



## KNOWLEDGE ATTITUDE PRACTICE ABOUT PARKINSONISM IN MY COMMUNITY

### Neurology

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### ABSTRACT

Parkinson's disease is a progressive neurodegenerative disorder. Parkinson's disease is associated with a wide range of symptoms, however people with this condition mostly will experience a common set of symptoms. Cross-sectional study, conducted in Chennai. After IEC approval the general publics were invited to take part in our study. Informed consent was obtained. This study clearly indicates lack of knowledge about Parkinsonism and its importance in community. This study clearly indicates the lack of awareness of Parkinson's disease and its symptoms. The community should be thought on this as it could help us to identify the early onset of Parkinson's disease.

### KEYWORDS

#### INTRODUCTION

Parkinson's disease is a progressive neurodegenerative disorder with an estimated prevalence of 0.3 percent in the U.S. population. The prevalence increases to 4 to 5 percent in those older than 85 years. Parkinson's disease is a type of **movement disorder** that can affect the ability to perform common, daily activities. Parkinson's disease is associated with a wide range of symptoms, however people with this condition mostly will experience a common set of symptoms. These symptoms are typically divided into **motor symptoms** and **non-motor symptoms**. The most common motor symptoms of Parkinson's disease are **tremor**, stiffness or **rigidity** of the muscles, and slowness of movement. A person with Parkinson's disease may also have trouble with posture, balance, coordination, and walking. Common non-motor symptoms of Parkinson's disease include sleep problems, constipation, anxiety, depression, and fatigue, among others.

#### METHODS

**Type of study**- cross-sectional study, conducted in Chennai

**Duration**- The data pooled from the study was conducted from January 3<sup>rd</sup> 2019 to March 31<sup>st</sup> 2019 for a period of 3 months

**Sample size**- 200

**Inclusion criteria**- study participant above 18 years of age

**Exclusion criteria**- all study participants below 18 years were

excluded

**Sampling method**- simple random sampling

#### Data collection technique-

A total of 100 patients were included in the study. A special book was maintained to collect the data from the patients. All the patients were questioned or assessed by the principle investigator. Institutional Ethical clearance was obtained. Informed verbal consent was obtained from the patient.

#### METHOD:

After IEC approval the general publics were invited to take part in our study. Informed consent was obtained. The procedure consists of answering a set of question asked by the investigator in English or their native language. The study participants were thought of the symptoms of Parkinsonism and its importance.

#### RESULTS:

In this study, the total number of male population under study was 92 and the total number of female population under study was 108. Hence the male: female ratio was calculated and found to be 0.718:1. Table 1 represents the responses of various questions collected from the study population and its significance. P-value <0.05 is significant. **From** table 1 it clearly indicates only question number 6 and 8 are significant association with knowledge of Parkinsonism

**Table 1 represents the responses of various questions collected from the study population and its significance.**

QUESTION NO	POPULATION - 200	YES	NO	Significance (P-value)
1. Do you heard about the term Parkinsonism?	MALE 92	68 (73.91%)	24 (26.08%)	0.97
	FEMALE 108	80 (74.07%)	28 (25.92%)	
2. If yes, do you know anything about Parkinsonism?	MALE 92	65 (70.65%)	27 (29.35%)	0.806
	FEMALE 108	78 (72.22%)	30 (27.78%)	
3. Do you know the symptoms of Parkinsonism?	MALE 92	52 (56.5%)	40 (43.5%)	0.796
	FEMALE 108	63 (58.33%)	45 (41.77%)	
4. Do parkinsonism patient get slower in their usual daily activities?	MALE 92	80 (86.95%)	12 (13.05%)	0.393
	FEMALE 108	98 (90.7%)	10 (9.3%)	

