PARKINSON'S DISEASE

Parkinson's disease and falls: freezing, falling backward, and what helps

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Parkinson's disease raises fall risk in ways that are different from ordinary aging. About 25% of people fall in the first year after diagnosis. The good news is that the right exercise, a few movement tricks, and a home set up for the way Parkinson's moves can make a real difference.

Why Parkinson's makes falls more likely

Parkinson's changes how the body starts, stops, and turns. Several things can stack up at once:

- **Slow, small movements** (called bradykinesia), so steps get shorter and feet barely clear the floor.
- **Freezing**, when the feet feel glued to the floor, often in doorways, tight spaces, or when turning.
- **Festination**, when steps speed up and get shorter, as if you are chasing your balance.
- **Falling backward** (called retropulsion).
- **Less rotation** of the eyes, trunk, and pelvis, which makes turning harder.
- **Blood pressure drops when standing** (orthostatic hypotension), which can cause dizziness.
- **Trouble doing two things at once**, like walking while talking or carrying something.

Call your doctor or therapist if you have fallen in the past year, frozen in the past month, or noticed slower walking.

When your feet freeze: the 5 S method

When you feel stuck or lose your balance in place, practice this routine:

1. **Stop.** Don't try to push through.
2. **Stand tall.**
3. **Shake it off.** Relax your shoulders and arms.
4. **Shift your weight** from one foot to the other.
5. **Step forward** with a big, deliberate step.

Cues from outside the body can also help break a freeze. Laser lines and sound cues are used for freezing, and some stabilizing walkers, such as the U-Step 2, build in laser and sound cueing. A therapist can help you decide whether a cueing device fits your needs.

Fighting the pull backward

Because Parkinson's tends to tip people backward, therapists teach forward weight-shift strategies. Examples include:

- **Reach forward for a ball** (or an imaginary target) when you stand still.
- **Lead with your hips** when you sit down, rather than dropping straight back.
- **Use a staggered stance**, one foot slightly ahead of the other, for a wider and steadier base.

At home, notice where you step backward, such as backing up to a chair or stepping out of the shower. Grab bars and firm chairs with armrests help.

Exercise is the best medicine for balance

The World Guidelines for Falls Prevention give exercise with balance and resistance training their strongest rating for people in the early to middle stages of Parkinson's. In more complex stages, exercise should be supervised. Programs used in Parkinson's care include:

- **LSVT BIG**, delivered by certified clinicians. LSVT Global explains how to find one near you.
- **PWR!** exercise.
- **Rock Steady Boxing.**

Good programs practice turning the trunk, head, and eyes, since rotation is lost early. Search for a therapist near you on ChoosePT.

Medicines and timing

Some Parkinson's medicines can cause extra movements (dyskinesia) or lower blood pressure, so your neurologist should review timing and side effects as part of any fall plan. Never change a dose or schedule on your own; talk with your neurologist or pharmacist first.

If you get lightheaded when you stand, try staged rising: pump your ankles about 20 times, sit at the edge of the bed, then stand and keep your feet moving before you walk. Drinking enough fluid also matters in the Florida heat; a common goal is at least 48 ounces a day, unless your doctor limits fluids.

Home setup that fits Parkinson's

- Clear wide paths and remove throw rugs, since shuffling feet catch edges easily.
- Mark thresholds and step edges with contrasting tape so they are easy to see.
- Light the route from bed to bathroom with motion sensor lights.
- Install grab bars by the toilet and in and out of the shower, anchored into studs.
- Choose firm chairs with armrests and a bed at a height where your feet rest flat.

- Watch lanai sliding door tracks and other small thresholds, which are easy to catch with a short step.

Support and information

The Parkinson's Foundation runs a free helpline at 1-800-4PD-INFO (1-800-473-4636). You can reach it through the Parkinson's Foundation helpline page. The Foundation also offers a fall prevention sheet (PDF) that explains causes and strategies.

How Home Safety Solutions can help

A Parkinson's home visit looks at the exact places where freezing and backward falls happen in your home: doorways, turns, the shower, the bed, and the chair you use most. We test your balance and walking, then rank fixes from free layout changes to grab bars and equipment, and share findings with your neurologist and therapist. Learn more about what happens during a home safety visit. Call (813) 365-9171 or email info@homesafety.solutions.

Related reading: How do I prevent falls at night? · Is a lanai sliding door a fall risk? · Parkinson's Foundation helpline · Is it normal to fall as you get older?

This article is general education, not medical advice. Talk with your doctor, pharmacist, or therapist about your own situation.

Want a plan for your own home?
Every service starts with an Initial Consultation, a 30-minute phone call with Dr. L'HommeDieu.
Book at homesafety.solutions