



**information**  
FOR PEOPLE LIVING WITH PARKINSON'S

Information  
for people living with Parkinson's

# Nutrition and Parkinson's

If you have Parkinson's, making some simple changes to your eating and drinking habits may help you manage your symptoms effectively and should improve your general health and wellbeing.

This booklet provides some basic healthy eating information, to help you maintain a balanced diet and a healthy weight. It also looks at the diet issues related to Parkinson's and what you can do to manage these.

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[www.parkinsonswa.org.au](http://www.parkinsonswa.org.au)

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Balance  
Variety  
Portion  
Control

# Eating a Balanced Diet

## What should I eat?

If you have Parkinson's there is no specific diet that you should follow to the letter. But you should find it helpful to maintain as healthy a diet as you can.

Generally, the rules for following a healthy diet are:

- ❖ eat a varied diet
- ❖ eat healthy portions of foods
- ❖ eat the right balance of food groups
- ❖ eat regular meals
- ❖ drink plenty of fluid
- ❖ eat at least two serves of fruit and five serves of vegetables each day

Eating a balanced diet will improve your health and may help to ease various problems you may be experiencing, including constipation, low mood, reduced bone density and weight changes.

## Understanding the food groups

### Starchy (carbohydrate) foods

Try to base your main meals on starchy foods. These contain fibre, vitamins and minerals and will give you healthy calories. Examples of starchy foods are bread, potatoes, rice, pasta, noodles, chapattis (flatbread), yams, oats, cornmeal, and breakfast cereal.

A quarter to a third of your plate should be made up of starchy foods.

Eating wholegrain versions of starchy food, such as wholegrain bread, can keep you fuller for longer, ease constipation and are a better source of vitamins and minerals. Constipation is a common problem among people with Parkinson's. **See page 18** for more information.



## Dairy

Try to aim for three servings of milk or dairy foods, or alternatives, every day to get the calcium you need.

**A serving is:**

- ❖ a cup (250ml) of milk
- ❖ one small 200g pot of yoghurt
- ❖ 2 slices of cheese (40g)

If you're trying to keep your weight down, reduced fat cheese, milk and yoghurt and diet yoghurts are available.

If you don't like dairy, you may have soy, almond, oat or rice milk as a substitute. Check that these are calcium fortified.

Other non-dairy sources of calcium, include green leafy vegetables (for example spinach), tinned fish with soft bones (like sardines), pulses like baked beans and chickpeas, dried fruit, and nuts and seeds like tahini paste (used in hummus). However, there is much less calcium in these foods and it is poorly absorbed. You should not rely on these as your main source of calcium.

Having Parkinson's can make your bones more fragile and increase your risk of bone fractures if you fall. Vitamin D helps to keep your bones healthy and is needed to help your body absorb calcium. Most of the vitamin D you need comes from the effect of sunlight on your skin but what you eat can also help, especially during the winter.

## Good sources of vitamin D are:

- ❖ oily fish, such as salmon, tuna, sardines and mackerel
- ❖ eggs
- ❖ meat
- ❖ margarines and spreads

People with Parkinson's may have lower levels of vitamin D, which may be related to reduced bone density and an increased risk of fractures. So, it is important to get your levels tested by your GP. **See page 30** for more details on vitamins and minerals.

# Eating a Balanced Diet

## Protein: Meat, fish and vegetarian or vegan alternatives

Try to have two to three servings each day. These foods are the main source of protein in your diet and will help you maintain your muscles and strength.

Good sources include meat, fish, chicken, eggs, dried beans like baked beans, chick peas, borlotti beans, lentils, and nuts. Beef, lamb, eggs, beans, and pulses are also good sources of iron and zinc.

A healthy diet should contain two portions of fish a week. One portion a week should be 'oily'. Oily fish include canned salmon, sardines, mackerel, fresh salmon, and herring. If you don't eat fish, you can try including linseeds, soybeans, walnuts and their oils in your diet.

**One portion of each is:**

- ❖ 80g of meat or the size of a deck of cards
- ❖ 80 –110g of fish or the size of the palm of an average hand
- ❖ three heaped tablespoons of pulses (beans or lentils)
- ❖ two eggs
- ❖ two tablespoons of nuts

Red meat is a good source of protein, vitamins and minerals, but avoid eating too much red meat. Stick to one portion a day and eat a variety of other high protein foods such as chicken, fish, egg, dried beans and baked beans, lentils and nuts.





## Fruit and vegetables

Fruit and vegetables are an excellent source of vitamins, minerals, antioxidants and fibre. Try to have at least five serves of different coloured vegetables and two serves of fruit each day. These can be fresh, frozen, canned or dried.

One serve of vegetables is about half a cup of cooked vegetable or a cup of salad.

