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| **Title** | |
| van Rumund A, Weerkamp N, Tissingh G, Zuidema SU, Koopmans RT, Munneke M, et al. Perspectives on Parkinson disease care in Dutch nursing homes. J Am Med Dir Assoc. 2014;15(10):732-7. | |
| Agreement | 168/498 |
| **Agreed** | |
| Most residents and caregivers reported that PD-specific knowledge among health care workers was insufficient. The main complaints were that nurses did not understand (1) the resident’s daily fluctuations in PD symptoms and (2) the importance of timely administration of levodopa and avoiding (protein-rich) meals at the time of levodopa intake. Several participants declared that nursing home staff were often not aware of contraindications for specific drugs or investigations (eg, typical antipsychotics or magnetic resonance imaging in patients with deep brain stimulation). In addition, it was reported that nursing home physician specialists had difficulties with the complex drug management in PD.  Four residents and 2 caregivers were hesitant to pay regular visits to an outpatient clinic because of immobility and the limited consulting time  **Medication given too late**  *“Yes, here I’m always struggling to get my medication in time.” (Patient, female 79 years) QPwP*  **Medication combined with proteins**  *“They are not aware that it works like that, that medication and food can’t be taken at once.” (Patient, female 70 years) QPwP* | |