

THE IMPORTANCE OF BALNEO-PHYSICAL-KINETIC TREATMENT IN THE RECOVERY OF PARKINSON'S DISEASE

GACHI Cristina-Mădălina ¹, IONESCU Elena-Valentina ^{2,3}, STANCIU Liliana-Elena ^{2,3},
ILIESCU Mădălina-Gabriela ^{2,3}, OPREA Carmen ^{2,3}, OPREA Doinița ^{2,3}

Editor: Constantin MUNTEANU, E-mail: office@bioclima.ro

Balneo and PRM Research Journal

DOI: <http://dx.doi.org/10.12680/balneo.2021.452>

Vol.12, No.3 September 2021

p: L113

Corresponding author: **OPREA Doinița**, E-mail: doi_opr@yahoo.com

1. Emergency County Clinical Hospital "St. Apostle Andrei" Constanța, Romania
2. Balneal and Rehabilitation Sanatorium Techirghiol, Romania
3. Faculty of General Medicine, University 'Ovidius' from Constanța, Romania

Abstract

Introduction. Parkinson's disease is a chronic, progressive neurodegenerative disease with incompletely elucidated etiology and a significant negative impact on the quality of life of patients and their relatives. The characteristic pathological element is the loss of dopaminergic neurons from the substantia nigra. Parkinson's syndrome is dominated by three major symptoms - tremor of rest, muscle stiffness and akinesia. Forms of predominantly tremorigenic disease are described, with more benign evolution and predominantly rigid-acinetic forms, with rapidly disabling evolution.

Material and Methods. Presentation of the clinical evolution of a 67-year-old patient, non-smoker, former construction engineer, without significant hereditary history, known for Parkinson's Disease with the onset of symptoms in 2016, who was admitted to our unit for mechanical pain in the cervical spine -dorso-lumbar, myalgias in the thighs and distal paresthesias in the lower limbs. The patient, known with multiple comorbidities - Type II diabetes mellitus with diabetic neuropathy, post-stroke sequelae, Paroxysmal atrial fibrillation, Essential hypertension, Ischemic heart disease, Operated cervical neoplasm and radiotherapy was evaluated clinically, paraclinically and psychologically for st marked with which he presented at the hospitalization.

The particularity of the case consists in the weak response to antidopaminergic medication, the presence of choreic movements, which are maintained in clinostatism, orthostatism and gait and improve for a short time, about an hour in the presence of antiparkinsonian treatment, administered in small doses, split several doses. The differential diagnosis of Parkinson's disease is made with progressive supranuclear palsy, multisystem atrophy, dementia with Lewy bodies, Huntington's disease, Parkinson's syndromes caused by inflammatory, vascular, traumatic, tumor, drug, toxic etiologies. The prescribed therapeutic scheme aims at the proposed objectives for recovery and consists of hydrokinetic therapy, sedative massage, lymphatic drainage, low frequency and high frequency currents, physical therapy, Walker View, Nirvana.

Results. The benefits obtained by the recovery treatment were observed at discharge, they consist in the improvement of pain symptoms, postural instability, increased coordination and balance, muscle strength, improved gait and mental state.

Conclusions. The goals of recovery treatment were achieved, with significant improvements in the patient's health. Continuous multidisciplinary collaboration between the family doctor, the doctor of physical and rehabilitation medicine, the neurologist, cardiologist, and patient compliance are essential to delay the evolution of the disease, improve symptoms and increase quality of life. This team also includes the patient's family with a role in physical and psycho-emotional support.