### Examples of vegetables and fruit serves:

- ❖ peas
- ❖ beans
- ❖ broccoli, cauliflower, brussel sprouts
- ❖ spinach, kale or asian vegetables

- ❖ pumpkin, zucchini, squash
- ❖ carrot, parsnip, swede
- ❖ eggplant, capsicum
- ❖ potato, onion, sweet potato
- ❖ an apple, a pear, a banana, orange or half a large piece of fruit
- ❖ two kiwi fruit or small mandarins
- ❖ two large tablespoons of fruit salad or stewed fruit
- ❖ one tablespoon of dried fruit
- ❖ one small glass of fruit juice

# Eating a Balanced Diet

## Fatty and sugary foods

Fatty and sugary foods, such as cakes, biscuits, and pastries, contain lots of calories, fat and sugar. Try to reduce how often you eat them, especially if you are trying to lose weight. If you have high cholesterol or are diabetic, please seek further advice from a dietitian.

## Fluid

It is very important to drink plenty of liquid. Try to drink six to eight cups or glasses each day. Any fluid counts towards this, including water, tea, coffee, fruit juice, milk and cordial.

If you have bladder problems, it is important not to cut down on the amount of fluid you drink. It is likely to lead to other problems, such as dehydration, constipation or worsened postural hypotension. Drinking water in the day should help mitigate these problems.

**Find out more:** *Bladder Control and Parkinson's* is available from your state Parkinson's office or on their website under 'Information Sheets'

### There are other ways to increase your fluid intake, including:

- ❖ eating juicy fruits, such as, watermelon, oranges, mandarins, grapes and berries

- ❖ having soups, custards, jellies and icy-poles

Some people with Parkinson's have swallowing problems and may need to thicken drinks to make the liquid move more slowly in the mouth. Sometimes this makes it harder for people to drink enough, which can lead to dehydration. If you're experiencing problems eating or swallowing you should seek a referral to a speech and language therapist. **See page 22** for more details.

## Salt

Generally, it is not a good idea to have a lot of salty food or add a lot of salt to your diet.

However, some people with Parkinson's may have problems with low blood pressure (also called hypotension.) It can be a symptom of Parkinson's or it can be a side effect of the drugs used to treat the condition. Salt causes your body to retain water, so reducing your intake can lead to decreases in your blood pressure. So, if you have low blood pressure, reducing your salt intake may not be advisable. If you are concerned, speak to your GP, specialist or Parkinson's Nurse Specialist.

For more information on low blood pressure and Parkinson's (**see page 34**).



## Can I drink alcohol?

Generally, unless your GP, specialist or Parkinson's Nurse Specialist have advised you not to drink alcohol, a small amount, such as a glass of wine or a beer every now and again, should not cause any problems.

People can respond to alcohol in different ways, so talk to your medical professional if you have any concerns. Remember to take into account any medication you may be taking for other conditions. Alcohol can also cause problems with low blood pressure (**see page 34**).

If you are trying to lose weight, remember that alcohol is high in calories.

It is recommended that men and women should not have more than ten standard drinks per week and no more than four standard drinks on any one day. A standard drink is 10g of alcohol. Many drinks have more than one standard drink in them so please check the label.

It is also recommended to keep at least two days each week free of alcohol.

# Notes

**Points of discussion with my Health Professional**



# Maintaining a Healthy Weight

# Maintaining a Healthy Weight

**It is important for everyone to maintain a healthy weight, as being overweight or underweight can affect your health. You can find out more about what your healthy body weight is by speaking to your GP.**

## I am underweight or losing too much weight, what should I do?

If you are underweight or have difficulty putting weight on, it may be because of the side effects of Parkinson's medication (for example, dyskinesia,) or difficulties with chewing or swallowing. It may also be due to practical problems, such as food shopping, preparation or keeping your food hot while you are eating.

### You may find the following useful:

Make the most of adding extras to foods, such as a knob of butter, a drizzle of olive oil, some mayonnaise or salad cream, some avocado or creamy dip. These will make the food tastier and also add some energy (kilojoules.)

- ❖ Some jam or honey on your toast, a sprinkle of sugar, honey or golden syrup on your porridge or breakfast cereal will add some extra energy and help prevent weight and muscle loss.

Try to have three meals a day and two to three snacks between your meals, or a grazing style of eating. Smaller meals and healthy snacks are more enjoyable.

