Peggy;Mensah, Nia and Pottorf, Ofra

Publication Date: 2025

Journal: Physiotherapy Theory & Practice 41(4), pp. 872–889



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Abstract: Background: High-quality evidence shows that exercise helps people with Parkinson's disease improve functional abilities including balance. However, few studies have investigated whether the setting and format through which balance-focused exercise programs are provided matters. This systematic review investigated group exercise compared to individual exercise, and to no-exercise control (CTL), on clinical measures of balance for people with Parkinson's disease. Methods: MEDLINE, EMBASE, CINAHL and Cochrane CENTRAL databases were searched through March 24, 2024, on terms for Parkinson's disease; exercise or physical activity; community-based or group classes; balance or postural control. Citations, abstracts and full-text articles were independently reviewed, and included studies were rated on risk of bias by two authors. Results: Twenty-seven randomized controlled trials (30 reports) with 1200 participants met criteria. Meta-analysis using mean difference (MD) compared group exercise to CTL on seven clinical measures of balance. Three yielded significant differences favoring group exercise: Timed Up and Go = -2.29 (MD), -3.56 to -1.02 (95% Confidence interval) (95% CI); Mini-BEST = 2.72 (MD), 1.88 to 3.57 (95% CI); Berg Balance Scale = 4.31 (MD), 1.33 to 7.29 (95% CI). Meta-analyses were also conducted on six clinical measures of balance, comparing group exercise to individual exercise, yielding no significant differences. Conclusions: For people with Parkinson's disease, group exercise may be more effective than CTL on some clinical measures of balance and it yields similar results to individual exercise. People with Parkinson's disease are encouraged to participate regularly in group or individual exercise based on preference and accessibility.

Access or request full text: <https://libkey.io/10.1080/09593985.2024.2374063>

4. A physiotherapy group exercise and self-management approach to improve physical activity in people with mild-moderate Parkinson's disease: a randomized controlled trial

Authors: Brauer, Sandra G.; Lamont, Robyn M. and O'Sullivan, John, D.

Publication Date: 2024

Journal: Trials 25(1), pp. 76

Abstract: Background: Physical activity levels are low in people with Parkinson's disease (PD) and have proved difficult to increase with exercise programs alone. Intervention approaches that address both the capacity to engage in physical activity and self-management strategies to change and maintain exercise behaviours are needed to address this intractable issue.; Methods: This will be an assessor-blinded, randomized controlled trial performed in Brisbane, Australia. Ninety-two people with mild-moderate PD will be randomly allocated to two groups: usual care, and a physiotherapy-led group exercise program combined with self-management strategies. In the intervention group, twelve, 80-min sessions will be conducted over 4 weeks in groups of up to 4 participants. The intervention will consist of circuit training including treadmill walking to target aerobic fitness, and activities targeting strength, balance, and gait performance. In addition, each session will also incorporate strategies focusing on self-management and behaviour change, augmented by the provision of a fitness activity tracker. Outcome measures will be collected at baseline (T1), immediately post intervention (T2) and at 6 months follow-up (T3). The primary outcome measure is free-living physical activity (average daily step count over 7 days) at pre (T1) and post (T2) intervention measured using an activPAL™ device. Secondary outcome measures captured at all time points include time spent walking, sedentary and in moderate intensity exercise over 7 days; spatiotemporal gait performance (step length, gait speed, endurance); health-related quality



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of life; and outcome expectations and self-efficacy for exercise.; Discussion: Sustainability of gains in physical activity following exercise interventions is a challenge for most populations. Our incorporation of a chronic disease self-management approach into the exercise program including fitness tracking extends previous trials and has potential to significantly improve free-living physical activity in people with PD.; Trial Registration: This study has been prospectively registered in Australian and New Zealand Clinical Trial Registry (ACTRN12617001057370), registered on 19/07/2017. Available from www.anzctr.org.au/ACTRN12617001057370.aspx . (© 2024. The Author(s).)

Access or request full text: <https://libkey.io/10.1186/s13063-023-07870-4>

5. "There is only one motive ... fun." Perspectives of participants and providers of physical exercise for people with Parkinson's disease

Authors: Chakraverty, Digo;Roheger, Mandy;Dresen, Antje;Krohm, Fabian;Klingelhöfer, Jörg;Ernst, Moritz;Eggers, Carsten;Skoetz, Nicole;Kalbe, Elke and Folkerts, Ann-Kristin

