

I'M FREEZING...AND IT'S NOT EVEN COLD!

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PD is generally considered a movement disorder creating symptoms that affect your gait, balance and can cause slowness of movement and tremors. But as one who suffers from Parkinson's, I can tell you that those symptoms are only the "tip of the iceberg."

To the uninitiated, freezing might refer to the temperature, but if you have Parkinson's, "freezing," a temporary, involuntary inability to move, is a symptom where your feet feel as if they are stuck to the ground. Freezing seems to be directly related to how long you've had PD, and whether your primary symptoms began with the absence of tremor and gait problems. It is sometimes referred to as "start hesitation" or "gait initiation failure" and can occur when you begin walking, while walking, when turning, in doorways, upon entering a confined space, or even as a result of anxiety or panic. This condition can last anywhere from a few seconds to many minutes. What activates these brain reflexes is still unknown, although low dopamine levels seem to be related.

"Freezing" is a difficult symptom to treat but your neurologist may be able to alter your medications using Deprenyl; possibly adding a dopaminergic agonist such as Permax, Parlodel, Mirapex or Requip and/or adjusting your medication schedule to help control this problem.

Walking in general is more problematic for a person with Parkinson's because of the slowness, the diminished arm swing and the shuffle that comes from not raising your feet or toes high enough off the floor. The stooped posture affects your balance as your center of gravity shifts forward with the upper part of your body preceding the lower part as you walk. In order to catch up with your center of gravity and regain balance, the tendency to take increasingly faster, shorter and more frequent steps, known as "festination" occurs. "Propulsion" occurs when you try to run forward to catch up to avoid falling. "Retropulsion" takes place when you feel pulled or forced to run backwards to recover your balance. As you might imagine, falling becomes the biggest concern when your body continues moving and your feet stop.

Older bones tend to break easier, so it's important to keep them strong with weight bearing exercises and the proper diet. Stretching and range of motion exercises can also help combat muscular rigidity and keep your joints from becoming immobile.

Falls are not only dangerous to your physical health but your mental health as well. Fearful of falling again, many people stay close to home, abandoning exercise routines and social pursuits, but withdrawal from activities is the worst way to prevent another fall. (And anxiety also increases the tendency to freeze.) A fall to the floor doesn't need to be a fall into isolation or depression. If you've been hurt from a fall, it's important to get out even if you need to use a cane or a walker. Just pay careful attention to the threat of "freezing" or being off balance and don't make any reckless movements.

You need to think about every step you take. Walking is no longer an automatic function. Actions that were once routine become a challenge because your muscles aren't getting instructions from your brain to move and therefore don't respond to your need to move. It can be very frustrating when familiar tasks must be constantly relearned and given such disproportionate amounts of concentration; but attitude and exercise are vital to your well-being, so approach this challenge with spirit and determination and fight to keep as much

mobility as you possibly can. Don't become discouraged. Some days it's just easier to move than other days. Resolve to maintain a "can do" regarding attitude and a "will do" regarding exercise. If you *do* fall down, at least it proves you were on your feet and moving.

EXERCISES

Abracadabra...or a few tricks for better balance and some techniques to overcome freezing when your head won't tell your feet to take that first step.

For better balance: practice the ancient martial art of **Tai Chi** (pronounced tie-chee). Tai chi consists of more than 100 flowing, dance-like movements of "postures" or "forms" that resemble ballet in slow motion, performed while you concentrate single-mindedly on your movements and your breathing. The concentration required has been likened to "meditation with motion." Taken together, the forms are designed to work all of your limbs and muscles. Since it's a no-impact form of exercise, it's much better for bones and joints that can't withstand the jarring from high-impact activities. The continuous, smooth, gentle movements have been said to strengthen the motor skills impacted by PD. It is also particularly helpful in decreasing tremor because Tai Chi reduces stress and the muscles relax.

Dr. Timothy C. Hain, a neurologist and associate professor at Northwestern University Medical School, conducted a study examining the potential benefits of tai chi on some patients with Parkinson's. His results were overwhelmingly positive. Hain said, "We think it is possible that tai chi can not only restore balance but eventually make it better than normal." In addition to preventing falls, other benefits included increased strength (especially in the thighs, buttocks and calves) and flexibility (working a full range of motion without straining the joints or connective tissues) as well as better posture.

More suggestions for better balance:

- Stand with your hands on your hips, feet spread apart:
- Practice marching in place
- Practice raising your leg straight out behind you.
- Practice raising your leg out to the side.
- Practice drawing a circle with your leg.
- Stand with your hands at your side, feet spread apart:
- Lean forward and backwards.
- Lean to both sides.
- Lean in a circular motion and reverse the motion.

To help alleviate freezing:

- Start by maintaining an upright, tall stance, moving your body's center of gravity backward so it runs straight up and down through the spine, legs and ankles.
- Use your imagination. Dr. Dwight C. McGoon, a Mayo Clinic surgeon, pretends he has a rocking chair leg attached to each of his legs, and that a proper step requires that the back end of the rocker touch the floor on the forward step and the front end of the rocker touch the floor before the step is completed.

- Exaggerate your step. Imagine a point on the floor about two feet ahead. Make that first step as long a stride as possible because subsequent steps tend to shorten.
- Rock from side to side to initiate a marching in place step.
- March like a soldier with a stiff-legged, long-striding military gait.
- Swing your arms up above your head, then bring them down sharply to your side 2 or 3 times.
- Walk sideways
- Take a quick step backwards.
- Watch other people walk.
- If you hesitate walking through doors, focus on an object past the doorframe.
- Step over an imaginary object on the ground, or use a cane or another person's foot, tile or carpet patterns. Make a path at night with white socks on carpet or white tape on a hard floor.
- Alternate the distribution of your body weight.
- Have someone rhythmically pull or push or raise your knee.
- Stamp your feet
- A sudden sound such as a clap may break a freeze.
- Walk to music to increase speed of motion and improve rhythm.
- Make wider turns to decrease the chance of getting your feet entangled and falling.
- It helps to count each step. You're less likely to freeze if you know how many steps it takes to get from the bedroom to the bathroom.
- Avoid clutter. Keep floor areas free of shoes and other objects to reduce the risk of a fall.
- If you need a walker for balance, using one with wheels (with automatic locking mechanisms) will allow for a more normal walking pattern than standard ones. [Hint: if tremors make the walker unsteady, try weighting the lower bars by tying on socks filled with pennies.