### A grazing day may be something like this

7am – A slice of toast and vegemite and/or jam

9am – Small bowl of breakfast cereal and half a banana or a few blueberries

10.30am – Coffee and half a bran and fruit muffin

12 mid-day – Small bowl of soup and half a slice of bread

2pm – Cup of tea and half a round of cheese and salad sandwich and half a sliced apple

3.30pm – Crackers and cheese or hommus

5.30 pm – Handful of cashew nuts

6pm – Small serve of main meal and vegetables

8pm – Fruit and ice-cream or custard



## Snack suggestions

- ❖ small bowl of breakfast cereal
- ❖ wholemeal crackers, buttered and with peanut butter and pickle
- ❖ small bowl of dried fruit and nuts
- ❖ a couple of tablespoons of yoghurt and a sprinkle of chopped walnuts and drizzle of maple syrup
- ❖ slice of grainy toast with butter and avocado and a squeeze of lemon
- ❖ small bowl of soup with finely chopped parsley
- ❖ ½ sliced banana + 1-2 tablespoons custard or ice-cream and a sprinkle of brown sugar
- ❖ crackers with cheese or hommus
- ❖ slice of wholemeal fruit bread and marmalade or jam or topped with mashed banana.
- ❖ a handful of nuts

If you are finding it difficult to maintain your weight or reach a healthy weight, your GP, specialist or Parkinson's Nurse Specialist can refer you to a dietitian. A dietitian can provide specific, practical suggestions to suit your circumstances and taste preferences.

## I am overweight, what can I do?

It is easy to gain weight if you become less active but are eating the same amount of food.

### If you are trying to lose weight, here are some tips to start with

- ❖ try reducing serve sizes. Limit the starchy part of your meal (potato, pasta, rice, noodles) and add extra vegetables and/ or a salad
- ❖ limit fried and battered foods and pastries
- ❖ avoid rich creamy sauces and gravies. Replace with stock, tomato, wine, or vegetable-based sauces and marinades. Fresh herbs and spices add extra flavour and nutrients.
- ❖ use reduced fat milk instead of full cream milk
- ❖ choose yoghurts with no more than 3-4g fat/100g. Many greek yoghurts have more than 12% fat.
- ❖ try eating healthier snacks like reduced fat yoghurts or fresh fruit

# Maintaining a Healthy Weight

- ❖ cakes, sweet biscuits and pastries all have lots of sugar and fat in them, so try to cut down on these treats. If you must have them, try to have smaller serves
- ❖ use ‘sugar-free’, ‘no added sugar’ or ‘low calorie’ drinks and use artificial sweetener instead of sugar. If you have other health conditions as well as Parkinson’s, such as circulation problems, high cholesterol, heart disease or diabetes, and are concerned about being overweight, speak to your GP, specialist, Parkinson’s Nurse Specialist or ask to see a dietician

## Parkinson's and weight gain

Parkinson’s medication does not tend to make people gain weight, but a small number of people may experience impulsive and compulsive behaviour, such as overeating. This is a side effect of some Parkinson’s medication, particularly dopamine agonists and in some cases, Levodopa.

## Impulsive behaviour

Impulsive behaviour is when a person can’t resist the temptation to carry out certain activities.

These are often activities that give an immediate reward or pleasure, such as gambling, hyper-sexuality and overeating. So, someone may eat large amounts of food in a short period of time because they can’t control their appetite, and they therefore gain a lot of weight.

If you think you’re experiencing this behaviour, speak to your GP, specialist or Parkinson’s Nurse Specialist. We don’t advise anyone to stop taking or to change their Parkinson’s medication without the advice of their specialist.

Any changes have to be made slowly and gradually, and should always be carried out and reviewed by a specialist, because of the risk of side effects and withdrawal symptoms.

Someone experiencing impulsive or compulsive behaviour may not realise they have a problem. So, it’s important that your partner/carer (if you have one) is aware of these side effects.

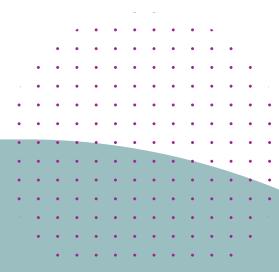
**Find out more:** *Impulse Control Disorder and Dopamine Dysregulation syndrome in Parkinson’s* is available from your state Parkinson’s office or on their website under ‘Information Sheets.’

“

I am very overweight. I never had any problems with weight until I was diagnosed with Parkinson's six years ago, and it is simply a matter of comfort eating. My neurologist has told me not to lose weight, as it will be an advantage to me later.

But my worst Parkinson symptom is permanent curling over of my toes, which makes walking hard work. My toes and weight combined make it ever harder to walk and take exercise of any kind, and I worry that this is damaging my general health. But in the last few weeks, my weight has stabilised and I am no longer gaining. I think that is mainly because I have become busier socially outside the house, so I don't eat through boredom or inactivity as I was before. That has encouraged me to look for other exercise possibilities. I'm hoping to join a friend on some short walks, and maybe a dance class!

**MOSIE,**  
DIAGNOSED IN 2010



## Deep brain stimulation and weight gain

Some people with Parkinson's may put on weight quickly after having deep brain stimulation, a surgery sometimes used to treat the condition.

If you are considering surgery, talk to your healthcare professional about being referred to a dietitian, ideally before you have surgery.

**Find out more:** Surgery for Parkinson's

Surgery for Parkinson's is available from your state Parkinson's office or on their website under 'Information Sheets.'