Publication Date: 2024

Journal: Disability & Rehabilitation 46(23), pp. 5591–5600

Abstract: Purpose: To explore the perspectives of people with Parkinson's disease (PD) and exercise providers regarding facilitating factors, barriers, needs, and demands relating to physical exercise for people with PD. Materials and Methods: Focus group discussions or telephone interviews of 30 people with PD (with or without an active sports history) and 13 providers were conducted and analyzed using structuring content analysis. Results: Factors facilitating participation in physical exercise included motivation-enhancing elements (enjoyment, group training environment) and providers with sufficient qualifications in PD-specific training demands. Identified barriers were lack of motivation, physical limitations, poor service accessibility, and inadequate matching of intervention groups based on capability or age. Providers found it difficult to design and conduct group trainings for people with PD with varying physical limitations. Having an active sports history before PD-onset was described as generally beneficial, though a competitive mindset could lead to frustration. People with PD reported needing their physicians to provide better education regarding physical exercise. Conclusion: Enjoyment of physical exercise is a key aspect of maintaining physical activity engagement, which should be considered more in research and clinical practice. Developing qualifications for providers could help to broaden and enhance the dissemination of PD-specific exercise approaches. Physicians should be trained to encourage physical exercise. Implications for rehabilitation: Physicians should highlight the benefits and be knowledgeable regarding the availability of physical exercise interventions for people with PD. Additional physical exercise providers should become qualified to work with people with PD. The joyfulness of physical exercise interventions is a key aspect of maintaining physical activity engagement for people with PD.

Access or request full text: <https://libkey.io/10.1080/09638288.2024.2310754>

6. Co-Design of a Facilitated Self-Management Toolkit for People With Parkinson's Disease



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Authors: Davies, Nathan;Armstrong, Megan;Pigott, Jennifer S.;Nimmons, Danielle;Read, Joy;Gardner, Benjamin;Maydon, Bev;Schrag, Anette and Walters, Kate

Publication Date: 2024

Journal: Health Expectations 27(6), pp. 1–13

Abstract: Background: Parkinson's disease is a complex progressive neurodegenerative disease increasing globally. Self-management interventions have shown promise in improving the quality of life for people with chronic conditions. This paper aims to describe the development processes and the core components of a facilitated self-management toolkit to support people with Parkinson's disease to self-manage their condition. Methods: An iterative co-design approach was adopted and included the use of systematic reviews, qualitative methods and theory to develop the Live Well with Parkinson's toolkit. A co-design group was established consisting of people with Parkinson's, family carers and health and social care experts to produce and refine an online self-management toolkit to be tested in practice. Five co-design groups were conducted alongside several phases of toolkit development. Results: An online self-management toolkit, called Live Well with Parkinson's, was developed with core aspects such as tailored information to the individual, a well-being section using an asset-based approach and problem-solving skills to create and maintain goals, symptom review and management sections and a tracker of medication, symptoms and activities/actions. A paper-based alternative version was also created for those who cannot use an online resource. The toolkit is fully manualised and facilitated by six sessions from a 'supporter' who is trained in behaviour change techniques. It can be shared with carers and healthcare professionals. Conclusion: The toolkit is a robust and comprehensive approach to self-management of Parkinson's disease. It is evidenced based, incorporates theory and was developed with people with Parkinson's and experts in the area. The Live Well with Parkinson's toolkit has the potential to be embedded within routine healthcare, aligning with self-management policies. Patient or Public Contribution: Author B.M. is our patient and public involvement (PPI) representative and author on this paper. B.M. supports a team of 15 PPI members who have contributed to the development of the toolkit. This involvement has included attending research team and steering group meetings, attending and facilitating co-designed workshops, reviewing all the toolkit information before approval and supporting with the user testing.

Access or request full text: <https://libkey.io/10.1111/hex.70104>

7. [How the implementation of a school for people with Parkinson's disease can succeed-Results of a consensus study and a formative evaluation]

Authors: Gerschel, Tanita;Prokop, Scally;Schulze, Lara;Feige, Tim;Zschieschang, Anja;Barbe, Michael Thomas;Bitterlich, Robert;Caffier, Julian;Csoti, Ilona;Eggers, Carsten;Gaßner, Heiko;Gülke, Eileen;Hähnel, Tom;Herbst, Heinz;Jochim, Angela;Kiparski, Anni;Klietz, Martin;von Liel, Alexa;Lingor, Paul;Loewenbrück, Kai, et al

Publication Date: 2024

Journal: Der Nervenarzt 95(6), pp. 539–543

Abstract: Background: As the most rapidly increasing neurodegenerative disease worldwide, Parkinson's disease is highly relevant to society. Successful treatment requires active patient



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participation. Patient education has been successfully implemented for many chronic diseases, such as diabetes and could also provide people with Parkinson's disease with skills to manage the disease better and to participate in shared decision making.; Material and Methods: To prepare the implementation of a concept for patient education for people with Parkinson's disease, a structured consensus study was conducted and a pilot project formatively evaluated. The structured consensus study included experts from all over Germany. It consisted of two online surveys and an online consensus conference. The formative evaluation was conducted as three focus groups. Transcripts were evaluated using content-structuring qualitative content analysis.; Results: From the consensus procedure 59 consented statements emerged, mainly regarding the contents of a patient school and a group size of 6-8 persons. Only two statements could not be consented. The formative evaluation detected a tendency towards a positive attitude for a digital training format and a very positive evaluation of the contents.; Discussion: Overall, important recommendations for a patient school can be drawn from this study. The following subjects require further investigation: format, inclusion criteria, group composition and inclusion of caregivers. (© 2024. The Author(s).)

