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Loss of autonomic postural reflexes, gait abnormalities and “freezing walk” in severe Parkinson’s disease patients contributes to falls and hip fractures

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Purpose: The aim of this presentation is to shed light and to try to identify the underlying causes of and circumstances surrounding the fall and hip fractures in Parkinson’s disease (PD) patients, in order to find prevention strategies and choose appropriate therapy.

Methods: We have analyzed, discussed and overviewed the latest updates of the medical literature concerning PD and the orthopedic complications.

Conclusions: PD is a chronic neurodegenerative disorder characterized by rest tremor, rigidity, bradykinesia and loss of postural reflexes, leading to immobility and gait disturbance. The usual age of onset is between the sixth and eighth decades. Globally, the percentage of elderly aged 65 years and over was calculated to be 8 percent (521 million) in 2011 and it is expected to be 11 percent (939 million) of the total global population by 2030. Hip fractures are life-threatening and frustrated quandary that is usually seen among elderly people that requires high economic expenses. Plethora of factors contributes to falls and to increased risk of hip fractures in patients with PD. These factors include potential physiological aging changes and medical causes. One should try to identify the underlying causes of and circumstances surrounding the fall and hip fractures in PD patients specifically, in order to find prevention strategies and choose appropriate therapy by taking a multidisciplinary approach intervention that include neurologist, physiatrist, podiatrist, and family caregivers the thing that will result in optimal outcomes for patients with PD.

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