St. John's Wort and Parkinson's disease

For centuries, St. John's Wort (SJW) has been used to treat mild depression. Today, in Germany, it is prescribed more often than Prozac. Varro Tyler, Ph.D., a noted specialist in the medicinal use of herbs, writes that SJW has been used since the time of Hippocrates, and that its antidepressant effects are linked to substances that act as monoamine oxidase inhibitors ("The Honest Herbal," 1993). One of the drugs used to treat Parkinson’s disease, Eldepryl (selegeline) is also a monoamine oxidase inhibitor, so it would appear that SJW would be fine for people with PD to use, and, anecdotally, some people with PD report taking SJW with no ill effects.

However, you should do so only after talking with your physician. There are some possible concerns:

- a compound in SJW, hypericin, can induce dermatitis with exposure to sunlight
- possible side effects upon initiation of SJW include agitation, confusion, and tremors
- a few persons have reported mild gastrointestinal distress, dry mouth, dizziness, and itching
- SJW combined with selegiline could lead to sweating, restlessness, agitation, confusion, behavior change
- SJW contains a component, quercitin, that could be toxic or cancer-causing taken in large quantities
- safety during long-term use has not been determined
- SJW should not be used to treat major depression.

Possible interactions between SJW and a number of medications, including levodopa, are currently being investigated (Herb-Drug Interaction Handbook, 2000).

If your doctor agrees that SJW is safe for you to try, the usual dose is 300mg three times a day. Effects are seen after about three weeks

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How old are your medications?

There are often many medicines in the households of people with Parkinson's, and keeping track of them can be extra-important.

Check the expiration date on the package.

Contents are good until that date – as long as the container is unopened!

When you open a new medicine, write the date on the container. Most medicines have a useful life of about 12 months. After that time, they should be thrown out.

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A HEALTHY MOUTH AND TEETH

Clean teeth and gums are important, and so is a normal flow of saliva. People with Parkinson’s sometimes have "xerostomia" or dry mouth, due the PD medications, or to mouth breathing. Also, some have difficulty brushing and flossing their teeth.

Dry mouth can lead to a type of cavity that can’t be filled – the tooth must be pulled. Dryness can also cause mouth infections. Difficulty brushing and flossing can increase the likelihood of cavities and periodontal disease. Tooth loss, mouth infections, and dry mouth make it harder to chew and moisten food properly and over a period of time can lead to malnutrition.

If you have dry mouth, sip water frequently, or chew sugarless gum to stimulate saliva flow. Also, talk with your dentist, who may recommend an artificial saliva or other means of keeping the mouth moist, and may suggest fluoride treatment. You can also ask to have your teeth cleaned more frequently – every 3 or 4 months – to keep your teeth and gums healthy.

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Fatigue-fighting tips

If you often hit a midday slump, try these food tips. For some people with Parkinson's, they can make a big difference in energy level.

Breakfast: make it a small meal, high in complex carbohydrates, low in sugar and fats. Example: oatmeal or other whole-grain cereal, skim or 1% fat milk. You need fuel, but sugar (sugary cereals, pancake syrup) is quickly used up, leaving you feeling tired. Fats (bacon, sausage) take a long time to digest, and can make you feel sluggish or sleepy. The protein in the milk, combined with the complex carbohydrates in the cereal, will digest more slowly than sugar, faster than fats, and your energy will last longer.

Limit coffee to one or two cups a day. Caffeine can be an energy roller coaster, leaving you feeling tired when it wears off.

Lunch: include some protein, and keep the meal light. Large meals take a long time to digest and can make you drowsy. A high-carbohydrate meal can raise the serotonin level in the brain, leaving you relaxed and sleepy. But protein makes you feel more alert (unless you swamp it with carbohydrates). Try a three-bean salad or half a chicken sandwich with a glass of milk.

Eat light snacks between meals. This will keep your blood sugar level steady all day, without making you feel full or drowsy. Good choices: a piece of fruit, two tablespoons of raw mixed nuts, a half-ounce of cheese on a whole-wheat cracker.

Drink plenty of water – whether you feel thirsty or not. The feeling of thirst lags behind the body’s actual need for water, and even mild dehydration can cause fatigue, confusion, and back pain.

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Q: My wife, age 68, has Parkinson’s, and the doctor prescribed an antidepressant last year. Her depression has improved. But she says she’s never hungry any more, and she has lost about 15 pounds. Should I be concerned?