Access or request full text: <https://libkey.io/10.1007/s00115-024-01639-z>

8. Exploring the lived experiences of individuals with Parkinson's disease and their relatives: insights into care provision experiences, disease management support, self-management strategies, and future needs in Germany (qualitative study)

Authors: Krieger, Theresia;Jozwiak, Leonie;Ebersbach, Georg;Suess, Thorsten;Falkenburger, Björn;Feige, Tim;Eggers, Carsten;Warnecke, Tobias;Scholl, Winfried;Schmidt-Heisch, Christian;Folkerts, Ann-Kristin;Kalbe, Elke and Seven, Ümran Sema

Publication Date: 2024

Journal: BMC Neurology 24(1), pp. 208

Abstract: Background: Parkinson's disease (PD) significantly impacts the health-related quality of life of affected individuals and their relatives. In order to support the affected individuals and their families in coping with PD, it is essential to offer comprehensive information about their experiences. A comprehensive understanding of their lived experiences with the disease, the healthcare system, applied self-management strategies and their needs is considered crucial for developing a PD support program. Therefore, we aimed to explore the lived experiences and support needs of individuals with PD and their relatives in Germany.; Methods: This non-interventional, qualitative study conducted an explorative status quo and needs assessment. It generated knowledge through semi-structured focus groups and interviews with individuals with PD at various disease stages and their relatives. The interviews were digitally recorded, transcribed verbatim, and analysed using content analysis.; Results: Fifty-two individuals with PD and 29 relatives participated in eight focus groups and 13 paired and 13 individual interviews. Four themes with corresponding subthemes emerged: (1) experiences, revealing individuals' experiences around their diagnosis and with disease-specific care provision; (2) management support offers, clarifying who provides support and the type of support offered; (3) self-management, including comprehensibility, meaningfulness and manageability; and (4) future needs, differentiating between deficits and needs. Most participants expressed a sense of abandonment when obtaining self-management strategies and mastering their lives with PD, often referred to as 'life 2.0'. They identified the lack of structured and adequate provision of information, system orientation and social awareness.; Conclusions: In





Germany, there is an urgent need for a comprehensive PD care program that addresses the needs of individuals with PD and their relatives from the start of their care trajectory. It could assist individuals in gaining a comprehensive understanding of the disease, obtaining self-management strategies, building a support network, and becoming experts in self-managing their disease. Moreover, it may positively influence their care trajectory and reduce burdens, such as overburdening, fear of progression, and health anxiety.; Trial Registration: German Clinical Studies Register (<https://www.drks.de/DRKS00030090> , No. DRKS00030090, Date of registration: 15.12.2022). (© 2024. The Author(s).)

Access or request full text: <https://libkey.io/10.1186/s12883-024-03696-y>

9. The effects of a culturally informed community-based dance movement therapy programme for persons with Parkinson's disease in India

Authors: Kunte, Tejali;Barretto, Maria and D'souza, Nicole

Publication Date: 2024

Journal: Body, Movement & Dance in Psychotherapy 19(3), pp. 268–287

Abstract: Dance and movement therapy (DMT) and Western dance forms have been advocated for the effective management of Parkinson's Disease (PD). This study focuses on including culturally relevant Indian dance concepts in developing and evaluating a community-based DMT programme for PD. This is the first comparative study on DMT for PD conducted in India, with a control group of a 'physical exercise programme'. 34 People with Parkinson's Disease (PwPs) were assigned to a 'DMT intervention' or a 'Physical exercise group' using convenience sampling and they attended weekly 90-minute sessions over 12 weeks. Mood, physical and cognitive functioning, and quality of life were measured pre-and post-interventions. Results and subjective feedback from PwPs suggest that DMT intervention was more effective in improving positive mood and reducing depression in PD as compared to the control group. This study concludes that culturally informed community-based DMT programmes hold promise as a supportive intervention for PwPs in India. ABSTRACT FROM AUTHOR]; Copyright of Body, Movement & Dance in Psychotherapy is the property of Taylor & Francis Ltd and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use. This abstract may be abridged. No warranty is given about the accuracy of the copy. Users should refer to the original published version of the material for the full abstract. (Copyright applies to all Abstracts.)