# Notes

**Points of discussion with my Health Professional**

# Constipation

Constipation  
Diarrhea  
Bowel movement  
Incontinence

# Constipation

**Many people with Parkinson's may experience constipation.**

**This can be helped by:**

- ❖ drinking more fluid
- ❖ exercising
- ❖ eating more fibre-rich foods

## How does fibre help?

Fibre absorbs fluid as it moves through your bowel, forming a soft stool that can be passed more easily. If you increase the fibre in your diet, it is very important to increase your fluid intake. Too much fibre without enough fluid can increase constipation. It is always recommended to increase fibre gradually.

A dietician can give you more specific information and advice about increasing fibre and managing constipation.

## How to increase your fibre intake

Fibre is found in cereals, seeds, nuts, fruit, vegetables and pulses, such as peas, beans and lentils. When increasing your intake of fibre, it is important to do so gradually to avoid bloating or flatulence (wind). Aim to introduce one new high-fibre food every three days.

## Some suggestions to increase your fibre intake

- ❖ choose a high fibre breakfast cereal or add a couple of tablespoons of Bran flakes or All Bran to your cereal. Don't forget you may need to add a little more milk
- ❖ eat high-fibre varieties of foods, such as wholemeal bread, pasta or brown rice
- ❖ alter recipes to use some wholemeal flour instead of all white
- ❖ try using more peas and lentils in your diet like baked beans, chick peas, etc. and eat more vegetables. They can be raw, cooked, fresh or frozen.



- ❖ enjoy more fruit as a snack, on breakfast cereal, with yoghurt or custard/ice-cream, it can be fresh, stewed, tinned or dried. Try bananas, pears, oranges, prunes or fruits in season
- ❖ if introducing psyllium husks, and/or ground linseeds, start with one teaspoon added to cereals, or yoghurts and increase by a teaspoon per day every three days to a maximum of four teaspoons or one tablespoon. Ground linseeds may also be sprinkled over salads or vegetables

**Note:** You may discover that the addition of two teaspoons of psyllium or ground linseeds is enough. If so, do not continue to increase the serve size. Remember to drink an extra glass of fluid a day when adding psyllium or linseeds, otherwise they may make constipation worse.

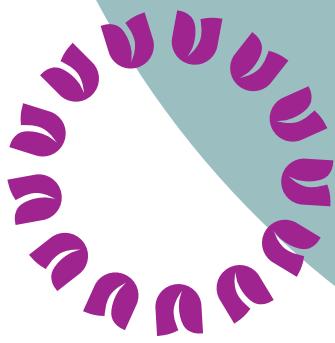
Some people may need to take laxatives for regular bowel movements and minimal straining. You can discuss this further with your GP, specialist or Parkinson's Nurse Specialist.



# Notes

**Points of discussion with my Health Professional**

# Eating and Swallowing Difficulties



# Eating and Swallowing Difficulties

**Some people with Parkinson's may find they have problems when eating and swallowing.**

## If you find it difficult to swallow, you may

- ❖ cough when eating or drinking
- ❖ find it difficult to keep food or drink in your mouth
- ❖ find it hard to start to swallow and the food goes round and round in your mouth
- ❖ find that it takes longer to chew your food
- ❖ have difficulty opening your mouth

## There are four main problems that are linked to swallowing

- ❖ silent aspiration, which is when food or liquid from the mouth enters the lungs rather than the stomach, without any of the usual signs of coughing or choking. This can lead to a chest infection, known as aspiration pneumonia
- ❖ not eating enough to maintain good general health (known as malnutrition)

❖ not drinking enough, this can lead to other medical issues, such as constipation or dehydration

❖ a rarer occurrence is food blocking the airway and stopping your breathing (known as asphyxiation)

It is very important to talk to your GP as soon as you can if you have problems with swallowing, as they may refer you to specialists who can offer help.

A speech and language therapist, who works with people with swallowing problems, can offer information and suggest strategies to overcome some of the challenges you are experiencing. In most areas, you will be able to contact a speech and language therapist through the speech and language therapy department at your Parkinson's clinic.

You may also be referred by your GP, specialist or Parkinson's Nurse Specialist.

Before an assessment, you may find it helpful to keep a diary of when problems with swallowing happen and which foods you find most difficult to eat.



## What can I do to help with swallowing?

## Should I try a different diet?

Make sure you are comfortable at meal times.

### The following suggestions may help make it easier to eat

- ❖ take your time and eat in a comfortable, quiet place
- ❖ if you feel you are taking too long and food is getting cold, consider eating smaller, more frequent meals and snacks, or food that is easier to eat
- ❖ you can buy heated plates to keep food warm for longer or consider serving smaller portions so that a second portion can be kept warm or reheated if it's safe to do so
- ❖ try eating sitting upright in your chair and eating at a table
- ❖ plan your meals when your medication is working. Avoid trying to eat large meals when you are 'off'
- ❖ if you wear dentures try to ensure they fit comfortably. Ask for a review by your dentist if you are concerned
- ❖ try to eat when you are less tired, this may mean moving your main meal to lunchtime rather than in the evening

You may find certain foods difficult to chew or swallow. If swallowing is becoming difficult, seek advice from a speech and language therapist, via your GP.

