The ability to move around and stay active is important for people with Parkinson’s disease (PD), from diagnosis throughout the course of the disease. The role of physical therapy is to help you keep moving as well and as long as possible, while enhancing the ability to move. Recent research suggests that physical therapy — including gait and balance training, resistance training and regular exercise — may help improve or hold the symptoms of PD at bay.

When and Why to Find a Physical Therapist

Physical therapists can be helpful at all stages of PD. Movement impairments in the initial stages of the disease are not always obvious. By not engaging a physical therapist with a neurological specialization as part of their medical team, people with Parkinson’s often miss the window of opportunity to address these impairments early. Talk to your doctor about getting a baseline physical therapy evaluation and then continue with periodic re-evaluations.

According to the Parkinson’s Outcomes Project, the largest clinical study of Parkinson’s disease through our Centers of Excellence network, increasing physical activity to at least 2.5 hours a week can slow decline in quality of life. The Parkinson’s Foundation has identified specific care approaches associated with better outcomes across patients who seek expert care at our designated care centers. Among others, best practices include early referral to physical therapy and encouragement of exercise as part of treatment.

A physical therapist is uniquely trained to design an exercise routine that targets specific motor impairments. Physical therapists also have an opportunity to provide frequent, direct feedback to help make you aware of how to exercise most effectively and safely.

A physical therapist can provide:
- Education and self-management advice.
- Exercise routines that have been associated with improvements (or slower declines) in mobility, quality of life and disease severity.
- Answers to questions about the type, intensity, frequency or duration of exercise that is best for you.
- Ways to maintain safety when exercising.
- Help with:
  - Normal physical activity routine
  - Walking: slowness, small steps, or freezing (feeling glued to the floor or difficulty getting started)
  - Balance or stability
  - Posture
  - Pain
  - Moving around the house (getting up from a chair, moving around in bed)
  - Getting around (in/out of a car or bus, elevators, stairs and uneven ground)
  - Address fear of falling, have fallen or are worried about your safety.
  - Other health problems that affect mobility, including joint or muscle pain from arthritis, problems with endurance due to a heart or lung condition, a broken bone or surgery.
Setting Movement Goals with your Therapist

Every client works with their physical therapist to set individualized movement goals. Physical therapists can help you optimize your exercise routine based on the latest research, re-learn challenging tasks or stay safe and independent in the home. Some of the most common movement goals for people with Parkinson’s include:

- Learning about exercises
- Improving walking, balance or posture
- Addressing fall risk
- Treating pain

Before your first visit, think about your movement goals and write down your problems and questions. This will help you to organize your thoughts. You can do this for future visits, too.

Medicare and the “Therapy Cap” Removal

Historically, Medicare has limited the amount of physical, occupational and speech therapy a beneficiary could receive in a given year. In some years, Congress created an exceptions process that allowed individuals to access therapy above the cap if the services were deemed medically necessary, but this process needed to be renewed by lawmakers every few years, creating uncertainty and the potential for coverage denials.

The Parkinson’s Foundation has worked with the PD community to address Medicare challenges related to services such as physical therapy, occupational therapy and speech-language therapy since 2011, including advocacy in 2014 to remove the Improvement Standard, which meant that people with Parkinson’s could no longer be denied coverage for therapy solely for lack of improvement. In February of 2018, this exceptions process was made permanent, meaning people on Medicare can no longer be denied therapy if they need it to manage their health conditions.

How to Find Your Expert Physical Therapist for Parkinson’s Disease

It is important to find a physical therapist who has specialty training and experience working with PD. You may find experienced physical therapists working in hospital outpatient departments, home health agencies, nursing homes or within the community close to your home. Ask your neurologist for a referral at your next appointment.

The Parkinson’s Foundation Helpline at 1-800-4PD-INFO (473-4636) can help you locate an experienced physical therapist near you who is trained to work with people with PD, and provide questions to ask a potential physical therapist to assess their experience.

Training Future Physical Therapists in Parkinson’s Disease

Did you know the Parkinson’s Foundation is working to better educate physical therapy students across the country to ensure better PD care for everyone?

The Parkinson’s Foundation Physical Therapy Faculty Program is improving Parkinson’s physical therapy care by training faculty leaders across the U.S. so they can, in turn, educate physical therapy students. The intensive course allows physical therapy educators to immerse themselves in learning the latest evidence-based findings in Parkinson’s research and care. Physical therapy educators can make a great impact on the lives of people with PD by bringing this knowledge back to their students, our future practitioners.