Access or request full text: <https://libkey.io/10.1080/17432979.2024.2319061>

10. The strength, hope and resourcefulness program for people with Parkinson's disease: a qualitative investigation of group members' experiences

Authors: Larsen, Denise J.;Murdoch, Kenneth C.;Arsenault, Chelsea L.;Joyce, Anthony;Howell, Andrew J.;Edey, Wendy;Sandham, Tricia and Miyasaki, Janis

Publication Date: 2024

Journal: Counselling Psychology Quarterly 37(2), pp. 192–215



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Abstract: Parkinson's Disease (PD) is a neurodegenerative disease characterized by motor and non-motor features. Many people with PD struggle with mental health issues such as depression. Evidence shows that people with PD may have trouble adopting a hopeful or positive orientation given their diagnosis and symptoms. Psychological treatments for PD are scarce and even more scarce are treatments that specifically focus on promoting hope and well-being. The Strengths, Hope, and Resourcefulness Program for People with Parkinson's Disease was developed to begin to address this treatment gap. This qualitative study identifies seven processes group members found helpful during treatment: Accessing Hope, Comparing, Drawing Together, Reaching Out Beyond Self, Releasing Emotion, Sharing Skills and Picking Up Resources, and Self-Reflecting Leading to Personal Insight. The unique contributions of an intentional and explicit hope, strengths, and resources intervention are discussed with specific attention to therapeutic process and practice. Provides client-elicited information useful to the implementation of hope and strength-focused approaches to group work with those with Parkinson's Disease. The group treatment may reinforce the value of hope as a therapeutic group factor by facilitating its emergence and contribution to group cohesion. Affords an important precursor to hope through the expression of difficult emotions in a safe environment. Offers insights into the group leader's role as process facilitator rather than top-down content expert.

Access or request full text: <https://libkey.io/10.1080/09515070.2023.2199970>

11. Effects of Group Exercise on Motor Function and Mobility for Parkinson Disease: A Systematic Review and Meta-Analysis

Authors: Palm, Diana;Swarowsky, Alessandra;Gullickson, Mackenzie;Shilling, Holly and Wolden, Mitch

Publication Date: 2024

Journal: PTJ: Physical Therapy & Rehabilitation Journal 104(4), pp. 1–12

Abstract: Objective Parkinson disease (PD) is associated with a predictable decline in motor function and mobility that is commonly managed with exercise. There is a limited understanding of the effects of group exercise compared to individual exercise (IE) and usual care (UC) on motor function and mobility. Our purpose was to investigate the effects of group exercise compared to IE and UC on motor function and mobility for people with PD. Methods A systematic review and meta-analysis was performed with randomized control trials that investigated the effects of group compared with IE and UC on motor function and mobility for people with PD. A systematic search was performed in PubMed, EBSCO, and Science Direct databases. Methodological quality was assessed using the Cochrane Grading of Recommendations Assessment, Development, and Evaluation approach. Results Twenty-three studies assessed at least 1 mobility-related outcome measure, met our inclusion criteria, and were included in quantitative analysis. There was no significant difference on motor function and mobility between group exercise and IE for all standardized outcome assessment meta-analyses. Motor function and mobility were significantly improved with group exercise compared to UC in 9 of 11 standardized outcome assessment meta-analyses. Results were based upon low to moderate quality of evidence. Conclusion Based upon low to moderate quality of evidence, group exercise has a similar to larger effect as IE and UC on improving motor function and mobility for people with PD. When used in combination with skilled physical therapy, group exercise may be an appropriate adjunct to individualized physical therapy to maximize mobility and function.



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Impact Long-term adherence to exercise is essential to maintain mobility and motor function for people with PD. Our study suggests group exercise is as effective as IE and may be an appropriate option to encourage long-term adherence related to increased access, socialization, and accountability.

Access or request full text: <https://libkey.io/10.1093/ptj/pzae014>

12. The effect of osteoporosis education on osteoporosis knowledge level and daily life in Parkinson's disease patients: A 12-week, randomized-controlled trial

Authors: Şahin, Muhammed Abdulkerim;Aydemir, Mustafa Doğukan;Çolakoğlu, Berril Dönmez;Çakmur, Raif;Ünal, Belgin and Gülbahar, Selmin

Publication Date: 2024

Journal: Turkish Journal of Physical Medicine & Rehabilitation (2587-1250) 70(3), pp. 379–389

