

PD patient admitted with hip fracture

PD patients fear hospitals, so...

On arrival, please take a moment to talk to the patient, or a family member, about their Parkinson's?

Key points

- it is dangerous to stop PD medications suddenly
 - ✓ please make sure they are given correctly
- NBM for theatre?
 - ✓ there is a protocol for this
 - ✓ can use topical patches or dispersible preparations
 - ✓ call the Movement disorder team for help
- pain relief is important, but...
 - ✓ opiates can cause hallucinations - use with caution
- drugs to avoid totally
 - ✓ metoclopramide, prochlorperazine, cyclizine
 - ✓ haloperidol

Did you know that many patients with PD can supervise their own drugs when in hospital?

Why not discuss this with them on admission?

Don't forget

- infections are common
- look for:
 - ✓ UTI
 - ✓ chest infection
- constipation is a big problem
 - ✓ check the stool chart and treat accordingly
- dysphagia and weight loss
 - ✓ low threshold for SALT and dietician referral ([click here](#))
- falls risk is very high
 - ✓ watch out for fractures
 - ✓ refer to physio & OT ([click here](#))
- cognitive impairment exists in over 50%
 - ✓ high risk of delirium
 - ✓ high mortality

Movement Disorder Team

Dr Neil Archibald (Consultant Neurologist)
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Last but not least

Unable to swallow?

Follow "NBM" protocol

Medication

- right drug?
- right dose?
- right time?

Contact the PD helpline

**(01642)
854319**