A: Yes! Older adults who begin using antidepressants can lose their appetite, eat less food, and become malnourished. However, there are many different antidepressants available, and some work better for people with PD. If your wife is not seeing a neurologist who is a movement disorder specialist for her Parkinson’s that would be the single best thing you can do for her. An MDS is much more experienced in PD and will be best able to choose an antidepressant that is suitable for your wife.

With regard to the weight loss she has already experienced, she has likely lost some muscle mass. Maintaining muscle is especially important with PD, because the leg muscles must remain strong for proper gait and balance. Perhaps your wife would be willing to eat several small snacks throughout the day, along with three small meals. Her total calorie intake should then increase, while not making her feel forced to eat a large quantity at any time. Good for you for your alert thinking and concern!

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Protein, bones – and Parkinson’s

People with Parkinson’s often ask if they need to cut back on protein, in order to get better effects from their levodopa. Almost always, my answer is "no." Why? Most people get good results by taking levodopa about 30 minutes before meals, so that it reaches the bloodstream ahead of proteins in the food. Also, cutting back on protein without professional counseling has often meant that people with PD ended up in the hospital, with a type of malnutrition that result from protein starvation.

However, there’s another reason why you need to get enough protein. Along with calcium, it helps keep the bones strong. In a recent study,* people age 65 or older were divided into two groups. One group got supplements of calcium citrate; the other group did not get calcium supplements. After three years, those who had taken calcium supplements AND who ate the most protein had absorbed more calcium and had experienced the least bone loss. An expert on osteoporosis suggests that when both calcium and protein are present in sufficient amount in the diet, they act together. When there’s an excess of protein, and too little calcium, bone loss occurs.

What does this mean for people with Parkinson’s?

Bone thinning is more common among people with PD than among people the same age who don’t have PD. So it’s important to ensure that your bones stay strong and healthy. You don’t need to gorge on protein; but it’s not a good idea to cut back on protein without consulting a registered dietitian. And it’s probably a good idea to take calcium supplements if you’re age 50 or older.


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A Banana A Day..... for Parkinson’s Disease?

Most people know that a banana is a great source of potassium. However, not everyone knows that it’s also high in magnesium. Potassium and magnesium are involved in nerve-muscle interactions. Some people with dystonia (cramping of the muscles that occurs in PD) find that a banana a day helps to reduce dystonia.

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Cooked or raw – which is the best way to eat vegetables?

It’s pretty well accepted that fresh produce is bursting with vitamins and minerals, while canned or frozen vegetables and fruits have lost some of their nutrients. But is it better to eat them raw or cooked?

It’s true that the heat of cooking can destroy some of the heat-sensitive vitamins. Vitamin C, for instance, is partly lost in cooking – although a cooked potato still contains a large percentage of its original vitamin C. But researchers have also found that some nutrients only become available after foods are cooked. The lycopene from cooked tomatoes is greater than that of raw tomatoes. And the phenolic acid and beta-carotene of raw carrots is less than that of cooked carrots.

Should we only eat cooked produce, then? It’s probably best to eat some of each – a helping of coleslaw one day, cabbage soup another day; a raw apple today, applesauce next week; raw, juiced veggies one day, minestrone the next. That way, we get an abundance of all the nutrients.

It’s not what we eat in a single day; it’s what we eat over time that’s most important.

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The potassium-sodium balance

We need about 500 mg of sodium daily, and at least 2000 mg of potassium daily. In the western diet, however, processing of foods often strips away potassium, while adding sodium. It’s possible to get 8000 mg of sodium, and just 1000 mg of potassium in such a diet – upsetting the balance.

For example, one-half cup of fresh corn has 200 mg potassium, and 14 mg of sodium (about 14 times more potassium). One-half cup of canned cream-style corn has 365 mg sodium, with 170 mg potassium (about half as much potassium as sodium).

A cup of milk (about 100 calories) has 120 mg of sodium and 380 mg potassium. An ounce of cheese (about 100 calories) has 170 mg sodium and 28 mg potassium. Processed cheese has 400 mg sodium and 45 mg potassium.

Potassium is involved in muscle and nerve action, both very important in Parkinson’s disease. Be sure to get plenty of this important mineral daily. Almost all foods contain some potassium in the natural state – fruits, vegetables, dried beans, milk, meat, fish, and poultry. You don’t need to avoid processed foods entirely, just choose some unprocessed foods at each meal to get the potassium you need.

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