



Care Partner Guide for Daily Care

Tips and Tools for Nutrition & Medication Management

Nutrition and medication management are foundational to living well with Parkinson's disease. For caregivers, these daily responsibilities can feel complex—balancing appetite changes, medication schedules, side effects, and evolving nutritional needs. With the right strategies and understanding, these routines can become more predictable, supportive, and less stressful for everyone involved.

This guide offers practical tools and real-world guidance to help caregivers support medication effectiveness, maintain strength, and nourish both body and brain.

Nutrition to Support Strength, Energy & Brain Health

Parkinson's disease can affect appetite, swallowing, digestion, and energy levels. Nutrition is not just about calories—it directly influences mobility, medication response, muscle strength, and resilience.

Key nutrition tips for daily care:

- Encourage regular meals and snacks to maintain energy
- Prioritize hydration throughout the day
- Include fiber-rich foods to support digestion
- Adjust food textures if chewing or swallowing becomes difficult
- Monitor for unintentional weight loss or reduced appetite

Many individuals with Parkinson's eat less simply because meals take more effort. Fatigue, tremor, or loss of smell can reduce interest in food. Smaller, more frequent meals are often better tolerated than large portions. Creating a calm, unrushed eating environment and offering familiar, appealing foods can significantly improve intake.

Hydration deserves equal attention. Even mild dehydration can worsen dizziness, constipation, confusion, and blood pressure changes. Keeping drinks visible and within reach throughout the day helps maintain consistency.

Mediterranean, MIND & Anti-Inflammatory Eating Patterns

Research increasingly supports dietary patterns that reduce inflammation and support brain health. The **Mediterranean diet**, **MIND diet**, and **anti-inflammatory diet** share many common principles and can be adapted flexibly for Parkinson's care.

Shared principles across these approaches include:

- Emphasis on vegetables, fruits, and leafy greens
- Healthy fats such as olive oil, nuts, seeds, and fatty fish
- Whole grains and legumes for steady energy
- Herbs and spices instead of excess salt
- Limited processed foods, added sugars, and saturated fats

The Mediterranean diet focuses on heart and vascular health, which also supports brain function. The MIND diet blends Mediterranean and DASH principles with added emphasis on cognitive protection—highlighting leafy greens and berries. Anti-inflammatory diets aim to reduce chronic inflammation, which may contribute to symptom progression and fatigue.

These diets are not rigid meal plans. They are frameworks that encourage *more of what supports the brain and less of what promotes inflammation*. Even small shifts—such as cooking with olive oil, adding greens to meals, or choosing fish once or twice a week—can be beneficial.

Protein, Muscle Strength & Parkinson's

Protein is essential for maintaining muscle mass, strength, balance, and endurance—especially for older adults and individuals living with Parkinson's.

Important protein considerations:

- Protein supports muscle strength and fall prevention
- Adequate intake helps preserve weight and stamina
- Many older adults actually need *more* protein over time
- Protein should **not** be eliminated from the diet

A common concern in Parkinson's care is that protein should be avoided. In reality, protein is vital

for maintaining physical strength and independence. Loss of muscle mass can increase fall risk, fatigue, and difficulty with daily activities.

What matters most for Parkinson's is **timing**, not avoidance.

Medication Management & Levodopa Timing

Levodopa remains the gold-standard medication for Parkinson's disease, but its absorption and effectiveness can be influenced by food—especially protein.

Key medication management tips:

- Take levodopa at the same times each day
- Avoid protein **30–60 minutes before** taking levodopa
- Avoid protein for **about 1 hour after** taking levodopa
- Use alarms, pill organizers, or written schedules
- Track symptom response and side effects

Levodopa is absorbed in the small intestine and uses the same transport pathways as dietary protein. When protein is consumed too close to medication dosing, it can delay or reduce absorption—leading to slower onset, weaker benefit, or unpredictable symptom control.

For many individuals, taking levodopa **30–60 minutes before a meal or at least 1 hour after eating protein** allows the medication to work more effectively. This does *not* mean meals must be skipped—only that protein timing may need adjustment.

Some people experience nausea if levodopa is taken on an empty stomach. In these cases, a small non-protein snack (such as fruit, crackers, or toast) may be appropriate. Medication routines should always be individualized with the healthcare team.

Balancing Protein Intake & Medication Effectiveness

Helpful protein-timing strategies (when appropriate):

- Focus on lower-protein meals earlier in the day
- Schedule higher-protein foods later in the afternoon or evening
- Spread protein intake across meals rather than consuming it all at once
- Avoid protein within **30–60 minutes before** and **1 hour after** levodopa doses

This approach—sometimes called *protein redistribution*—allows levodopa to work more effectively during the day while still ensuring adequate protein intake for muscle health and recovery. Dinner often becomes the main protein-rich meal, supporting overnight muscle repair and overall nutrition.

Not everyone needs strict protein timing. Caregivers should observe patterns and work with providers to determine what approach is most helpful and realistic.

Tools That Make Daily Care Easier

Helpful caregiver tools include:

- Weekly pill organizers with time-of-day sections
- Medication reminder apps or phone alarms
- Simple meal-planning templates
- Ready-to-eat or pre-cut nutritious foods
- Texture-modified foods when swallowing becomes difficult

Consistency reduces stress. Preparing medications and meals at the same time each week creates rhythm and predictability. Visual schedules posted in the kitchen or near medication storage areas can support independence while reducing caregiver oversight.

If coughing, choking, or prolonged eating times develop, a speech-language pathologist should be consulted early. Swallowing changes are common in Parkinson's and highly treatable with proper support.

When to Seek Additional Support

Consider professional guidance if:

- Medication timing feels confusing or overwhelming
- Weight loss, fatigue, or weakness is increasing
- Meals are regularly skipped or avoided
- Symptoms fluctuate unpredictably despite consistent dosing

Neurologists, pharmacists, registered dietitians, and speech therapists can help fine-tune routines and reduce daily burden for caregivers.

A Final Thought for Care Partners

Managing nutrition and medication is a quiet but powerful form of care. Your attention to timing, nourishment, and routine supports not only symptom control—but strength, confidence, and quality of life.

You are not expected to get everything perfect. Small, thoughtful adjustments—made with compassion and flexibility—can have a meaningful impact.

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