Abstract: Objectives: This study aims to evaluate the effect of osteoporosis education on osteoporosis knowledge level (OKL) and behavioral changes in daily life in patients with Parkinson's disease (PD). Patients and methods: Between May 2019 and December 2019, a total of 54 patients (34 males, 20 females; median age: 68.5 years; range, 50 to 87 years) were included in the study. We randomly assigned in a 1:1 ratio, patients with PD to receive either only the brochure or in addition to this a verbal osteoporosis education. The patients were randomized into the control (n=27) and intervention groups (n=27). Seven of the patients (two in the control group and five in the intervention group) were lost to follow-up. The patients were assessed at baseline and Week 12. The primary outcomes were Physical Activity Scale for the Elderly (PASE) score (0-400) and daily calcium intake (DCI). The secondary outcomes were revised 2011 osteoporosis knowledge test (rOKT) score (0-32), frequency of falls, smoking and alcohol use at Week 12. Results: The median total PASE score was 81 (range, 0 to 205) for the intervention group, compared to 61 (range, 0 to 242) for control group at Week 12. There was no statistically significant difference between the groups at Week 12, except for the medians of the frequency of falls that was significantly lower in the intervention group ($p<0.05$). A significant improvement from baseline was observed in the median rOKT scores (control group 16 (range, 6 to 21) to 19 (range, 11 to 25); intervention group 13 (range, 6 to 24) to 18 (range, 9 to 24); $p<0.001$) and DCI (control group 855 (range, 420 to 1,640) to 890 (range, 550 to 1,660); intervention group, 870 (range, 400 to 1,385) to 1,020 (range, 400 to 1,940) mg/day; $p<0.01$) in both groups. Also, a significant improvement in the leisure activities (PASE subgroup) was observed in the intervention group ($p<0.05$). Conclusion: Osteoporosis education had some positive effects in patients with PD, even when only given the brochure. With additional verbal education, more benefits can be obtained.

Access or request full text: <https://libkey.io/10.5606/tftrd.2024.13026>

13. Experiences of people living with Parkinson's disease and key stakeholders in dance-based programs: a systematic review and meta-ethnography

Authors: Senter, Morgan;Clifford, Amanda M.;O'Callaghan, Maureen;McCormack, Megan and Ni Bhriain, Orfhlaith



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Publication Date: 2024

Journal: Disability & Rehabilitation 46(26), pp. 6288–6301

Abstract: Purpose: To identify and synthesize qualitative literature on the experiences of participants and key stakeholders in dance programs for people living with Parkinson's disease. Synthesizing the available literature can generate new insights into participant experience to inform current and future programs. Materials and Methods: Qualitative and mixed methods studies were identified via a systematic search of six databases: CINAHL, Web of Science, Scopus, SPORTDiscus, PsycInfo, and MEDLINE. Articles were synthesized using the meta-ethnographic method developed by Noblit and Hare (1988). Key concepts across studies were related via reciprocal translation, ultimately forming a line-of-argument synthesis. Results: 26 articles met the inclusion criteria. Four interrelated, overarching themes were developed: (1) dance communities provide peer support and insight into living with Parkinson's, (2) feeling safe, accepted, and included in the dance experience, (3) overcoming dance-based challenges contributes to sense of achievement, confidence, and connectedness, and (4) dance participation is an opportunity to re-imagine oneself. Conclusion: Participant experience is shaped by the instructor-participant relationship, the social environment of classes, and class difficulty level. In order to support participant experience, classes should be safe, supportive, and have an appropriate challenge-skill balance. These qualities facilitate creative immersion and the potential for personal and collective change. **IMPLICATIONS FOR REHABILITATION:** Physical activity can improve functional ability and quality of life in people living with Parkinson's disease (PD). Dance is a safe, enjoyable form of physical activity for people with PD that creates opportunities for meaningful social engagement and artistic expression. The quality of the instructor-dancer relationship, the wider social environment, and the challenge-skill balance contribute to dancer experience. For a dance class for people with PD to be successful, it must be safe, socially accepting, and provide opportunities for dancers to experience positive growth and a sense of achievement.

Access or request full text: <https://libkey.io/10.1080/09638288.2024.2327499>

14. Therapeutic Group Singing for Individuals with Parkinson's Disease: A Conceptual Framework

Authors: Lee, Sun Joo and Dvorak, Abbey L.

Publication Date: 2023

Journal: Music Therapy Perspectives 41(2), pp. 178–186

Abstract: Parkinson's disease (PD) is a complex, progressive, and degenerative neurological disorder. With millions affected worldwide, music therapists may have the opportunity to work with individuals with PD and their families. To better understand biological, psychological, and social factors associated with PD, and the interactions between these three systems, researchers encourage a biopsychosocial approach. A biopsychosocial approach supports the idea that biological, psychological, and social systems influence and interact with each other, affecting overall health and quality of life. Music therapy affects biopsychosocial functioning through the use of evidence-based music interventions. One such music therapy intervention supported in the literature for use with individuals with PD and their families is therapeutic group singing. However, this research evidence is diverse and complex. Thus, the purpose of this paper is to present a conceptual framework of the biopsychosocial approach in music therapy focused on therapeutic group singing for individuals with



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Parkinson's disease (PD). Our aims include: (1) identifying biopsychosocial (i.e. physical, psychological, and social) factors associated with PD, (2) presenting evidence-based outcomes of therapeutic group singing on biopsychosocial functioning, and (3) crafting a conceptual framework to consolidate evidence about therapeutic group singing as an effective intervention for this population. Research outcomes from various studies demonstrate benefits in biological, psychological, and social functioning from therapeutic group singing interventions. Overall, evidence suggests that therapeutic group singing – as visualized in the conceptual framework – is an effective intervention to address biopsychosocial functioning for individuals with PD and their families.

