

Pain and Parkinson's Disease

June 14, 2021

Dr. Brenda Lau

Medical Director, CHANGEpain Clinic



CHANGEPAIN
Contemporary Pain Care

CHANGE PAIN



CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

Parkinson's and pain

- No classification system (best is Ford 2010)
- Pain is the most frequent non motor symptom and prevalence up to 68-83% if all subtypes included
- the prevalence of pain among PD patients varies because of the disease stage, co-morbidities, and evaluating tools.
- Risk factors: an early age of onset, long disease duration, motor complications, concomitant depressive symptoms, female gender, and associated medical conditions.
- Musculoskeletal pain, chronic body pain (central or visceral), fluctuation-related pain, nocturnal pain, orofacial pain, pain with discolouration/oedema/swelling, and radicular/neuropathic pain; musculoskeletal pain as the most common type.
- Potential underlying mechanisms include a disruption of peripheral nociception and alterations in central pain threshold/processing.
- In advanced stage of patients with PD, polyneuropathy could occur in patients using high dosage of levodopa.
- Pain often correlates to other non-motor symptoms of PD, including depression, sleep, and autonomic symptoms. Dopaminergic drugs, non-dopaminergic medications, botulinum toxin, deep brain stimulation, and physiotherapy have shown some benefits for certain types of PD-related pain.

Table 1
Prevalence and classification of pain in patients with PD in the literature.

Author, year	Number of participants	Prevalence of pain	Classification and rate of pain (n, %)
Snider et al., 1976 [18]	101 PD patients 149 non-PD subjects	PD patients (40%) Non-PD participants (8%)	Central pain (PD vs non-PD: 11 vs. 0) Burning (PD vs non-PD: 22 vs. 3) Tingling (PD vs non-PD: 21 vs. 1) Numbness (PD vs non-PD: 29 vs. 3) Musculoskeletal pain (32, 74%) Dystonic pain (12, 28%) Radicular pain (6, 14%) Akathisia (1, 2%) Thalamic pain (0)
Goetz et al., 1986 [19]	93 PD patients No controls	PD patients (45%)	Neck pain (Male vs. Female: 54% vs. 45%) Back pain (Male vs. Female: 48% vs. 41%) Muscle cramps (Male vs. Female: 45% vs. 41%) Musculoskeletal pain (21%) Dystonic pain (8%) Central primary pain (40%) Akathisia (4%)
Scott et al., 2000 [95]	93 PD patients No controls	PD patients (41–54%)	Dystonic pain (36%) Neuropathic pain (7%) Akathisia (5%) Musculoskeletal (2%) Non-PD pain (31%)
Tinazzi et al., 2006 [20]	117 PD patients No controls	PD patients (40%)	Dystonic pain (7%) Musculoskeletal pain (25%) Peripheral neuropathic pain (5%) Central neuropathic pain (4%)
Negre-Pages et al. 2008 [98]	450 PD patients 98 controls	PD patients with chronic pain (62%) PD patients with non-chronic pain (6%) Controls (58%)	Musculoskeletal pain (70%) Radicular/neuropathic pain (20%) Dystonic pain (40%) Central pain (10%)
Defazio et al., 2008 [99]	402 PD patients 317 controls	PD patients (70%) Controls (63%)	Musculoskeletal pain (44%) Radicular or neuropathic pain (11%) Dystonic pain (19%) Central pain (13%)
Beiske et al., 2009 [30]	176 PD patients No controls	PD patients (83%)	N.A.
Hanagasi et al., 2011 [100]	176 PD patients No controls	PD patients (65%)	N.A.
Zambito Marsala et al., 2011 [96]	106 PD patients 51 controls	PD patients (62%)	N.A.
Allen et al. 2016 [97]	176 PD patients No controls	PD patients (81%)	N.A.
Fu et al., 2018 [7]	144 PD patients No controls	PD patients (52%)	N.A.

