



Q: My husband has Parkinson's disease and seems depressed. What should I do?



Dr. Christopher Goetz is a professor of Neurological Sciences and a professor of Pharmacology at Rush University Medical Center in Chicago.

A: Dr. Christopher Goetz advises:

Too often, people with PD are assumed to be depressed because they show some of the major symptoms of depression — slowness, lack of initiative, excessive sleeping, appetite loss and social withdrawal. But these are also symptoms of PD. The one difference is sadness. People who have PD are not necessarily sad, so if your husband is feeling sad, that may be a tip-off that he is depressed.

Ask your husband's neurologist to arrange for a diagnostic evaluation for depression. Neurologists or neuropsychologists perform these tests. If he is depressed, counseling therapy or medications may be considered.

'Too often, people with PD are assumed to be depressed because they show some major symptoms of depression . . . but these are also symptoms of PD.'

If it is erroneously assumed that PD is causing his symptoms, and he is put on a higher dosage of PD medication, his depression is not going to lift. On the other hand, people with PD who are depressed do respond to antidepressants. There are many from which to choose. The treatment should be tailored to your husband, who should then be closely monitored to ensure the medication is effective.

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Do you have a question for "Ask the Experts"? Send it to: neurologynow@lwwny.com

Q: I developed shingles several months ago. The rash is gone, but I still have a lot of pain. What can be done about it?

A: Dr. Donald Gilden advises:



Donald H. Gilden, M.D., is a professor and chairman of the Neurology department at the University of Colorado Health Sciences Center in Denver.

Shingles (also called herpes zoster) causes a rash and pain. These symptoms usually occur in an area that corresponds to the region served by one or more nerve roots. The nerve cells that make up the nerve root become infected with the virus herpes zoster. The rash often disappears in about one week and the pain lasts four to eight weeks on average. Pain that continues beyond three months is called postherpetic neuralgia (PHN). Besides pain, people with shingles also experience allodynia, an extreme sensitivity to light touch over the skin.

'Since everyone responds differently to medication [for shingles], it may take a trial-and-error approach to find the best solution.'

PHN is a difficult problem to treat because there is no single medication that — like a magic bullet — makes it disappear. But several medications provide relief. Antiseizure medications, such as carbamazepine (Tegretol, Carbatrol) and gabapentin (Neurontin) have proven effective, as have antidepressants such as nor-



triptyline (Pamelor, Aventyl) and amitriptyline (Elavil, Endep). These drugs may be used in combination with extra-strength Tylenol or a narcotic, such as codeine. Research is underway to determine if PHN occurs because there is still a low-level herpes zoster infection in the nerve cells of the affected nerve root. Hopefully, these findings will lead to new treatments.

Discuss your problem with your neurologist. Since everyone responds differently to medication, it may take a trial-and-error approach to find the best solution for your pain. NN

other hand, 30,000 people die from the flu each year. But flu is a recoverable illness, so we're less concerned about that.

Do I eat beef? Sure. The beef industry has improved its guidelines to keep high-risk materials out of the food chain, and other potentially unsafe practices have been stopped. Mad cow is a scary disease, but you have to be rational about it. NN

Q: I've been reading a lot of news about mad cow disease. Is it safe to eat beef?



Dr. Richard T. Johnson is a professor of Neurology at Johns Hopkins School of Medicine.

A: Dr. Richard T. Johnson advises:

You need to put the risks in perspective. Five thousand people die of food-related diseases each year in the U.S. and none of those are related to mad cow disease. People die from eating contaminated strawberries, from eating hamburgers contaminated with Escherichia coli (E. coli) or chicken contaminated with salmonella bacteria, or from eating potato salad that's been left sitting at room temperature for too long.

'Do I eat beef? Sure. The beef industry has improved its guidelines to keep high-risk materials out of the food chain ...'

The concern over mad cow disease is disproportional to the actual risk. People are worried about eating beef because mad cow disease causes a variant of Creutzfeldt-Jakob disease, which is fatal. But this variant has never been transmitted in the U.S. On the



Parkinson's Disease and Depression

National Institute of Neurological Disorders and Stroke

www.ninds.nih.gov

Click on "Parkinson's Disease" and scroll down to "Summary: Diagnosis of Depression in Parkinson's Disease."

These organizations have information on PD and depression posted on their Web sites:

Michael J. Fox Foundation for Parkinson's Research

www.michaeljfox.org

National Parkinson Foundation

www.parkinson.org

Parkinson's Disease Foundation

www.pdf.org

WE MOVE (Worldwide Education & Awareness for Movement Disorders)

www.wemove.org

Postherpetic Neuralgia

The American Academy of Neurology has practice guidelines on the treatment of postherpetic neuralgia. Visit www.aan.com, click on "practice guidelines" and scroll down to the guidelines.

Creutzfeldt-Jakob Disease

National Institute of Neurological Disorders and Stroke

www.ninds.nih.gov/disorders/cjd/cjd.htm

Creutzfeldt-Jakob Disease Foundation Inc.

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