



Mental health disorders and Parkinson's disease

Mental health disorders can happen for several different reasons if you are living with Parkinson's disease. You may experience issues because of the changes in your brain caused directly by Parkinson's, or due to the emotional stress of dealing with your diagnosis. Symptoms can range from depression and anxiety to memory problems and hallucinations. Speak to your doctor if you can because there may be treatments that can help. There are also lots of things you can do yourself that can improve your mental health. Find out more about the effects of Parkinson's disease on your mental health and what help is available.

Table of Content

Depression, anxiety and apathy in Parkinson's	2
How do I know if I have depression and anxiety?	2
What can I do to help my anxiety and depression?	3
What is apathy and how is it different from depression?	4
Memory problems in Parkinson's	4
What can I do to improve my memory?	5
Other mental health problems you may experience with Parkinson's	5
Hallucinations and delusions in Parkinson's disease	5
Impulse control problems in Parkinson's	6
Disturbed sleep in Parkinson's	7



Depression, anxiety and apathy in Parkinson's

In the [early stages](#) of Parkinson's disease, depression, anxiety and apathy are the most common mental health symptoms. For a variety of reasons, you may be more prone to depression if you're under 50 years of age and have been diagnosed with [young onset Parkinson's disease](#).

Parkinson's itself may be a direct cause. People with Parkinson's don't have enough of the brain chemical called dopamine and lack of dopamine can be a trigger for depression, and anxiety apathy.

The emotional effects of Parkinson's also cause depression and anxiety. Learning you have Parkinson's and [living with](#) the condition can sometimes be very upsetting and stressful. You may feel lonely and isolated because you can't do activities you used to enjoy. Or because other people may not understand the condition and believe in all sorts of [myths and misconceptions](#).

How do I know if I have depression and anxiety?

If you're depressed, you may experience a range of symptoms, such as:

- ★ feeling hopeless nearly every day
- ★ feelings of guilt
- ★ not getting pleasure from things that used to make you happy
- ★ feeling teary
- ★ irritability and being snappy with other people
- ★ sleep problems
- ★ difficulty getting up in the morning and feeling sluggish, which improves as the day goes on



Anxiety is connected to depression but may feel different. For example, you may:

- ★ feel tense and unable to relax
- ★ find it difficult to concentrate
- ★ have uncontrolled feelings of worry

These emotional symptoms can also impact on your physical health and your lifestyle. For example, you may lose your appetite. Some people with anxiety experience panic attacks and may isolate themselves. Your sleep may also be interrupted.

Some symptoms of depression and anxiety, such as fatigue, overlap with symptoms in Parkinson's, which can make diagnosing mental health conditions difficult.

What can I do to help my anxiety and depression?

Feeling depressed and anxious can worsen your other Parkinson's symptoms. But with the right help and support you can feel better.

It's important to speak to a healthcare professional if you're able to. There are treatments (antidepressants, cognitive behavioural therapy and counselling) for depression and anxiety.

However, if you can't access these treatments, simple lifestyle changes can really help. These include:

- ★ regular [exercise](#)
- ★ improving the quality of your sleep
- ★ [eating](#) healthily
- ★ relaxation techniques, such as meditation



- ★ talking to people who understand Parkinson's, who can help you unburden your stress and worries

If your Parkinson's medication has helped you feel better, but you've been on it for a while, it can start to work less effectively and can trigger feelings of depression and anxiety. If this has happened, talk to your doctor.

What is apathy and how is it different from depression?

Apathy, or a lack of motivation and emotion, is not the same as depression, but they are both symptoms of Parkinson's. People with apathy feel completely flat, as if they have no mood at all, and are less likely to do the things that can help them manage their symptoms. If this sounds familiar to you, simple changes like setting daily goals and sticking to routines can help you, and again it's important to see your doctor for advice.

Memory problems in Parkinson's

Mild memory problems and difficulties with thinking are common in people with Parkinson's. They can affect you at any stage of the disease.

Because Parkinson's affects the brain, memory and thinking problems may be a direct result of the condition. It's also possible that sleep problems, depression or poor diet make your memory problems worse.

You may notice that you struggle with activities such as planning, doing things in a particular order, or doing more than one task at a time. It can leave you feeling disorganised, confused or stressed.



If Parkinson's is slowing down your thinking, you may take longer to make decisions or respond to people asking you questions. It can also affect your ability to concentrate and focus your attention.

What can I do to improve my memory?

If you can, speak to a doctor about any memory or thinking problems. There are medications or support therapies, such as occupational therapy, that can help you. Again, these might not be available to you, but you can try these self-help tips:

- ★ Stick to a daily routine.
- ★ Keep important items such as keys and glasses in set places.
- ★ Use reminders on your mobile phone or put lists around your home to remind you to do things, such as taking your medication.
- ★ Ask a partner or loved one to help you keep organised in whatever way that works. Don't be embarrassed to ask. They will want to make your life as easy as possible for you.

Other mental health problems you may experience with Parkinson's

Hallucinations and delusions in Parkinson's disease

Hallucinations are when you see, hear, feel, taste or smell something that isn't there – and they can be a frightening experience.




