

SKIN CHANGES IN PARKINSON'S DISEASE

Some people with Parkinson's disease experience changes in their skin, mainly in how much or how little they sweat, excessive oiliness and increased irritation. Changes of this nature can cause considerable discomfort and even embarrassment for the person with Parkinson's.

Sweating

Parkinson's disease can present two different problems related to sweating: hyperhidrosis (excessive sweating) and hypohidrosis (inadequate sweating).

Hyperhidrosis can be caused by changes in the autonomic nervous system (ANS) associated with Parkinson's disease. The ANS controls sweating and many other processes within the body and people with Parkinson's often experience a decreased ability to naturally regulate some of these processes, including sweating.

Consider some of the following strategies for managing hyperhidrosis:

- Use a topical antiperspirant containing aluminum chloride rather than just a deodorant.
- Avoid tight-fitting clothing made of synthetic materials (such as polyester, silk or nylon).
- Avoid using bedding that is made of synthetic materials.
- Wear cotton clothing or clothing that wicks moisture away (several athletic and travel clothing companies have good options).
- Avoid situations, drinks or food that trigger sweating (e.g. crowded rooms, caffeine, spicy foods, alcohol – monitor what is a trigger for you).
- · Go barefoot when possible.
- Drink plenty of water and fluids to maintain hydration.

Hypohidrosis can also be caused by changes in the ANS, but most typically occurs when the person is on an "off" period, described as a time when Parkinson's medications are wearing off or not working optimally. It can also occur during an "on" period if the person experiences dyskinesia (the uncontrolled wave-like movement of the upper body). For some, it can also be a side effect of anticholinergic medications, such as amantadine. If you are taking this kind of medication and you experience inadequate sweating, you may want to speak to your doctor. Reduced ability to sweat may put you at risk of over-heating.

Skin Protection

People with Parkinson's have an increased risk of developing melanoma, a type of skin cancer linked to sun exposure. The person with Parkinson's may also have more difficulty changing position, which can result in skin breakdown. Consider these recommendations to protect the skin:

- Avoid hot, mid-day sun and seek shade when outside. Make sure to wear sunscreen, hats and sunglasses.
- Change position every two hours. If you are in a wheelchair, get a cushion to lessen the risk of pressure sores. See an occupational or rehab therapist to make sure the right cushions are used.
- Check skin regularly for redness, blisters, and open sores. Report any changes promptly to a member of your healthcare team.
- Avoid skin contact with plastic coating and tapes from incontinence products; these can irritate the skin.
- Use lotion to prevent dryness.
- Consider an egg-crate or alternating pressure mattress pad to reduce pressure points.



Oily Skin

People with Parkinson's may produce more oil (known as sebum) from their glands, especially in the face and scalp. This condition, which causes the skin to become greasy and shiny, is referred to as seborrhoea. Consider these strategies for managing seborrhea:

- Try to avoid any products, such as shaving creams, soaps or cosmetics that contain alcohol as they
 can irritate the skin.
- Try using a gentle cleanser and water, mild soap or an oil-free soap substitute.
- It might be helpful to ask your doctor, neurologist, or dermatologist for some product suggestions.

Seborrheic Dermatitis

People with Parkinson's disease are at an increased risk for developing this condition, also referred to as dandruff, which can cause red, itchy and sore skin or scalp rashes. The main areas affected include the face, scalp, ears, chest and folds of skin. This condition can be long-lasting and uncomfortable, and while there is no cure for it there are treatments options. Dandruff can be treated with the strategies below.

For the scalp and beard:

- Bathe or shower daily using a medicated shampoo containing coal tar or salicylic acid (e.g. dandruff shampoos like Head and Shoulders or Selsun Blue), or tea tree oil products.
- Rubbing oil on the scalp and over any crusts or scales before shampooing can be helpful.
- For severe itching of the scalp, ask your doctor about prescription steroid-based ointments.

For the face and body:

- A mild steroid cream can be used to reduce inflammation and pain.
- For eyelids, special products are available at drugstores (e.g. Lid-Care Towelettes).
- Soak cotton pads in water and tea tree oil for an anti-bacterial treatment.
- Medicated ear drops can be used for ears.

Sources

Parkinson's Disease Foundation. Skin Changes. Retrieved from www.pdf.org/en/skin_changes_parkinson

Hyperhidrosis Management. Retrieved from www.sweatless.ca

The International Hyperhidrosis Society. Retrieved from www.sweathelp.org