Access or request full text: <https://libkey.io/10.1093/mtp/miad008>

15. Voice improvement following conventional speech therapy combined with singing intervention in people with Parkinson's disease: A three-arm randomised controlled trial

Authors: Mohseni, Zeinab; Mohamadi, Reyhane; Habibi, Seyed Amir Hasan; Saffarian, Arezoo and Abolghasemi, Jamile

Publication Date: 2023

Journal: International Journal of Language & Communication Disorders 58(5), pp. 1752–1767

Abstract: Background: Although speech and voice disorders are common in Parkinson's disease (PD), there is insufficient evidence to support the effectiveness of behavioural speech therapies in these patients. Aims: This study aimed to examine the effects of a new tele-rehabilitation program, a combining of conventional speech therapy and singing intervention, on voice deficits in patients with PD. Methods & Procedures: This study was a three-armed, assessor-masked, randomised controlled trial. Thirty-three people with PD were randomly assigned to the combination therapy, conventional speech therapy, or singing intervention group. This study followed the Consolidated Standards of Reporting Trials guidelines for non-pharmacological treatment. Each patient participated in 12 tele-rehabilitation sessions over 4 weeks. The combination therapy group received speech and singing interventions simultaneously (respiratory, speech, voice, and singing exercises). Voice intensity as a primary outcome and the voice handicap index (VHI), maximum frequency range, jitter and shimmer as secondary outcomes were evaluated 1 week before the first intervention session, 1 week after the last intervention session and 3 months after the last evaluation. Outcomes & Results: The results of repeated measures analysis of variance showed a significant main effect of time on all outcomes in all three groups after treatment ($p < 0.001$). There was a significant group effect for voice intensity ($p < 0.001$), VHI ($p < 0.001$), maximum frequency range ($p = 0.014$) and shimmer ($p = 0.001$). The combination therapy group demonstrated a significant outperformance in the VHI and shimmer than the speech therapy ($p = 0.038$) and singing intervention ($p < 0.001$) groups. The results of this study also indicated that combination therapy group compared to singing intervention group had a larger effect on voice intensity ($p < 0.001$), shimmer ($p < 0.001$) and maximum frequency range ($p = 0.048$). Conclusions & Implication: The results demonstrated that combining speech therapy with a singing intervention delivered through tele-rehabilitation might be more effective in improving voice problems in patients with PD. What this paper adds: What is already known on the subject: Parkinson's disease (PD) is a neurological disorder that frequently causes disturbances in speech and voice, which negatively affect patients' quality of life. Although speech difficulties occur in 90% of patients with PD, evidence-based treatment options for speech and language problems in these patients are limited. Therefore, further studies are required to develop and assess evidence-based treatment programs. What this study adds: The findings of this study showed that a combination



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therapy program including conventional speech therapy approaches and individual singing intervention provided through tele-rehabilitation may have a greater effect on the improvement of voice problems in people with PD compared to speech therapy and singing intervention alone. What are the clinical implications of this work?: Tele-rehabilitation combination therapy is an inexpensive and enjoyable behavioural treatment. The advantages of this method are that it is easy to access, appropriate for many stages of voice problems in PD, requires no prior singing training, encourages voice health and self-management and maximises treatment resources available to people with PD. We believe that the results of this study can provide a new clinical basis for treatment of voice disorders in people with PD.

Access or request full text: <https://libkey.io/10.1111/1460-6984.12900>

16. A Group Therapist with Parkinson's Disease Facilitating Parkinson's-Related Support Groups: Reflections and Practical Strategies.

Authors: Paparella, Leon R.

Publication Date: Jul ,2023

Journal: International Journal of Group Psychotherapy 73(3), pp. 226–237

Abstract: This report describes the experience of a therapist living with Parkinson's disease who conducts two types of support groups within the Parkinson's community: a long-term patient support group and a care-partner support group. The psychosocial dynamics and therapeutic factors of the two groups are compared and contrasted, including how the therapist-member relationship differs in the two groups. Countertransference issues and how to handle these therapeutically are also described.

Access or request full text: <https://libkey.io/10.1080/00207284.2023.2204121>

17. The role of support groups in the management of Parkinson's disease in Kenya: Sociality, information and legitimacy.

Authors: Fothergill-Misbah, Natasha;Moffatt, Suzanne;Mwithiga, Hellen;Hampshire, Kate and Walker, Richard

Publication Date: 2022

Journal: Global Public Health 17(8), pp. 1773–1783

Abstract: Parkinson's disease (PD) is the second most common neurodegenerative disease globally. It is a progressive neurological disorder which can lead to a decline in wellbeing and quality of life for people living with PD (PwP) and their families/caregivers. However, little is known about the experience of PwP in low- and middle-income countries. In high-income countries, the benefits of support groups in providing social support, preventing social isolation and normalising the PD experience have been established. As part of a wider ethnographic study over 10 months, we explored the role of support groups in the management of PD in Kenya, sub-Saharan Africa. Fifty-five PwP and 23 informal family caregivers took part, and observations took place over ten support group meetings. Both positives and drawbacks were identified. The groups played a role in filling in gaps in information and services that the healing landscape in Kenya was unable to provide, while



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acting as an important source of care and support for PwP and caregivers, enabling 'sociality' and legitimacy. Drawbacks included limited reach and accessibility, 'social comparisons', and seeing the severity of progressed PD in others. Findings suggest PD support groups could become important components within resource-constrained healthcare settings.