Many people with Parkinson's experience mild hallucinations in the early stages of the disease. These can then become more severe in the later stages of the disease and sometimes lead to delusions. Delusions are strongly held thoughts or beliefs that aren't based on evidence, such as conspiracy theories.

Hallucinations and delusions may also be a side effect of Parkinson's medication. And visual hallucinations can be caused by eye problems, which are more common for people with Parkinson's.

Always talk to your healthcare professional if you're experiencing hallucinations or delusions. Talking to your partner or someone you trust is also a good idea, as they can help you keep a check on what's real and not.

Hallucinations and memory loss are also symptoms of a condition called dementia with Lewy bodies (DLB), also known as Lewy body dementia, which is a common type of dementia. This needs different treatment to Parkinson's and some Parkinson's treatments can make it worse, so it's important that your doctor rules it out.

Impulse control problems in Parkinson's

Some Parkinson's drugs can have the side effect of causing  impulsive behaviour. This means you might not be able to resist the temptation to do something that's instantly pleasurable but may be harmful.

For example, some people may become addicted to gambling or become hypersexual, where sexual impulses become more intense.

The most likely drugs to do this are dopamine agonist medications (DAs). Levodopa is not a DA so is less likely to cause these problems.



Not everyone will be affected so don't be put off taking DAs. If you do find you have impulse problems, talk to your doctor about your medication.

Disturbed sleep in Parkinson's

Sleep problems can be caused by physical symptoms or Parkinson's medications. But depression and anxiety can also cause poor sleep which in turn can make mental health worse.

It's important then to look after your sleep. You can do this by:

- ★ Avoiding tobacco, alcohol and caffeine just before bedtime. You should also avoid recreational drugs such as.
- ★ Winding down in the evening – don't do intensive exercise or stressful activities that can stop you feeling sleepy.
- ★ Having a routine – going to sleep and waking up at the same time each day.
- ★ Keeping where you sleep as quiet, dark, calm and comfortable as you can. Limit napping in the afternoon, so you sleep better during the night.

Sources (all accessed June 2022):

- Chahine L, Tarsy D. 2022. Management of nonmotor symptoms in Parkinson disease. UpToDate. <https://www.uptodate.com/contents/management-of-nonmotor-symptoms-in-parkinson-disease>
- Mehanna R, Jankovic J. 2019. Young-onset Parkinson's disease: Its unique features and their impact on quality of life. *Parkinsonism Relat Disord* 65:39–48. See PDF
- MIND 2020: Sleep and mental health - Mind
- Parkinson's Foundation nd: Apathy. Apathy | Parkinson's Foundation
- Parkinson's UK. 2019a. Anxiety and Parkinson's. <https://www.parkinsons.org.uk/sites/default/files/2019-10/Anxiety%20and%20Parkinson%27s%20WEB.pdf>



- Parkinson's UK. 2019b. Mild memory and thinking problems in Parkinson's. <https://www.parkinsons.org.uk/sites/default/files/2019-11/2019%20FS95%20Mild%20memory%20problems%20FINAL.pdf>
- Parkinson's UK 2019c: Impulsive and compulsive behaviours in Parkinson's | Parkinson's UK (parkinsons.org.uk)
- Parkinson's UK. 2019d. Sleep and mental health. Sleep and mental health | Parkinson's UK (parkinsons.org.uk)
- Parkinson's UK. 2019e. Sleep and night-time problems in Parkinson's. <https://www.parkinsons.org.uk/sites/default/files/2019-05/Sleep%20and%20night-time%20problems%20in%20Parkinson%27s%20V2.pdf>
- Parkinson's UK. 2020. Hallucinations and delusions in Parkinson's. https://www.parkinsons.org.uk/sites/default/files/2020-06/FS11_Hallucinations%20and%20delusions_WEB_2020.pdf
- Parkinson's UK. 2021. Depression and Parkinson's. https://www.parkinsons.org.uk/sites/default/files/2021-01/INFOS0006_Depression%20and%20Parkinson%27s_V1_2021_FINAL_WEB.pdf
- Parkinson's UK nd: Parkinson's and mental health. Parkinson's and mental health | Parkinson's UK (parkinsons.org.uk)
- Pontone GM, Weiss HD. 2018. Mental Health and Parkinson's Disease. <https://practicalneurology.com/articles/2018-may/mental-health-and-parkinsons-disease>
- Weintraub D, Aarsland D. 2022. The neuropsychiatry of Parkinson's disease: advances and challenges. *Lancet Neurol.* 2022;21(1):89-102. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8800169/pdf/nihms-1769185.pdf>
- Parkinson's UK: <https://www.parkinsons.org.uk/information-and-support/your-magazine/tips/managing-apathy-friends-and-family>

Disclaimer

This article has been put together for informational and educational purposes only. It should not be interpreted to be a diagnosis, treatment or any other type of health care advice. The reader should seek their own medical or professional advice and must not rely on the information contained in this article as an alternative to medical advice from their doctors or other professional healthcare providers. Parkinson's Africa disclaims any responsibility and liability of any kind in connection with the reader's use of the information.