It may be suggested that you change the texture of the food you eat – for example, have food that is able to be mashed with a fork, or is pre-mashed or has been puréed. Semi-solid foods are usually easier to swallow than foods with mixed textures or very hard or dry foods.

A dietician can then advise you on the type of foods that may be available in these forms so you can eat a balanced diet.

### You may find the following helpful

- ❖ avoid hard, dry or crumbly foods
- ❖ meat that is tough or chewy can be difficult to swallow. Stews, mince meals and casseroles are easier to eat. Slow cooked meals are delicious and the slow cooking method makes the meat more tender
- ❖ having a drink with your meal makes chewing and swallowing easier. A sip of water between mouthfuls can make a big difference

# Eating and Swallowing Difficulties

- ❖ try taking smaller mouthfuls
- ❖ good posture and a comfortable position while eating will help with swallowing

## Difficulties with fluids

Sometimes people with Parkinson's have problems swallowing fluids. Following an assessment, a speech and language therapist may suggest adding thickening agents to drinks. These are available on prescription from your GP. Your dietician can suggest fluids that thicken well to help maximise your fluid intake.

## Tube feeding

If swallowing becomes very difficult or you are not able to eat enough to maintain a healthy weight, your specialist, Parkinson's Nurse Specialist, speech and language therapist, or dietician may discuss tube feeding as an alternative.

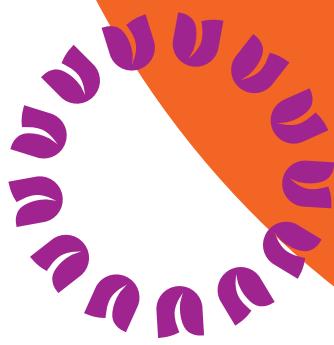
Tube feeding usually involves a small tube, called a PEG (Percutaneous Endoscopic Gastrostomy) tube, being inserted into the stomach. All or some nutrition, hydration and medication is then delivered directly into your stomach through the tube. PEG tubes can normally be easily cared for at home or in a care home setting.

A specialist dietician can discuss what PEG feeding involves, show you a tube and discuss your feeding options to help you make an informed decision.

To ensure your wishes are taken into consideration, you may wish to talk to your healthcare team and your family about whether you would want to be tube fed a long time before you may need it. This can be included into a Health Care Directive.

**Find out more:** *Swallowing and Parkinson's* is available from your state Parkinson's office or on their website under 'Information Sheets.'

# Parkinson's Medication and Your Diet



# Parkinson's Medication and Your Diet

## When should I take my Parkinson's medication?

When you take your Parkinson's medication, it should always be discussed with your GP, specialist or Parkinson's Nurse Specialist.

Some people with Parkinson's may feel nauseous after taking medication, especially if they take it on an empty stomach. Having a snack, such as a plain cracker or biscuit, at the same time as taking your medication can help ease this side effect. Or you may find taking medication with plenty of water can help to reduce nausea.

Your GP can also prescribe anti-nausea tablets if you do feel sick after taking your medication.

It is important that the correct anti-nausea medication is prescribed. *Medications to be used with Caution for people with Parkinson's* is available from your state Parkinson's office or on their website as an A5 brochure.

To assist with absorption of the Parkinson's medication Levodopa, it is recommended that it is taken on an empty stomach if this can be tolerated.

Talk to your GP, specialist or Parkinson's Nurse Specialist if you have difficulty swallowing your medication. It may help to take your medication with a cold drink, such as water, squash or fruit juice, or with yoghurt. You may also benefit from a referral to a speech and language therapist.

## How can protein affect my medication?

In some people, protein (which is found mainly in meat, fish, eggs, cheese, yoghurt, nuts, dried beans and pulses) may interfere with the effects of their Levodopa medication. Therefore it is generally advised that you should take your Parkinson's medication at least 30 to 45 minutes before meals.

Some people with Parkinson's have told us that their medication is less affected by some milk alternatives, such as rice milk, although there is no actual evidence to support this.



## You may also find it helpful to:

- ❖ reduce the amount of protein you eat earlier in the day
- ❖ this may help to increase the response your body has to the medication and avoid unpredictable motor fluctuations
- ❖ eat your main protein meal in the evening, as a slower response to medication may not be as important as at other times of the day

If you do wish to review the timing of your protein intake, you should talk to your GP, specialist or Parkinson's Nurse Specialist, or ask to see a dietician with experience in Parkinson's.

You should not stop eating protein altogether as it is vital to help your body renew itself and fight infection. Reducing protein may cause dangerous weight loss.

“

I am not a very good cook but I do recommend experimenting. My husband takes Sinemet every two hours, so it is impossible to leave an hour either side of the tablets! But we have found that different types of protein affect the meds in different ways. Eggs and vegetarian products seem to interfere less.

