

Medicine Today CPD Journal Program

Questions

Please note you must answer these questions online (www.medicinetoday.com.au/cpd) to take part in this activity; we will not mark any answers that are posted, faxed or emailed to Medicine Today.

January 2015 issue, Module 1

The clinical challenge of early Parkinson's disease

The questions in this module are based around the article 'The clinical challenge of early Parkinson's disease' (Medicine Today 2015; 16(1): 12-18), which should be read before attempting the module.

Learning objectives: The clinical challenge of early Parkinson's disease

- Recognise the signs and symptoms of early Parkinson's disease (PD)
- Identify appropriate investigations for patients with suspected PD
- Outline the management of patients with PD
- Describe the advice to give to patients on side effects of medication and its effect on PD progression
- Propose ways your practice can assist patients with advance care planning

Case study 1. Barrie is a 56-year-old social worker who has come to see you because his wife is concerned about his behaviour when asleep. Over the past few years, he has become very restless at night and recently jumped out of bed and violently attacked the wardrobe, which he says he dreamt was a burglar. You suspect rapid eye movement (REM) sleep behaviour disorder, which can be associated with early Parkinson's disease (PD) or related disorders.

You enquire about other symptoms of PD and examine Barrie.

Question 1. What are the three archetypal symptoms of PD?

- Bradykinesia
- Cogwheel rigidity
- Resting tremor
- Nystagmus

Question 2. List at least two potential nonmotor symptoms of early PD, apart from REM sleep behaviour disorder.

Barrie does not have any other obvious symptoms or signs of PD and you consider investigations to diagnose PD.

Question 3. Which one of the following investigations can be used in routine practice to diagnose PD?

- Brain CT scan
- Brain MRI scan
- Brain PET scan
- None of the above

Your refer Barrie to a neurologist for further assessment and continue to monitor him for PD symptoms when he visits you for other reasons. Over the next year, Barrie develops a tremor. You refer him back to the neurologist and consider the differential diagnosis.

Question 4. Which three of the following conditions are differential diagnoses of PD?

- Progressive supranuclear palsy
- Lewy body dementia
- Motor neurone disease
- Corticobasal degeneration

The neurologist considers that PD is the most likely diagnosis and prescribes treatment.

Question 5. What is the goal of treatment of patients with PD? Choose the single best answer.

- Cure
- Delay death
- Reduce symptoms
- Delay the onset of further symptoms

Question 6. Which one of the following treatments is the most effective for patients with early PD?

- Levodopa
- Pramipexole
- Rasagiline
- Surgery

Barrie begins taking a dopamine agonist once daily. He asks you about the potential side effects.

Question 7. Which two of the following are major side effects that patients should be warned about when taking dopamine agonists as treatment for PD?

- a. Anorgasmia
- b. Hypertension
- c. Impulse control disorders
- d. Sedation

Barrie is also concerned that taking medication early in PD will accelerate the progression of the disease.

Question 8. List at least two facts about the effect of medication on the progression of PD that you can tell patients such as Barrie.

Question 9. List at least three nonmedication treatments or supports you might recommend for patients with PD such as Barrie.

Question 10. In patients with PD such as Barrie, advance care planning will be appropriate at some stage in the course of the illness. How can you assist this planning? Select as many answers as you think appropriate.

- a. By raising the topic during a consultation
- b. By providing pro formas to guide the decisions required
- c. By mentioning the existence of an advance care plan in all care plans and referral letters
- d. Other – please write the strategies you use in the box below