Types of patients seen at

- Mechanical
 - Myofascial
 - spine and joint
- Neuropathic
 - complex regional pain syndrome
 - post-surgical
 - post-cancer therapy
 - chronic diseases related
- Visceral
 - Pelvic
 - Post-surgical
- Central Sensitization
 - Widespread
 - headache
 - Pelvic
 - post-trauma
- Opioid weaning
- Early Intervention and functional restoration
 - peri-surgical optimization and recovery
 - prevention/early rehabilitation from injury
- Few exclusion criteria:
 - acute psychiatric or substance use issues
 - uncompliant

CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

www.changepain.ca

IMPORTANT -New changes that might affect you regarding communication and price adjustment

CHANGE PAIN
Contemporary Pain Care

[About Us](#)

[Our Team](#)

[Our Services](#)

[New Patients](#)

[FAQs](#)

[Contact Us](#)

[f](#) [t](#) [v](#) [i](#)



WHY CHOOSE CHANGEPAIN?

We are not your average pain clinic.

WE ARE OPEN
ALL SERVICES CONTINUE

BOOK ONLINE

Pain is a call to action

START YOUR RECOVERY TODAY.

MSP

Covered medical services

[I Have MSP](#)

Non-MSP

Private Pay Medical Services

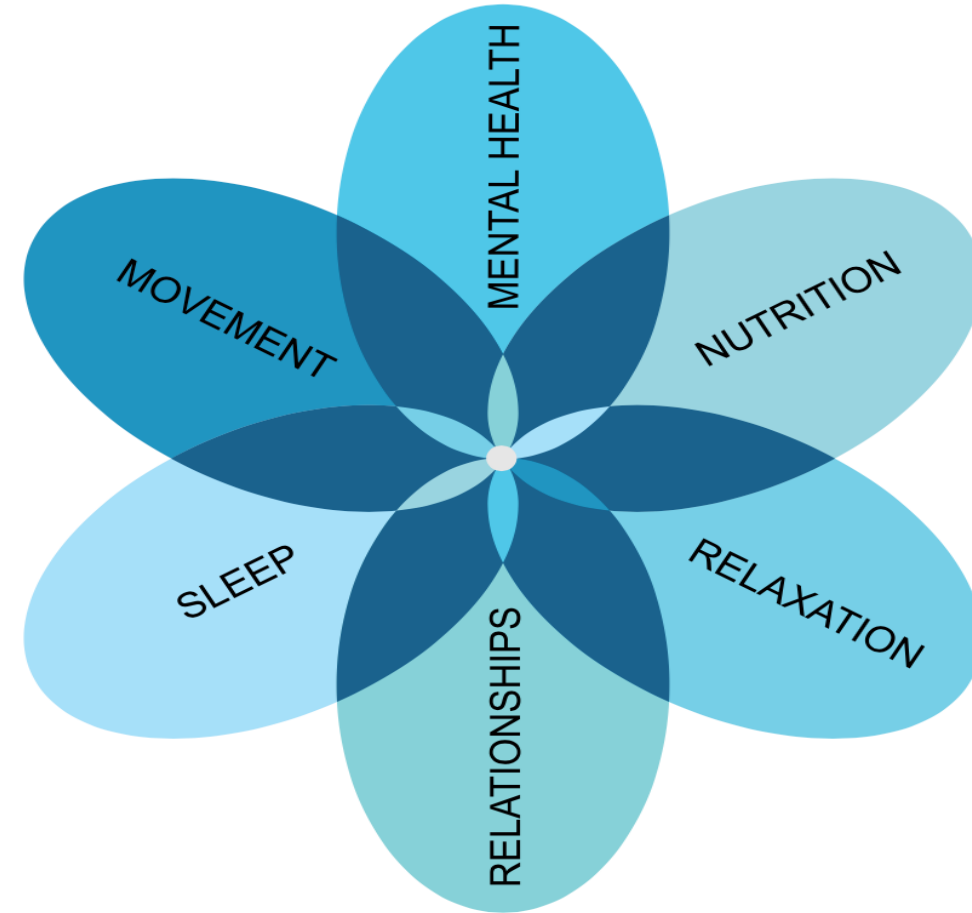
Allied Health Services

[I Have Insurance/Private](#)

Other Services

Medical Legal, Research and More

[Learn More](#)



