

## Parkinson's disease overview

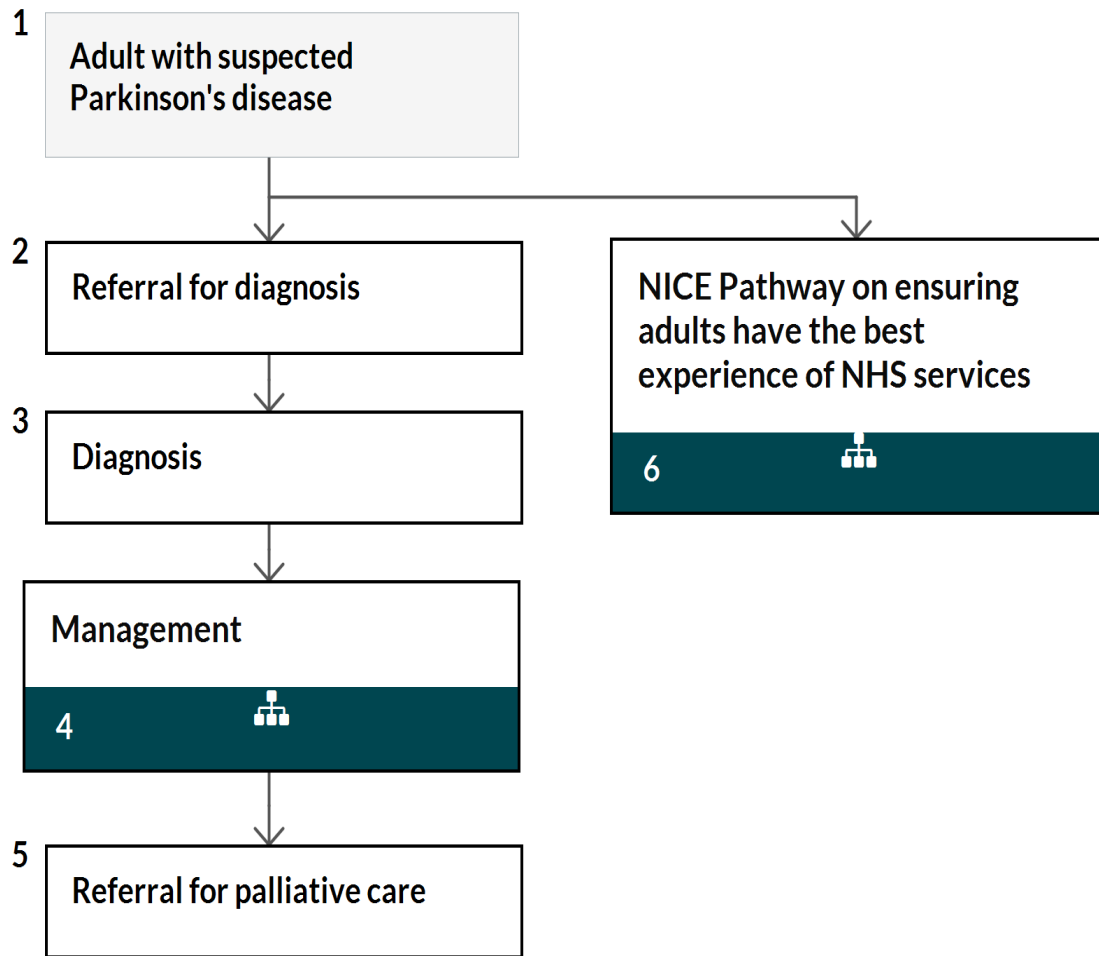
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/parkinsons-disease>

NICE Pathway last updated: 09 December 2020

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Adult with suspected Parkinson's disease

No additional information

## 2 Referral for diagnosis

Suspect Parkinson's disease in people presenting with tremor, stiffness, slowness, balance problems and/or gait disorders.

If Parkinson's disease is suspected, refer people quickly and untreated to a specialist with expertise in the differential diagnosis of this condition.

## 3 Diagnosis

### Clinical diagnosis and review

Diagnose Parkinson's disease clinically, based on the UK Parkinson's Disease Society Brain Bank Clinical Diagnostic Criteria.

Review the diagnosis of Parkinson's disease regularly, and reconsider it if atypical clinical features develop. (People diagnosed with Parkinson's disease should be seen at regular intervals of 6 to 12 months to review their diagnosis.)

### Single photon emission computed tomography

Consider  $^{123}\text{I}$ -FP-CIT SPECT for people with tremor if essential tremor cannot be clinically differentiated from parkinsonism.

$^{123}\text{I}$ -FP-CIT SPECT should be available to specialists with expertise in its use and interpretation.

### Structural MRI

Do not use structural MRI to diagnose Parkinson's disease.

Structural MRI may be considered in the differential diagnosis of other parkinsonian syndromes.

## Tests not to use in differential diagnosis

Do not use PET in the differential diagnosis of parkinsonian syndromes, except in the context of clinical trials.

Do not use magnetic resonance volumetry for the differential diagnosis of parkinsonian syndromes, except in the context of clinical trials.

Do not use magnetic resonance spectroscopy in the differential diagnosis of parkinsonian syndromes.

Do not use acute levodopa and apomorphine challenge tests in the differential diagnosis of parkinsonian syndromes.

Do not use objective smell testing in the differential diagnosis of parkinsonian syndromes, except in the context of clinical trials.

## Discussion about use of tissue post-mortem for diagnostic confirmation and research

Encourage healthcare professionals to discuss with people with Parkinson's disease the possibility of donating tissue to a brain bank for diagnostic confirmation and research.

## 4 Management

[See Parkinson's disease / Managing Parkinson's disease](#)

## 5 Referral for palliative care

Consider referring people at any stage of Parkinson's disease to the palliative care team to give them and their family members or carers (as appropriate) the opportunity to discuss palliative care and care at the end of life.

See [NICE's recommendations on caring for an adult at the end of life](#) and the [NICE quality standard on end of life care for adults](#).

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**6 NICE Pathway on ensuring adults have the best experience of NHS services**

[See Patient experience in adult NHS services](#)

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## Glossary

### PET

positron emission tomography

### SPECT

single photon emission computed tomography

## Sources

[Parkinson's disease in adults](#) (2017) NICE guideline NG71

## Your responsibility

### Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should [assess and reduce the environmental impact of implementing NICE recommendations](#) wherever possible.

## Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

## Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.