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Sleep Disorders in Patients with Parkinson Disease and Its Correlation to Motor Symptoms Severity

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Abstract		
Background:		
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Method:		
Results:		
Conclusion:		
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for Neurosciences (NCNS), Bashayir teaching Hospital and Medani Teaching Hospital. Ethical Approval was obtained from the Ethical Committee at the Research Unit-Educational Development Centre (EDC), Sudan Medical Specialization Board (SMSB), and Acceptance from the Council of MD Clinical Neurology-SMSB and verbal informed consent from the patients. A total of 70 patients were enrolled in the e inclusion criteria were, patients with idiopathic Parkinson disease and age more than 18. Patients documented to have atypical Parkinsonism, severely ill or have poor communication were excluded. Data was collected using pre-designed Questionnaires were lled by the investigator (with history points taken from the patient through a personal interview and thorough neurological examination performed) including, evaluation of demographic and clinical characteristics, duration of the disease, medication history, motor status assessment using Hoehn and Yahr stage and nocturnal sleep impairment using PDSS-2 (Arabic version). Data was analyzed by computer using descriptive statistics mean and SD for age, frequency table's and charts e Taiwanese study [11] showed poor sleepers to have longer disease durations, higher levodopa equivalent daily doses (LEDs), higher PD severity, more depression and anxiety symptoms, poorer QoL, and more frequent unemployed status. In a similar context, Zhang, Y. et al. study [12] supported the previous two studies stating that sleep disorders were associated with longer disease duration and higher modi ed H&Y stage.

Conclusion

One-third of Parkinson's patients had signicant sleep disturbances and a signicant correlation of higher PDSS-2 with age and disease duration. However, it found no association with the severity of the motor symptoms.

Recommendations