CPC Patient Journey: MSP Medical Therapies



Advanced Pain Procedures



- **MSP covered**
 - Trigger point injections
 - ISITES-ultrasound guided procedures (prescriptions)
 - Radiofrequency Lesioning (upgrade fees)
- **Private pay /insurance**
 - Intramuscular Stimulation (IMS)
 - Prolotherapy
 - Regenerative therapies (PRP)
 - Ketamine infusion for pain or depression
 - Lidocaine infusion for pain
 - Botox for headache or spasticity

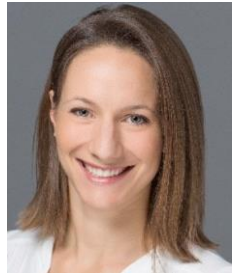
NEW
ICBC Coverage Private Pay
Medical Therapies

When to start allied health services?



- Pain trained practitioners
- ICBC covered, Direct Billing third party coverage
- Self – schedule Online
- Remote consultations available
- Rapid access to care

- Chiropractor
 - Dr. Lindsay Rite
- Physiotherapists
 - Ashleigh Low &
 - Keri Thibodeau
- Kinesiologist/Somatic Therapist
 - Amy Kiara Ruth
- Exercise Physiologist
 - Duncan Bird
- Pain Coach
 - Sarah Jamieson



CPC Patient Journey:

Medical - Allied health Therapies



CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

How do virtual GMVs work?



- **MSP rules:**
 - Physician and/or cofacilitator
 - max one GP-led /one specialist-led
 - If seen doctor that day, cannot take their GMV (only ONE MSP visit per doctor)
- All requests are approved by staff **within 24 hours. Email confirmation sent after**
- GP-Led GMV allows **NEW** patients to join CHANGEpain without a referral
- Etiquette: quiet space, mute, confidentiality, no recording, on time arrival

Which GMVs are for me?