If we are staying in, we eat whatever we fancy and put up with the shuffling! But if we are going out, we eat a meal with no protein before setting off, for example vegetable soup, pasta with a vegetable sauce, a sliced tomato and lettuce sandwich, or baked potato with butter and a mixed salad. It's not very exciting but it does mean the meds work.

I can only recommend experimenting to see what works for you.

**VAL,**

WHOSE HUSBAND HAS PARKINSON'S

# Parkinson's Medication And Your Diet

## Side effects of Parkinson's medications

**We cannot list all the possible side effects of all Parkinson's medications in this booklet, but some Parkinson's medication may cause:**

- ❖ nausea and vomiting
- ❖ diarrhoea or constipation
- ❖ low blood pressure
- ❖ dry mouth
- ❖ tiredness

These side effects may interfere with your appetite, which may lead to you eating and drinking less. A dietitian may be able to advise you on how to manage these symptoms, especially if they interfere with your normal appetite.

## Indigestion and heartburn

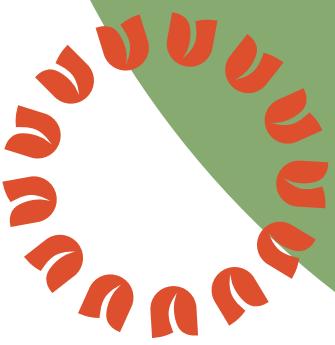
Antacids, which are used to relieve heartburn or indigestion, should not be taken at the same time as other medications. They may have an effect on the absorption of your Parkinson's medication.

## Reducing Heartburn

There are some other things you can do to reduce heartburn. Try having smaller, more frequent meals rather than three large meals a day. Sitting upright and eating at a table, rather than being a little slumped while eating off a tray can also help. Always avoid eating just before bed or having a rest or sitting in a semi - prone position straight after a meal. Try to sit upright or attend to a task that requires you to stand or take a walk after a meal. Never bend over within one hour of a meal.

You may also find that certain foods make your heartburn worse. It may help to avoid alcohol, coffee, chocolate, tomatoes, fatty foods and spicy foods.

If you do experience heartburn or indigestion, you should speak with your GP, specialist or Parkinson's Nurse Specialist, who can advise on appropriate treatments.



# Vitamins, Food Supplements and Special Diets

# Vitamins, Food Supplements and Special Diets

**Eating a well-balanced diet will give you a good amount of vitamins and minerals. For many vitamin and mineral supplements, there's no clear scientific evidence they have any health benefits (although there is evidence for the benefits of vitamin D, see below).**

So, if you feel you need more of a particular vitamin or mineral, it is advisable to try to eat more of the foods containing it, rather than to buy expensive vitamin and mineral supplements.

You also need to be aware that some vitamins, when taken in large doses, can have side effects. Some supplements, for example vitamin B6 and iron supplements, may also affect the absorption of your Parkinson's medication. Before purchasing any 'over the counter' mineral and vitamin supplements from chemists or health food shops, consult your GP, specialist, Parkinson's Nurse Specialist or dietician for advice.

## Calcium and vitamin D

Osteoporosis is a condition that affects the bones, causing them to become weak and fragile and more likely to break. It is often diagnosed in people with Parkinson's. It has been suggested that increased severity of Parkinson's

symptoms is linked to reduced bone density.

Your levels of calcium and vitamin D should be assessed in the early stages of your condition to prevent or lower the risk of poor bone health. Speak to your specialist or GP if you think you may need to take calcium or vitamin D.

## Antioxidants

Antioxidants are molecules that are part of the body's defence system. They are chemicals produced by your body or obtained from your food. They work to stop the damaging effects of free radicals. Free radicals are damaging molecules that can be produced by normal chemical reactions in your body or absorbed from outside sources (such as cigarette smoke, pollution or spending too long in the sun.)

Free radicals only last in your body for a very short time, but can damage cells during that time. Antioxidants keep cell damage under control, trapping and neutralising free radicals.



Currently, there is no evidence that antioxidants will slow the progression of Parkinson's or improve symptoms, but they are important for our general health. The best source of antioxidants is the food we eat. There are many different antioxidants that act in specific ways in different parts of the body. The best way to boost your antioxidant intake is through your diet. Eat a variety of different

coloured vegetables and fruit. Herbs and spices such as parsley and oregano, turmeric and ginger are also rich sources of antioxidants.

Taking excessive amounts of antioxidant supplements can have a negative effect on your health and wellbeing. You should speak to your GP, specialist, Parkinson's Nurse Specialist or dietitian before taking any supplement.