Access or request full text: <https://libkey.io/10.1080/17441692.2021.1954227>

18. Stress-related vulnerability and usefulness of healthcare education in Parkinson's disease: The perception of a group of family caregivers, a cross-sectional study.

Authors: Di Stasio, Enrico;Di Simone, Emanuele;Galetti, Arianna;Donati, Daniele;Guidotti, Chiara;Tartaglino, Daniela;Chiarini, Massimiliano;Marano, Massimo;Di Muzio, Marco and Cianfrocca, Claudia

Publication Date: 2020

Journal: Applied Nursing Research 51, pp. 151186

Abstract: Parkinson's Disease is associated with a high assistive complexity, thus generating in caregivers a burden proportional to the intensity of the care provided. This study aims to evaluate whether the stress-related level of caregivers is related to their perception of the need for healthcare education. A cross-sectional study was conducted on 69 family caregivers that completed the Stress-related Vulnerability Scale (SVS scale) with a tool of proposed interventions stratified according to caregivers' need as "nothing", "somewhat", "moderately" and "extremely". A direct association between the SVS scale and the perception of the usefulness of interventions was detected, and significant differences were observed for "Caregivers tele-support group" and "Peer-led support group" interventions, thus suggesting an important role for caregivers' emotional status in considering of training courses. Caregivers are split between low vulnerability, with minimal perception of training need, and high burden state with the acute necessity of support to manage patients. Copyright © 2019 Elsevier Inc. All rights reserved.

Access or request full text: <https://libkey.io/10.1016/j.apnr.2019.151186>

19. Virtual Parkinson's Disease Support Groups in the COVID-19 Era: Social Connection in the Time of Social Distancing.

Authors: Subramanian, Indu

Publication Date: Aug ,2020

Journal: Movement Disorders Clinical Practice 7(6), pp. 739–740

Access or request full text: <https://libkey.io/10.1002/mdc3.12994>

20. A randomized trial of individual versus group-format exercise and self-management in individuals with Parkinson's disease and comorbid depression.



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Authors: Sajatovic, Martha;Ridgel, Angela L.;Walter, Ellen M.;Tatsuoka, Curtis M.;Colon-Zimmermann, Kari;Ramsey, Riane K.;Welter, Elisabeth;Gunzler, Steven A.;Whitney, Christina M. and Walter, Benjamin L.

Publication Date: 2017

Journal: Patient Preference & Adherence 11, pp. 965–973

Abstract: BACKGROUND: Depression is common in people with Parkinson's disease (PD), and exercise is known to improve depression and PD. However, lack of motivation and low self-efficacy can make exercise difficult for people with PD and comorbid depression (PD-Dep). A combined group exercise and chronic disease self-management (CDSM) program may improve the likelihood that individuals will engage in exercise and will show a reduction in depression symptoms. The purpose of this study was to compare changes in depression in PD-Dep between individual versus group exercise plus CDSM and to examine participant adherence and perception of the interventions. **METHODS:** Participants (N=30) were randomized to either Enhanced EXerCisE thErapy for PD (EXCEED; group CDSM and exercise) or self-guided CDSM plus exercise. Outcomes were change in depression assessed with the Montgomery-Asberg Depression Rating Scale (MADRS), cognition, apathy, anxiety, sleep, quality of life, motor function, self-efficacy, and patient satisfaction. **RESULTS:** Both groups showed significant improvement in MADRS (P: Both groups showed significant improvement in MADRS (**CONCLUSION:** Both group CDSM plus exercise and self-guided CDSM plus exercise can improve depression in PD-Dep. These findings suggest that development of a remotely delivered group-based CDSM format plus manualized exercise program could be useful for this population.

Access or request full text: <https://libkey.io/10.2147/PPA.S135551>

21. Evaluation of quality of life and psychological aspects of Parkinson's disease patients who participate in a support group.

