Care Partner Guide for Daily Care

Educational Resources: Understanding Parkinson's Motor & Non-Motor Symptoms

Parkinson's disease affects much more than movement. While tremor and stiffness are often the most visible symptoms, many of the most impactful changes are **non-motor**—affecting mood, sleep, thinking, digestion, and behavior. For care partners, understanding the full range of Parkinson's symptoms helps reduce fear, improve communication with providers, and support daily care with confidence.

This guide provides a practical overview of **motor and non-motor symptoms**, how they may appear or change over time, and how caregivers can respond thoughtfully.

Understanding Motor Symptoms

Motor symptoms are caused by changes in dopamine levels in the brain and often fluctuate throughout the day.

Common motor symptoms include:

- Tremor (often starting on one side)
- Slowness of movement (bradykinesia)
- Muscle stiffness or rigidity
- Balance or postural instability
- Freezing of gait
- Shuffling or reduced arm swing

Motor symptoms can vary hour to hour and day to day, often influenced by medication timing, fatigue, stress, or illness. Slower movement does not reflect lack of motivation or effort—it reflects how Parkinson's affects motor control. Allowing extra time and avoiding rushing reduces fall risk and frustration.

Medication "On" and "Off" Fluctuations

Many motor symptoms change depending on medication timing.

Care partners may notice:

- Improved movement during "on" times
- Increased stiffness or freezing as medication wears off
- Dyskinesias (involuntary movements) at peak doses
- Fatigue or slowness during transitions

Tracking patterns helps providers fine-tune treatment. Care partners often notice subtle changes before they are apparent in the clinic. Simple notes about timing and function can be invaluable.

Understanding Non-Motor Symptoms

Non-motor symptoms are common, often underrecognized, and can be more disabling than motor symptoms.

Common non-motor symptoms include:

- Anxiety or depression
- Sleep disturbances
- Cognitive or memory changes
- Hallucinations or visual changes
- Constipation or urinary symptoms
- Fatigue or pain
- Changes in blood pressure

Non-motor symptoms are part of Parkinson's—not personality changes or signs of weakness. Many are treatable when recognized early. Care partners play a key role in observing and reporting these symptoms, especially when the individual may not recognize them.

Mood & Mental Health Changes

Mood changes are driven by both brain chemistry and the lived experience of Parkinson's.

Mood-related symptoms may include:

- Anxiety
- Depression
- Apathy or reduced motivation
- Irritability or emotional lability

Mood symptoms are medical symptoms, not character traits. They can affect motivation, communication, and quality of life. Support may include counseling, medication, routine, and social connection.

Cognitive & Thinking Changes

Cognitive changes often affect speed and organization more than memory.

Care partners may notice:

- Slower processing
- Difficulty multitasking
- Trouble planning or sequencing tasks
- Word-finding challenges

Providing structure, breaking tasks into steps, and reducing distractions supports cognitive function. These changes are often subtle and fluctuate with fatigue or stress.

Sleep & Fatigue

Sleep disruption is extremely common in Parkinson's.

Sleep-related issues include:

- Difficulty falling or staying asleep
- REM sleep behavior disorder (acting out dreams)

- Daytime sleepiness
- Restless legs or nighttime stiffness

Poor sleep worsens both motor and non-motor symptoms. Reporting sleep changes helps guide treatment and improve daytime function.

Autonomic Symptoms

Parkinson's affects automatic body functions.

Autonomic symptoms may include:

- Constipation
- Urinary urgency or frequency
- Dizziness when standing
- Temperature sensitivity
- Sweating changes

These symptoms are often overlooked but significantly affect daily comfort and safety. Many respond well to targeted treatment.

When Symptoms Change Suddenly

Contact the healthcare team promptly if you notice:

- Sudden confusion or hallucinations
- Rapid decline in mobility
- New or worsening falls
- Significant behavior changes
- New swallowing or choking concerns

Sudden changes are not "just Parkinson's" and often signal infection, medication issues, or other medical concerns.

Tools That Help Care Partners Track Symptoms

Helpful tools include:

- Symptom journals or logs
- Medication timing charts
- Written notes for appointments
- Daily routines and visual schedules
- Caregiver observation checklists

Tracking does not need to be detailed to be useful. Simple observations over time support better care decisions.

A Final Thought for Care Partners

Parkinson's is a whole-body condition, not just a movement disorder. Your awareness, observations, and willingness to learn make a meaningful difference in care quality and safety.

Understanding symptoms empowers you—not to manage everything alone, but to partner effectively with the care team.