## A Recipe full of goodness to try

### Minestrone Soup

250g boneless chuck, trimmed of fat

3 litres of water

2 cups chopped tomato, or one 425g can chopped tomatoes

1 medium onion, chopped

2 stalks of celery, sliced

1 tablespoon dried parsley or  
2 tablespoons chopped fresh parsley

½ tablespoon dried oregano

¼ teaspoon ground black pepper

1 clove of garlic, chopped  
(or ½ teaspoon minced garlic)

1 cup uncooked barley

1 x 420 g can four bean mix, drained

1 cup green beans

1 carrot, sliced

1 cup chopped cabbage

1 medium potato, unpeeled and diced

In a large saucepan, cook meat in water one to one and a half hours until tender (or use a pressure cooker.) Remove meat and shred. Add tomatoes, onion, celery, parsley, oregano, pepper, garlic and barley to water. Simmer, stirring occasionally for 20-30 minutes. Add meat, bean mix, green beans, carrot, cabbage and potato.

Simmer 30 to 40 minutes longer until vegetables and barley are tender. Makes about 10 servings. Freezes well.



# Vitamins, Food Supplements and Special Diets

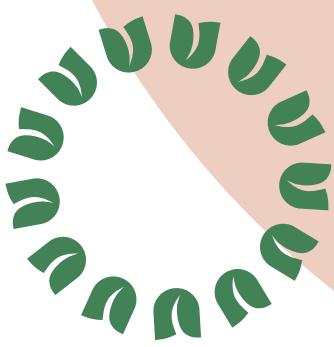
## Special diets

There are many websites and other sources that give dietary advice or make claims about diets that are suitable for people with health conditions. We do not recommend that you follow any advice without reliable medical evidence that it works.

### If you want to know whether a health information website is reliable, ask yourself the following questions

- ❖ who has produced the content? Is it owned or sponsored by a reputable organisation? (Most sites will have an ‘About us’ or ‘About this site’ section where you can get more information about the site and who has set it up.)
- ❖ are contact details available for the website owners? (Be wary if there is no way of contacting them.)
- ❖ is the health information consistent with other material you have read?
- ❖ does the website give information about both the benefits and risks of potential treatments?
- ❖ is the information recent?
- ❖ are they asking for money to access diet plans or to take part in research? (Be wary of any websites asking for money. Remember that you will never be asked to pay to take part in research.) It is important for anyone who is considering trying any special diet to discuss this first with a health professional.

# Low Blood Pressure



# Low Blood Pressure

**People with Parkinson's can experience low blood pressure, particularly postural hypotension. Postural hypotension (also known as orthostatic hypotension) is a large drop in blood pressure when standing or changing position.**

This can be a symptom of Parkinson's or may be caused by the medications used to treat Parkinson's, for example Levodopa.

## Common symptoms of low blood pressure include

- ❖ feeling dizzy or light-headed (especially when you stand up after sitting or lying down)
- ❖ blurred vision
- ❖ feeling weak
- ❖ feeling muddled or confused

**These symptoms are most likely to happen when there is an increased demand for blood, such as:**

- ❖ after meals – the stomach and intestines need more blood, which lowers blood pressure in other parts of the body
- ❖ when you are dehydrated. A lack of fluids and salt in your body makes it harder for your autonomic nervous

system to regulate your blood pressure. Drinking alcohol can cause dehydration and that can disturb the control of blood pressure, so try to drink water in between alcoholic drinks

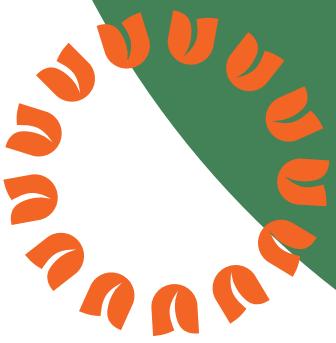
- ❖ if you are constipated (a common problem in people with Parkinson's), sometimes the effort of straining may cause you to feel faint

**If you have low blood pressure, your symptoms may be managed by:**

- ❖ avoiding large meals
- ❖ increasing the amount of salt in your diet
- ❖ increasing your fluid intake, particularly caffeine drinks. You may also find it helpful to have a glass of water before getting out of bed.
- ❖ decreasing how much alcohol you drink

For more advice on how to manage these symptoms speak to your GP, specialist, Parkinson's Nurse Specialist or dietitian.

# Food Shopping and Preparation



# Food Shopping and Preparation

**The way you buy, store, prepare and cook food may need a little advance planning.**

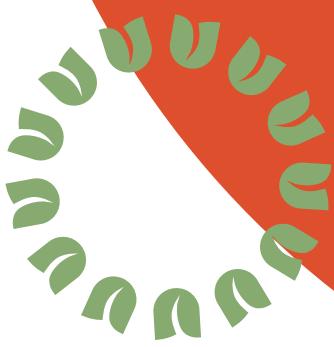
## Here are some tips if you find shopping or cooking a challenge

- ❖ plan meals in advance, making a shopping list of all the ingredients you need
- ❖ when planning meals, think about how long you can stand at a cooker without becoming tired
- ❖ at supermarkets, look out for special trolleys designed to make shopping easier for people with disabilities

- ❖ consider buying ready prepared foods, tinned fish, meat or beans, frozen or freshly prepared vegetables. Frozen vegetables are just as nutritious as fresh and prepared vegetables and meals can save time, your energy, gas, electricity and avoid food wastage
- ❖ keep a supply of a wide variety of food in your store cupboard and freezer. Store supplies at eye level if possible
- ❖ an occupational therapist can give you more advice on all aspects of food shopping and preparation, including kitchen and shopping aids



# Dishes and Cutlery



# Dishes and Cutlery

## Should I buy special utensils?

There are many types of adapted utensils for eating and drinking available that may be worth considering.

