

5th Pan American Parkinson's  
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Abstract 199

**Guided Poster Tour: Group Four**  
**Saturday, 10 February 2024**  
**13:00-14:30**

**Also presenting author will be at poster**  
**Friday, 9 February 2024, 13:00-14:30**

Abstract 199



**Importance of informal care partner participation  
in interventions for people living with Parkinson's disease**

Alexander  
Technique  
for Parkinson's  
an initiative of  
Poise Project

**Category:** Allied Healthcare, Physical Therapy, Rehabilitation, Quality of Life / Caregiver Burden

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**Objective:**

We previously reported benefits, post-course and at 6 months, of in-person and online adapted Alexander technique (AT) based group courses for people living with Parkinson's (PWP). Now we focus on two aspects of dyadic relationship between PWPs and care partners (CPs): 1) how inclusion of informal CPs facilitates course attendance and retention; and 2) how couple participation enhances dyadic relationships.

**Background:**

AT is a cognitive embodiment approach. Once learned, AT principles are applied moment-to-moment during daily life. We included CPs in AT-based in-person and online group courses for PWP.

**Methods:**

**Design:** CPs joined in-person and online AT-based group courses for PWPs. 7 groups (4 In-person; 3 Online) met 90-105 minutes, 2X/week, over 8 or 9 weeks. **Participants:** 35 PWP/CP dyads (34 married; 1 friend), and 6 PWP without CP. **Intervention:** Courses met in community spaces or in-home via Zoom. Coursework included functional anatomy and self-management skills taught via verbal instruction, demonstration, anatomical models and images, and partnered activities. AT principles were embedded in everyday activities: walking, talking, sit-to-stand transitions, and IADLs. Review handouts were shared. Participants were not paid. **Outcome Measures:** Functional reach, one-leg stance, TUG, 7-item Physical Performance Test, symptom-management self-report, anonymous course evaluations, and head-neck angles were previously reported. The present report focuses on course attendance and completion data, and semi-structured participant interviews.

**Results:**

**Overall Attendance was 83%.** When CP attended regularly, PWP also had better attendance. **Overall Completion was 80%.** Out of 35 dyads, 3 dropped out (2 due to illness), and 1 PWP with OCD dropped out, although her CP chose to complete the course. Thus, completion for PWPs with CPs was 89% while for 6 PWPs without CPs, 4 dropped out (33% completion rate). **Interviews:** Most dyad participants reported improved communication, enhanced patience, increased empathy, and greater understanding of the impacts PD had on each other's lives as a result of taking the course together.

**Conclusions:**

Including CPs in interventions for PWPs can improve outcomes, both in course attendance and completion, and also in improved dyadic relationships. 6 month follow-up data is being analyzed to assess impact on retention of benefits for PWPs who had highly motivated CP support.