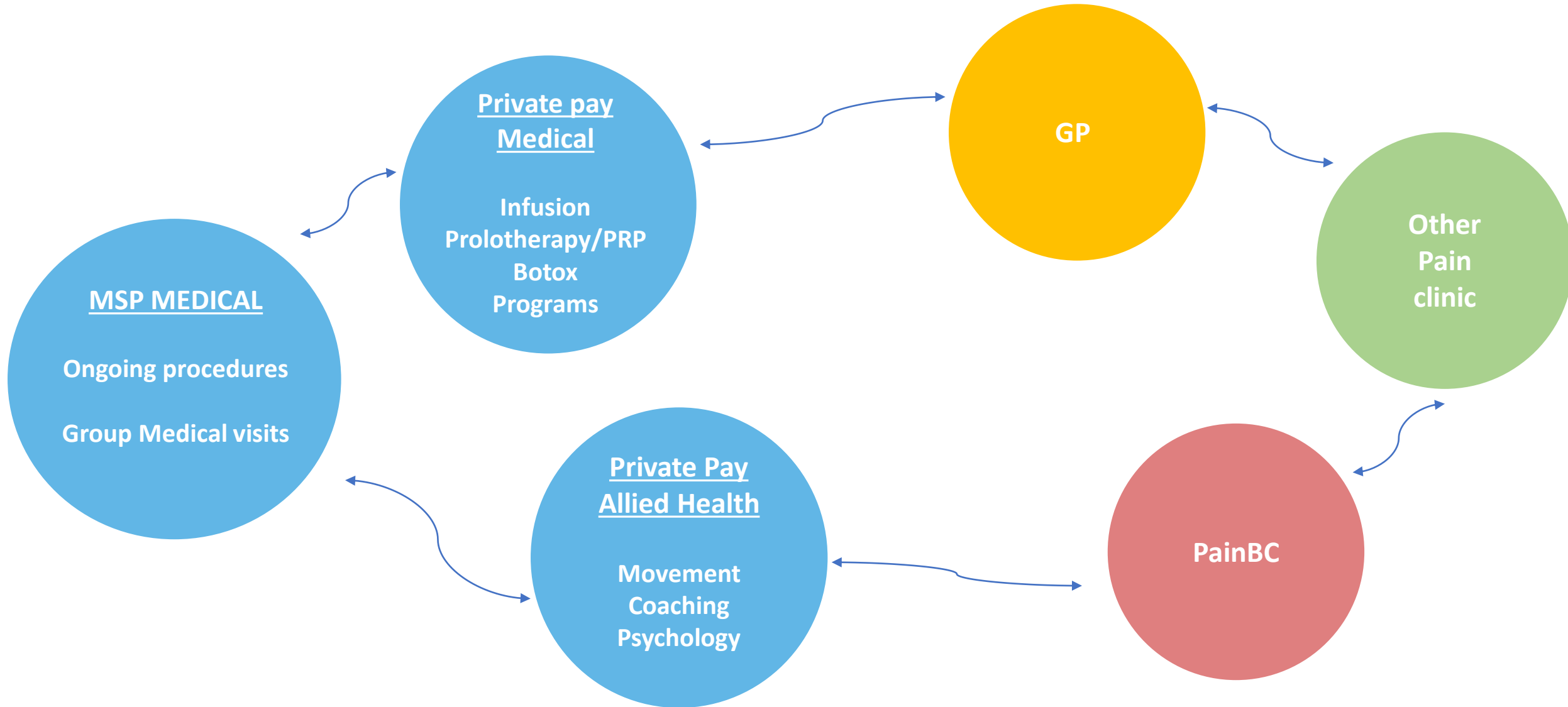
GROUP MEDICAL VISIT	PAIN	MENTAL HEALTH	PHYSICAL ACTIVITY	NUTRITION	SLEEP	Unique Group
GMV « Empowering Series: Pain Neuroscience»	✓	✓		✓	✓	
GMV «Veterans Helping Veterans»	✓	✓		✓		
GMV «Morning Stretch and Activation»	✓	✓	✓			✓
GMV «Introduction, Tissue healing, Active Rehab & Injury Prevention »	✓	✓	✓			
GMV «Neck Pain and Headache»	✓		✓			
GMV «Shoulder and Arms»	✓		✓			
GMV «Hip, Knee and Legs»	✓		✓			
GMV «Low back, trunk and core»	✓		✓			
GMV «Balance and Fall Prevention »	✓		✓			
GMV «YIN Yoga »	✓	✓	✓			
GMV «Restorative Yoga»	✓	✓	✓		✓	
GMV «Yoga for Beginners»	✓	✓	✓			
GMV «Hatha Yoga»	✓	✓	✓			
GMV «Kundalini Yoga»	✓		✓			
GMV «Hatha Flow Yoga»	✓		✓			
GMV «Relaxation»	✓	✓			✓	
GMV «Central Sensitivity/Widespread»	✓	✓			✓	
GMV «Sleep»	✓	✓			✓	
GMV «Surgical Patients Optimazation Series»	✓	✓	✓	✓	✓	✓
GMV «Staying Healthy »	✓	✓	✓	✓	✓	
GMV «Somatic Therapy»	✓		✓			

SPOC (Surgical Patient Optimization)



- Optimization before surgery
- UBC study: July to December 2021
- Post-op early recovery and pain/physical therapy management
- Consults
- SPOC GMV
- Coordinated MSP care
- Add private pay procedures and allied health

What Services are available?



CHANGEpain's 2021 changes

- Types of pain experienced by Parkinson's patients
- What's the typical CHANGEpain patient journey and why?
- How to make the most of our services including optimizing self-management?
- Services outside of CHANGEpain

Other Services

R-Transcranial Magnetic
Stimulation (li 2020)

Burst spinal cord stimulation
(Furusawa 2020)

Microglia and gut microbiota
(Joers 2020)

Contact Us Online

The best way to contact us is through this online form. Online response will be faster than phone call.

Name *

First Name

Last Name

Preferred Phone Number *

Email Address *

Services You are Reaching Out for? *

Area of Service you are reaching out for? *

Reason for Reaching Out

Message *

SUBMIT

BOOK ONLINE

CHANGE PAIN



QUESTIONS?