## Physical Activity and Parkinson's Disease

### **Get Active and Stay Active!**



- People with Parkinson's who exercise fare better over time than those who are not active.
- Physical activity should be initiated early in the diagnosis and be a life-long commitment.
- Engaging in aerobic activity, along with other activities for strength, flexibility and balance, improves Parkinson's symptoms and sense of well-being.

#### Why Aerobic Activities?

- Aerobic activities make the body's large muscles move in a rhythmic manner for a sustained period of time.
- Aerobic activities improve physical fitness, including strength and endurance.
- Aerobic activities have a positive effect on slowness and stiffness, as well as mood, and quality of life.

**Examples:** brisk walking, swimming, cycling, dancing, water aerobics, skating, hiking, treadmill or elliptical, Wii

#### Why Flexibility Activities?

- Flexibility or stretching exercises improve mobility, increase range of motion, and reduce stiffness.
- Improving range of motion affects posture and walking ability making everyday activities easier.

Examples: Tai Chi, stretching

#### Why Strengthening Activities?

- Strengthening activities improve muscle strength, walking speed, posture and overall physical fitness.
- Improving strength will help everyday activities, such as getting up from a chair, easier to manage.

**Examples:** yard work or gardening, weights/resistance (free weights, elastic bands, body weight)

#### **Why Balance Activities?**

- Balance activities improve posture and stability.
- Better balance reduces the fear of falling and helps in performing daily tasks.
  Examples: Yoga, hiking, Wii

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#### **Get Started**

- Consult your doctor before starting an exercise program, especially if you have other health issues or are over 60.
- ✓ Work with a physical therapist/physiotherapist to develop a specific program that meets your needs. A physiotherapist can ensure you are performing activities safely and that they are right for you.
- ✓ Choose a variety of activities to reduce boredom.
- ✓ Have fun! Choosing activities you like will help you stay with a program.

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# Chart Your Progress

Make physical activity part of your daily routine to manage your Parkinson's symptoms. Fatigue and lack of motivation are two symptoms that can make it challenging to stay active. The following chart can help you track your progress.

Month	Note activity and duration for each day.
DAY	
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#### **Tips**

- Take your Parkinson medications on time for maximum mobility.
- ✓ Take 3-5 minutes to warm up at the beginning and cool down as you finish.
- Exercise in a way that is safe for you (e.g., when doing balance exercises you may need a stable support nearby).
- Concentrate on doing the exercises correctly.
- Start with shorter periods of exercise and gradually increase. Greater intensity equals greater benefits.
- Monitor fatigue both during and after activities. At the end, you should feel tired, but not exhausted.
- ✓ Drink water to stay hydrated.
- ✓ Join a group or find an "exercise buddy".

Canadian Physical Activity Guidelines recommend that adults (18-64 years and 65 years and older) do at least 150 minutes of moderate-to vigorous aerobic activity per week; and muscle and bone strengthening activities at least twice per week. www.csep.ca/quidelines.

#### References:

- 1. Canadian Society for Exercise Physiology. Canadian Physical Activity Guidelines, Glossary of terms. www.csep.ca/guidelines.
- 2. Parkinson's Disease: Fitness Counts. National Parkinson Foundation. Accessed from: www.parkinson.org.
- 3. Exercises for People with Parkinson's. Parkinson Society Canada. www.parkinson.ca.
- 4. Goodwin VA, et al. The Effectiveness of Exercise Interventions for People with Parkinson's Disease: a systematic review and meta-analysis. *Movement Disorders*. 2008;23(5):631-640.
- 5. Goodwin VA, Richards SH, Henley W et al. An exercise intervention to prevent falls in people with Parkinson's disease: a pragmatic randomized controlled trial. *Journal of Neurology, Neurosurgery, and Psychiatry with practical neurology*. 2011;82:1232-8.

This resource was developed with input from physiotherapists at Canadian Movement Disorder Clinics and reviewed by the Canadian Physiotherapy Association.

To obtain blank charts, visit www.parkinson.ca



