

# Health Reports, November 2014

Released at 8:30 a.m. Eastern time in *The Daily*, Wednesday, November 19, 2014

---

## Parkinson's disease: Prevalence, diagnosis and impact

In 2010/2011, an estimated 55,000 Canadians aged 18 or older living in private households reported that they had been diagnosed with Parkinson's disease. This represented 0.2% of the household population. As well, 12,500 (4.9%) of residents of long-term residential care facilities were reported to have a Parkinson's diagnosis.

Among the household population, 79% with Parkinson's were 65 or older; in institutions, almost everyone (97%) with the condition was 65 or older. Men were more likely than women to have Parkinson's disease: 0.3% versus 0.2% for those in private households, and 6.6% versus 4.0% for residents of institutions.

A number of people in the household population who had Parkinson's reported feeling embarrassed (43%), left out of things (29%), and that others were uncomfortable with them (28%) or avoided them (19%) because of the condition.

In the 12 months preceding the survey, 56% of people with Parkinson's disease who lived in private households received formal and/or informal assistance because of the condition. Among those who received assistance, 84% relied, at least in part, on family, friends or neighbours. This 'informal' assistance is distinguished from 'formal' assistance provided by organizations with paid or volunteer workers. The main informal caregiver was typically a woman (62%), lived in the same household (72%), and provided assistance on a daily basis (76%). For the most part, the recipient's spouse was the main informal caregiver (64%).

Parkinson's disease is the second most common neurodegenerative disorder after Alzheimer's disease. It results from the loss of cells in the brain that produce dopamine, a chemical that controls the body's movements. As dopamine decreases, tremors can develop, muscle movements become slower and more rigid, and reflexes become impaired. Other symptoms may include emotional changes, cognitive impairment, difficulty swallowing, chewing and speaking as well as fatigue. Although there is currently no cure, medications and other treatments are available to manage the symptoms.

### **Note to readers**

*This study is based on data from the 2010/2011 Canadian Community Health Survey: Annual Component, the 2011 Survey of Living with Neurological Conditions in Canada, and the 2011/2012 Survey of Neurological Conditions in Institutions in Canada.*

*Neurological conditions were self-reported by individuals (household) or by proxy respondents (institutions). For people in institutions, only prevalence data were available; therefore, most of the analyses concern the household population and do not represent residents of institutions.*



The study, "Parkinson's disease: Prevalence, diagnosis and impact," is now available in the November 2014 online issue of *Health Reports*, Vol. 25, no. 11 ([82-003-X](#)), from the *Browse by key resource* module of our website under *Publications*.

To enquire about the concepts, methods or data quality of this release, contact Suzy L. Wong (613-853-9336; [suzy.wong@statcan.gc.ca](mailto:suzy.wong@statcan.gc.ca)), Health Analysis Division.

This issue of *Health Reports* contains another article, "Adjusting relative survival estimates for cancer mortality in the general population."

To enquire about the concepts, methods or data quality of this release, contact Larry Ellison (613-851-3711; [larry.ellison@statcan.gc.ca](mailto:larry.ellison@statcan.gc.ca)). For information about *Health Reports*, contact Janice Felman (613-799-7746; [janice.felman@statcan.gc.ca](mailto:janice.felman@statcan.gc.ca)), Health Analysis Division.