Authors: Artigas, Nathalie Ribeiro;Striebel, Vera Lucia Widniczck;Hilbig, Arlete and Rieder, Carlos Roberto de Mello

Publication Date: 2015

Journal: Dementia & Neuropsychologia 9(3), pp. 295–300

Abstract: Parkinson's disease (PD) is a neurodegenerative disorder that can dramatically impair patient quality of life (QoL). **OBJECTIVE:** To analyze the QoL, motor capacity, depression, anxiety and social phobia of individuals who attended a patient support group (PSG) compared to non-participants. **METHODS:** A cross-sectional study was performed. The sample consisted of 20 individuals with PD who attended a PSG and another 20 PD patients who did not attend a support group for PD patients, serving as the control group (nPSG). All patients answered questionnaires on motor capacity (UPDRS), QoL (Parkinson's Disease Questionnaire- PDQ-39), depression (Beck Depression Inventory), anxiety (Beck Anxiety Inventory) and social phobia (Liebowitz Social Anxiety Scale). To determine data distribution, the Shapiro-Wilk test was performed. For comparison of means, Student's t-test was applied. In cases of asymmetry, the Mann-Whitney test was employed. To assess the association between the scales, Pearson's correlation coefficient (symmetric distribution) and Spearman's coefficient (asymmetric distribution) were applied. For the association





between qualitative variables, Pearson's Chi-squared test was performed. A significance level of 5% (p: A cross-sectional study was performed. The sample consisted of 20 individuals with PD who attended a PSG and another 20 PD patients who did not attend a support group for PD patients, serving as the control group (nPSG). All patients answered questionnaires on motor capacity (UPDRS), QoL (Parkinson's Disease Questionnaire- PDQ-39), depression (Beck Depression Inventory), anxiety (Beck Anxiety Inventory) and social phobia (Liebowitz Social Anxiety Scale). To determine data distribution, the Shapiro-Wilk test was performed. For comparison of means, Student's t-test was applied. In cases of asymmetry, the Mann-Whitney test was employed. To assess the association between the scales, Pearson's correlation coefficient (symmetric distribution) and Spearman's coefficient (asymmetric distribution) were applied. For the association between qualitative variables, Pearson's Chi-squared test was performed. A significance level of 5% (pRESULTS: Individuals in the PSG had a significantly better QoL (p=0.002), and lower depression (p=0.026), anxiety (p: Individuals in the PSG had a significantly better QoL (p=0.002), and lower depression (p=0.026), anxiety (pCONCLUSION: The participation of PD patients in social activities such as support groups is associated with better QoL and fewer symptoms of depression, anxiety and social phobia.

Access or request full text: <https://libkey.io/10.1590/1980-57642015DN93000013>

22. Caregiver tele-support group for Parkinson's disease: A pilot study.

Authors: Shah, Shital P.; Glenn, Gretchen L.; Hummel, Eileen M.; Hamilton, Jane M.; Martine, Rebecca R.; Duda, John E. and Wilkinson, Jayne R.

Publication Date: 2015

Journal: Geriatric Nursing 36(3), pp. 207–211

Abstract: BACKGROUND: Parkinson's disease (PD) is a disabling neurodegenerative disease that typically affects the geriatric population and requires a caregiver. Although caregiver burden reduces quality of life of the caregiver, support groups for caregivers have not been studied. Offering a tele-support group to PD caregivers would be an innovative approach to extending a novel resource. **METHODS:** A single-center pilot study was conducted, enrolling caregivers in an 8-week tele-support group program. Mood state and caregiver burden were assessed at baseline and conclusion of the program using self-report questionnaires. Qualitative feedback was obtained at the conclusion of the program. **RESULTS:** Seven female spouse caregivers enrolled; 86% completed the program. Although no statistically significant changes in questionnaire scores were found, the mean Geriatric Depression Scale decreased from 4.2 to 3 and qualitative feedback was universally positive. **CONCLUSIONS:** The use of tele-support groups for PD caregivers is a feasible and innovative resource to address caregiver burden. Copyright Published by Elsevier Inc.

Access or request full text: <https://libkey.io/10.1016/j.gerinurse.2015.02.002>

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DATABASES AND INFORMATION SOURCES USED				
	Pubmed		HMIC	BMJ Best Practice
X	Medline		Social Policy and Practice	Cochrane Library
	Emcare	X	CINAHL	TRIP
	Embase		PsycINFO	Grey Literature
	AMED		UpToDate	X Other – Knowledge Hub

PURPOSE OF SEARCH			
X	Patient info/health & well being	X	Clinical decision making (inc. patient care)
	Executive Team support		Research/Education/Professional development
	Quality Improvement		Primary Care & Neighbourhoods Directorate support
	KM/Management decision making		Other

USER CATEGORY OF REQUESTOR			
	Medical students		Patients/public
	Nursing/midwifery students		Physician Associates
	Doctor/Psychiatrist		Public Health (Somerset CC)
	Nurses/Midwives		Other
X	Allied Health professionals		

HAS PERMISSION TO SHARE THE RESULTS BEEN OBTAINED FROM THE REQUESTOR?			
X	YES - share		NO – do not share





KEY WORDS/SEARCH STRATEGY INCLUDING MESH HEADINGS	LIMITS USED
Parkinson* Early and (intervention* or therap* or rehabilitation or treatment*) Group* and (Self help or self management or support)	Last 10 years