An occupational therapist can advise you on the right equipment for your needs.

## Cutlery

Special cutlery is available in various shapes and sizes. These utensils can be useful if you have reduced grip, weakness or tremor.

### You may find the following helpful:

- ❖ cutlery with the combined features of a knife and fork, or an all-in-one fork and spoon
- ❖ special handles for cutlery that are extra-large, easy-grip (molded rubber), extra-light, weighted or curved
- ❖ foam sleeves, which can be placed over existing cutlery handles to make the item easier to hold

## Cups and mugs

If you have a tremor, you may find special mugs will help you to prevent spills when drinking.

### You may find the following helpful:

- ❖ two-handled cups can help improve grip and reduce the chance of spills. Special non-spill mugs are available with wide, non-slip bases and tall necks
- ❖ using a sip or sports cup with a lid can stop liquids from spilling. If the sip cup is being used for hot drinks, it's important to make sure that the cup is made out of a material that won't soften or melt
- ❖ nosey cups have a low cut-out opposite the position of the mouth when drinking. The cut-out allows the person drinking to tilt and drain the cup more easily with limited neck movement. These cups are made of plastic so are only suitable for cold drinks



## Equipment

You can also buy items to help with opening jars and bottles.



There were several things that I found helpful to keep my mother eating, drinking and interested in food, especially when swallowing became an issue.

I bought her a set of 'cut away' cups, which you put in a two - handled, cup-holder base that was really lightweight. This meant she could manage hot and cold drinks and didn't have to tip her head back to drink.

**ANNE,**  
WHOSE MOTHER HAD PARKINSON'S

## Plates

Several special plates are available that help if you find it takes a long time to eat or if you have trouble getting food on a fork or spoon.

### The following may be helpful:

- ❖ a 'stay-warm plate' may be useful if it takes you a long time to eat
- ❖ high-lipped plates are available that reduce spills and make it easier to get food on a fork or spoon. You can also buy plate guards, that clip on to your own plates
- ❖ a non-slip mat made from a special material called Dycem can be placed under a plate or bowl to stop it from moving around while eating



# More Information and Support

For further advice on any aspect of living with Parkinson's, please contact your State based Parkinson's organisation or your Parkinson's Nurse Specialist who may be based within your Healthcare setting or with a local Parkinson's organisation.

Parkinson's Nurse Specialists have a wealth of knowledge and experience and are locally based in order to assist with navigating our diverse health systems. They can act as a liaison between all other heath care professionals to make sure your needs are met.

State based Parkinson's organisations provide current and comprehensive information about Parkinson's and other services available.

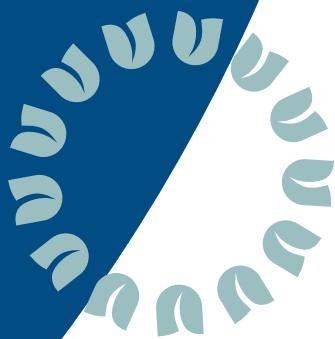
**For further information, please contact your state organisation or call 1800 644 189.**

Parkinson's ACT	<a href="http://www.parkinsonsact.org.au">www.parkinsonsact.org.au</a>
Parkinson's NSW	<a href="http://www.parkinsonsnsw.org.au">www.parkinsonsnsw.org.au</a>
Parkinson's QLD	<a href="http://www.parkinsonsqld.org.au">www.parkinsonsqld.org.au</a>
Parkinson's SA & NT	<a href="http://www.parkinsonssa.org.au">www.parkinsonssa.org.au</a>
Parkinson's TAS	<a href="http://www.parkinsonstasmania.org.au">www.parkinsonstasmania.org.au</a>
Parkinson's VIC	<a href="http://www.parkinsonsvic.org.au">www.parkinsonsvic.org.au</a>
Parkinson's WA	<a href="http://www.parkinsonswa.org.au">www.parkinsonswa.org.au</a>

# Take Charge of Parkinson's

This Diet and Nutrition book is designed for people with Parkinson's, carers and health professionals. It is written by a registered dietician who specialises in the nutritional needs unique to people with Parkinson's.

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# information

FOR PEOPLE LIVING WITH PARKINSON'S

Information  
for people living with  
Parkinson's

