Everyday Helpful Hints

to improve the quality of life of people with Parkinson's Disease



AMERICAN PARKINSON DISEASE ASSOCIATION

Prepared by the American Parkinson Disease Association, Inc. this pamphlet provides proven ways to simplify life's daily challenges for people with Parkinson's. Its purpose is to help these individuals maintain the greatest degree of personal dignity and independence.

Mealtime Aids

Thanks to many attractive and durable meal time aids on the market today, people with Parkinson's can eat with greater independence, despite tremor, rigidity or impaired fine hand coordination.

Tips and suggestions:

- Attachable plate guards provide a rim on one side of the plate. Food, such as small vegetables, can be pushed against the guard, where it falls onto the fork. "Scoop Dishes" contoured with raised edges, plates with suction cups and plate guards all help prevent spills and are readily available.
- If eating is slow, use a plate with a hot water container attached to the underside to help keep food warm.
- Silverware with built-up plastic handles is easy to grasp.
- Use a soup spoon instead of a fork for small pieces of food.
- Flexible plastic straws can reduce spills when tremor exists.
- A light-weight mug with a large handle for easy grasping is useful when tremor is severe.

Bathroom & Grooming Aids

Safety is a particular concern in the bathroom due to its potential hazards for anyone suffering from impaired balance, difficulty in walking, tremors, slowed reactions, and/or inability to call loudly for help. Most bathrooms are small and have surfaces that are slippery when wet.

Tips and suggestions:

- Use a tub bench or shower chair to bathe safely.
- Replace as many slippery bathroom surfaces as possible. Use a non-slip rubber mat or adhesive anti-slip strips at the bottom of tub or shower and non-slip bath mats to get out of shower/bathtub.
- Have grab bars installed instead of using weak bathroom fixtures as grab railings for support.
- Use "Soap on a Rope" to keep soap safely and conveniently within reach while showering or taking a tub bath.
- Attach suction cups to a nail brush and a soap dish. These items can then be affixed securely to the inside of the tub, shower or sink for easy access.
- Use a sponge attached to a long handle—or a soft long-handled bath brush—to reach the lower legs, feet and back & facilitate balance by reducing the need to bend.
- Use a terry cloth wash mitt instead of a washcloth.
- Use an electric razor especially for those who suffer from tremors. A variety of electric razor holders are on the market which can make grasping the razor easier.
- Install a night light in a wall socket.

Dressing Aids

The fine hand coordination and strength needed for buttoning and zipping clothing fasteners is sometimes impaired in people with Parkinson's. Nevertheless, most patients feel more comfortable dressing themselves, even though it may take longer to do so. They can compensate for their loss of fine motor skills by simplifying clothing fasteners in a variety of ways.

Tips and suggestions:

- Lower clothes rods in closets so you don't have to reach too high.
- Choose clothing that closes in the front, with easy style and uncomplicated fastenings.
- Put on and take off clothes from your stiffer side first; have a family member lay out the clothing.
- Use velcro closures as substitute for buttons and zippers. Remove the button and sew or hot iron velcro under the button hole and over the button area. Then sew the button on top of the button hole where it would normally appear. Remove zippers and sew or hot iron Velcro strips in place.
- Use a button hook or a "Button Aid." The handles of these tools are more easily grasped than a small button when fine hand coordination is impaired.
- Large, easily grasped zipper pulls make opening or closing trouser flies, jackets and coats less difficult.
- Secure shirt cuffs with firm elastic bands. This method eliminates buttoning and the result is unnoticeable. (Be sure the bands are not tight enough to restrict circulation.)
- Pull trousers and underclothing over feet and legs with a "Dressing Stick." It allows one to remain seated while dressing and reduces the risk of falling.
- Elastic shoe laces need be tied only once, easily converting Oxford shoes to slip-ons. Or, have a shoemaker stitch Velcro strips onto standard tie shoes.

Kitchen Aids

The kitchen is the center of many activities of daily living. With a little advanced planning and organization, meal preparation can be made safer, easier and more enjoyable by limiting the amount of reaching and walking to be done.

Tips and suggestions:

- Store items and food preparation items near the dishwasher and sink, pots near the stove, etc.
- Try preparing food while you are seated. Also try cooking as much food as possible during "on" times and then freeze the meals for when you don't feel up to cooking. Small, movable kitchen islands for food preparation can be helpful.
- Use a cart with wheels to move items from room to room or from the kitchen to the table, to eliminate the necessity of carrying additional items and to offer support while walking.
- Place a "Lazy Susan" in the center of the kitchen table or on a counter, to hold numerous frequentlyused items and eliminate the need to collect these items before meals.
- Use a rubber pad or a wet dishcloth under bowls and pans to stabilize them while preparing foods.
- Use a cutting board with raised sides. It will prevent diced vegetables and small pieces of meat
 from falling off the board. Hammer a nail through
 the cutting board to act as a skewer to keep food
 from slipping while dicing or cutting.
- Cut your food with a "Rocking Knife," which does not require as much coordination as a straight knife.
- Try using a "Crock Pot" to avoid the bending and lifting necessary in using an oven. (Crock Pots are also inexpensive and energy-efficient.)
- Attach an old broom handle or a long wooden dowel to the kitchen dustpan to collect floor sweepings without bending.

The information contained in this supplement is solely for the information of the reader. It should not be used for treatment purposes, but rather for discussion with the patient's own physician.

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