MDS PAS 2022 Online Study Abstract

Presenting Author:
Monika Gross, The Poise Project, Candler, NC, USA

CoAuthors:
Caden S. Benzinger, University of Idaho, Moscow, ID, USA
Celeste L. Condie, University of Idaho, Moscow, ID, USA
Jared Grieb, University of Idaho, Moscow, ID, USA
Monica Norcia, Vocal Motion Method Studio, San Rafael, CA, USA
Rajal G. Cohen, University of Idaho, Moscow, ID, USA

Title of Abstract: Adapting an in-person cognitive embodiment course to online delivery for people living with Parkinson's disease and their care partners

Objective: Alexander technique (AT) is a cognitive embodiment approach applied during daily life. We tested the feasibility and potential of online AT-based group courses for people living with PD (PwP) and included care partners to enhance dyadic relationship and retention of benefits.

Background: An RCT showed that 1:1 AT sessions reduced motor symptoms in PwP with retention of benefits at 6 months [1-2]. Recent data suggest in-person AT-based group courses also hold promise. The COVID-19 pandemic gave an opportunity to test synchronous online AT-based courses.

Methods: *Design*: Uncontrolled feasibility trial; 3 groups met for 105 min, twice/wk, for 8 or 9 wks. *Participants***:** 16 PwP and 14 care partners began the course. *Intervention***:** Courses were delivered in-home via Zoom. Coursework included functional anatomy and self-management strategies via verbal instruction, anatomical models and images, demonstration, and activities. AT principles were embedded in everyday acts such as gait, sit-to-stand, speech, and IADLs. Review handouts and session recordings were provided. *Outcome Measures*: Functional reach, one-leg stance, TUG, 7-item Physical Performance Test, symptom-management self-report, anonymous course evaluations, posture photos, audio interviews.

Results: 94% of PwP completed the course (c.f. 65% for in-person course). Average course attendance by PwP was 86% (c.f. 91% in-person). PwP improved functional reach ($p=.03$) and simulated eating ($p=.06$). Subjectively, PWP reported improved physical self-control and ability to manage falls, shuffling gait, upright posture, garbled speech, and anxiety (all $p<.05$). On a 0-10 scale, evaluations averaged >9 for novelty of ideas and practicality of tools for physical symptom-management and for care partners' likelihood to remember and use what they had learned, and >8.5 for everyone feeling better prepared to meet the daily demands of living with PD.

Conclusions: AT training shows promise to improve self-management of PD motor and non-motor symptoms. Online classes can increase accessibility and retention for PwP and their care partners. Larger RCTs are needed to statistically verify improvement, optimize delivery, compare to other approaches, and investigate AT combined with exercise. Six-month follow-up

data are being collected for presentation, along with subjective data from care partners about their partners' symptom management.

References:

1. Stallibrass C, Sissons P, Chalmers C (2002). Randomized controlled trial of the Alexander technique for ideopathic Parkinson's disease. *Clinical Rehabilitation, 16*(7):695-708.
2. Stallibrass C, Frank C, Wentworth K (2005). Retention of skills learnt in Alexander technique lessons: 28 people with ideopathic Parkinson's Disease. *Journal of Bodywork and Movement Therapies, 9*:2, p. 150-157.