

Parkinson's Disease or Not?

Parkinson's disease, especially in its early stages when the symptoms are mild, is not easy to diagnose. The non-specific, and easily overlooked signs of Parkinson's disease make it difficult to spot, and unlike many illnesses, there is no one laboratory test or radiological exam that will provide a definitive diagnosis of Parkinson's disease.

Patients exhibiting Parkinson's-like symptoms may undergo blood and urine tests, or CT or MRI scans to exclude other conditions, but none of these provide a diagnosis of Parkinson's disease. The best way to test for Parkinson's disease is to conduct a systemic neurological examination that includes tests to gauge a patient's reflexes, muscle strength, balance, coordination, gait, and overall movement. However, according to information presented on The Michael J. Fox Foundation for Parkinson's Research website, up to 25 percent of Parkinson's disease diagnoses are incorrect.

Why is there confusion about diagnosing Parkinson's disease? The simple answer is that the symptoms of Parkinson's disease are not clear cut, and therefore, it is easy to mistake them for other conditions, or to classify them as Parkinsonian when they are not.

Here is an overview of the top three conditions mistaken for Parkinson's disease:

- * Multiple system atrophy (Shy-Drager Syndrome). This is a rapidly progressing disease that first features autonomic nervous system insufficiencies (dizziness, lack of bladder control, impotence, etc), and then takes on Parkinson's disease-type symptoms, such as rigidity, bradykinesia, tremor, postural instability, and difficulty walking. Some neurological specialists have speculated Shy-Drager syndrome may be a form of Parkinson's disease rather than a separate condition, but for the time being, it remains its own entity.
- * Supranuclear palsy. This disorder results in rapid paralysis of eye movements, difficulty speaking, rigidity, and subtle mental shifts. Supranuclear palsy is a disorder of a different part of the brain than Parkinson's disease, and patients with this condition do not tend to respond to standard anti-parkinsonian drugs such as levodopa. The speed at which this disease progresses also sets it apart from Parkinson's disease.
- * Benign essential tremor (familial tremor) is a gradually progressing condition that presents as tremors in the hands and arms on both sides of a patient's body, and occasionally the head. Unlike Parkinson's, familial tremor does not affect the legs, and the two illnesses respond to different drugs.

Beyond those three, there are several other conditions that are confused with Parkinson's disease, including multiple sclerosis, amyotrophic lateral sclerosis (Lou Gehrig's disease), Striato-Nigral degeneration, normal pressure hydrocephalus, pseudobulbar palsy, Wilson's disease, Hallervorden Spatz disease, olivopontocerebellar degeneration, Huntington's disease, dystonia, and brain tumors.

With such a variety of illnesses sharing the same symptoms and characteristics, it's not surprising Parkinson's disease is often misdiagnosed. People who have mild symptoms, or who would like a second opinion, should ask their doctor about having the diagnosis confirmed by another physician. With early diagnosis as the key to maintaining longer-term independence and a high quality of life, it is important to have an accurate diagnosis so that appropriate treatment therapies can begin immediately.