5. Do parkinsonism patient handwriting be smaller?	MALE 92 FEMALE 108	89 (96.7%) 101 (93.5%)	3 (3.3%) 7 (6.5%)	0.297
6. Do parkinsonism patient speech becomes slurred or softer?	MALE 92 FEMALE 108	72 (78.26%) 96 (88.88%)	20 (21.74%) 12 (11.12%)	0.041
7 Do parkinsonism patient have trouble in arising from chair?	MALE 92 FEMALE 108	60 (65.21%) 82 (75.9%)	32 (34.79%) 26 (24.1%)	0.096
8. Do parkinsonism patient lips, hands, arms and/or legs shake?	MALE 92 FEMALE 108	58 (63.04%) 85 (78.70%)	34 (36.96%) 23 (21.30%)	0.014
9. Do parkinsonism patient have more stiffness?	MALE 92 FEMALE 108	52 (56.52%) 68 (62.96%)	40 (43.48%) 40 (37.04%)	0.354
10 Do parkinsonism patient have trouble in buttoning buttons or dressing?	MALE 92 FEMALE 108	42 (45.65%) 55 (50.92%)	50 (54.35%) 53 (49.08%)	0.457
11. Do parkinsonism patient shuffle their feet and/or taken smaller steps when they walk?	MALE 92 FEMALE 108	15 (16.30%) 18 (16.67%)	77 (83.70%) 90 (83.33%)	0.945
12. Do parkinsonism patient feet seem to get stuck to the floor when walking or turning?	MALE 92 FEMALE 108	25 (27.17%) 29 (26.85%)	67 (72.83%) 79 (73.15%)	0.959
13. Do parkinsonism patient Have noted that you don't swing one arm when they are walking?	MALE 92 FEMALE 108	11 (11.95%) 17 (15.74%)	81 (88.05%) 91 (84.26%)	0.442
14. Do parkinsonism patient have more trouble with their balance?	MALE 92 FEMALE 108	8 (8.6%) 13 (12.03%)	84 (91.3%) 95 (87.97%)	0.442
15. Do parkinsonism patient Have noted that they stop or have abnormal Posture?	MALE 92 FEMALE 108	6 (6.52%) 11 (10.18%)	86 (93.48%) 97 (89.82%)	0.354

(P-value <0.05 is significant)

## DISCUSSION

PD is a neurodegenerative disease. There is a loss of neurons (nerve cells) in certain areas of the brain, including a region called the substantia nigra (sub-STAN-she-uh NYE-gruh), Latin for "black substance." The neurons in this region (which appear dark under a microscope) produce a neurotransmitter (a chemical messenger that allows neurons to communicate) called dopamine. Dopamine helps to regulate movement. As the number of cells in the substantia nigra decreases, there is less dopamine available in the brain. Dopamine is important to maintain normal movement patterns. This loss of dopamine is the reason that many treatments for PD are intended to increase dopamine levels in the brain.

In addition to decreases in dopamine and the cells that make dopamine, you might also read or hear about a protein called **alpha-synuclein**. Studies suggest that alpha-synuclein normally helps neurons communicate with each other. In PD, the protein clumps up in microscopic aggregates called **Lewy bodies**.

This study clearly indicates lack of knowledge about Parkinsonism

and its importance in community. As the incidence of parkinsonism is high in person aged above 70, early detection and treatment will prevent it from further complications of Parkinson's disease. The common symptoms which should be thought to the population are **Motor and Related Symptoms of PD Tremor, Rigidity, Bradykinesia, Postural Instability, Walking or Gait Difficulties and Vocal Symptom. Non-Motor Symptoms of PD Disturbances in the Sense of Smell, Sleep Problems, Depression and Anxiety, Fatigue, Mental Processes, Weight Loss, Gastrointestinal Issues, Lightheadedness, Urinary frequency and urinary urgency, Sexual Concerns, Excessive Sweating and increased risk Melanoma.** DIAGNOSIS of parkinsons disease is based on medical history, blood pressure while you sit and stand, Examine your facial expression, Look for tremor, Examine whether there is stiffness, Determine whether you can get up easily from a chair, especially without using your arms, Examine your walking pattern and Assess your balance as you stand. imaging modalities of Parkinson's disease **magnetic resonance imaging (MRI)**, which examines the structure of the brain, **DaTscan**, an imaging test that measures dopamine function in the brain, **functional MRI (fMRI)** and **positron emission tomography (PET)**, which can measure certain brain functions.

**CONCLUSION:**

This study clearly indicates the lack of awareness of Parkinson's disease and its symptoms. the community should be thought on this as it could help us to identify the early onset of Parkinson's disease. this should also be thought to school children's because they are the ones who spend a lot of time with elders, this will help to identify the early stages of parkinsonism and hence will prevent increase in incidence and prevalence of Parkinson's disease.

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