

Sleep Behaviors and Parkinson's Disease: An Interpretative Phenomenological Analysis

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DESCRIPTION

Parkinson's disease is a condition in which a portion of our brain deteriorates over time, resulting in more severe symptoms. This disorder can have a wide range of other consequences on senses, thinking capacity, mental health, and more. It is best known for how it impairs muscular coordination, balance, and movement. The most prevalent type of Parkinsonism, known as idiopathic Parkinsonism. Parkinson's disease is a neurodegenerative condition classified as a synucleinopathy, and more particularly as an alpha-synucleinopathy (synucleinopathy), as a result of the accumulation and spread of the misfolded protein alpha-synuclein in the brain.

There are other related symptoms with other Parkinson-plus disorders, which can have comparable movement symptoms. These include synucleinopathies in some cases. In Lewy body dementia, there are motor symptoms along with early onset cognitive problems and hallucinations, which frequently (but not always) come before the motor symptoms. As an alternative, Multiple Systems Atrophy (MSA) typically manifests as early-onset autonomic dysfunction (such as orthostatic) and may be predominately caused by autonomic, cerebellar, or Parkinsonian symptoms.

Tau is involved in several Parkinson-plus disorders as opposed to alpha-synuclein. These include Cortico Basal Syndrome (CBS) and Progressive Supranuclear Palsy (PSP). Vertical gaze restriction, rigidity, early falls, bulbar symptoms, and PSP are its main characteristics. Front temporal dementia symptoms may also be present. Asymmetric Parkinsonism, dystonia, an alien limb, and myoclonic jerking are all components of CBS. Idiopathic Parkinson disease can contribute to the development of these related movement disorders through its distinctive presentation timings and accompanying symptoms.

Parkinson's disease and sleep are connected in complex ways that not even scientists completely understand quite yet. Parkinson's disease can occasionally be the direct cause of sleep issues. According to study, one of the first symptoms of Parkinson's disease may be sleep-related disorders.

There may be additional elements at play, such as Parkinson's disease medications and emotional difficulties. It is evident that many people with Parkinson's disease find it challenging to get a good night's sleep.

The relationship between Parkinson's disease and sleep is still being thoroughly studied.

According to ongoing study, Parkinson's disease may cause chemical changes in the brain that interfere with sleep-wake cycles. People with Parkinson's disease may experience less (and less peaceful) sleep due to changes to particular brain chemicals.

Meditation: Some sleep aids for Parkinson's disease patients may make it more difficult to get to sleep or stay asleep. Additionally, taking a drug that makes sleepy during the day can affect how we sleep (and wide awake at night).

Mental health: Anxiety and depression are common mood disorders experienced by people with Parkinson's. Any mood problem could keep we are awake at night or disrupt our sleep.

Parkinson's disease signs: Pain and waking up at night. Parkinson's symptoms can make restful sleep harder to come. Sleep apnea (common in later stages of Parkinson's) can also disrupt sleep.

Types of sleep problems

Every person is affected by Parkinson's disease differently. There are various ways to effects of sleep. People with Parkinson's may have:

- Insomnia, having trouble falling asleep.
- Fragmented sleep with many morning awakenings.
- Excessive drowsiness during the day, making it difficult to stay awake.
- Very intense nightmares that could leave our feelings. We disoriented or hallucinating when we are wake up.
- Emotional nightmares or dreams, which may leave our feelings emotionally spent when we are wake up.

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