FAQ’s Rehabilitative Therapies

What will an occupational therapist do?
- Occupational therapists use analysis of physical, environmental, psychosocial, mental, spiritual, and cultural factors to identify barriers to “occupation”. Their role is to enable people to develop the “skills for the job of living” necessary for leading an active, independent and satisfying life.

What will a physical therapist do?
Early referral to physical therapy is recommended to assist patients in developing appropriate exercise and activity programs.
- The physical therapist can provide thorough assessment and make exercise recommendations according to a patient’s individual needs, challenges and co-morbidities.
- Hypokinetic movement results in reduced stride length and arm swing, which contribute to gait instability and balance changes.
- Education and gait training by physical therapy is recommended to improve patient safety and function.
- Early instruction in falls prevention is a key factor in reducing later complications due to falls-related injury.
- Patients may also have questions regarding posture changes, stress reduction, workplace issues, leisure interests or pain in early stages of Parkinson’s.
- Some patients may require only one visit with the PT, whereas others may require additional follow-up sessions for instruction and modifications.

What will a speech-language therapist do?
My voice is soft or hoarse – what can be done?
Speech-language therapists (SLT) are trained to evaluate and treat speech, voice, language, memory and swallowing problems. Due to loss of facial and vocal muscle coordination, Parkinson’s patients may suffer at some point during the disease from:
• Soft voice
• Mumbled or fast speech
• Loss of facial expression
• Trouble swallowing
• Problems communication

A therapist can design a program of voice and facial exercises to help increase vocal strength and loudness. One popular program in use by many professionals is the Lee Silverman Voice Treatment (LSVT) or LSVT-Loud that is successful in helping people improve speech and communication.

What will a social worker do?
Persons and families living with Parkinson’s disease might see a social worker for many reasons and at different points in the disease.

Resources and Planning
- to learn about and access resources in your local community.
- to discuss changes in the family, e.g. the situation of being a care partner for someone with Parkinson’s disease
- to plan for the future, including understanding advance directives, insurance issues, home care and housing options

Education and Support
- to better understand PD and to discuss reactions to receiving the diagnosis
- to talk about when and how to share the diagnosis with family and friends, or at the workplace
- to find ways to cope with feelings such as sadness, depression, anger, worries, frustration, and other feelings
- to talk about and find ways to cope with loss
- to find ways to build or maintain good communication with a care partner or other family members about the impact of living with Parkinson’s throughout the illness