5

facts about physiotherapy and Huntington's disease



1

Huntington's disease is not just a hyperkinetic movement disorder

Symptoms of Huntington's disease (HD) include:

- irregular, involuntary hyperkinetic movements of the limbs, known as chorea
- bradykinesia, akinesia and dystonia
- hypokinesia and rigidity as the disease progresses
- cognitive, behavioural and psychiatric symptoms.



Gait training and respiratory management are vital for HD patients



Physiotherapists can:

- provide gait retraining as part of a holistic training program that includes balance and strength to improve walking speed
- work within a multidisciplinary team to optimise seating and postural management, particularly at mealtimes
- encourage good oral hygiene to reduce risk of chest infections
- train family/carers to manage choking incidents.

5

Physical and cognitive factors are associated with falls in HD

To reduce falls risk and manage falls, physios need to take into account:

- injury prevention strategies such as home set up, mobility aids, wearable protection and training family/carers
- potential difficulties in learning to safely use walking aids
- the impact of strategies on behavioural, cognitive and psychiatric symptoms.



Exercise can stabilise motor function in people with HD

Recommendations for safe, feasible and effective exercise include:

- prescribing moderate intensity aerobic exercise paired with upper and lower body strengthening
- considering potential barriers and what form of exercise will maximise engagement for the patient.

Assistive technology and mobility aid prescription for patients with HD should

Mobility aids and assistive technology that are individualised to the client's needs, goals and environment include:

 falls detection devices/alarms and reclining chairs

be considered carefully

- four-wheeled walkers to support clients with mid-stage HD
- HD-specific mobility aids including tilt-in-space manual wheelchairs and transfer devices.

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