



# Picture what you would do with more time in your day

If you have Parkinson's, OFF time and dyskinesia can keep you from doing what you love.

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[picturemoretimepd.com](http://picturemoretimepd.com)

**Learn about OFF time and dyskinesia, so you can take charge of GOOD ON time – the time when you have good movement control.**

## What do OFF and dyskinesia look like in Parkinson's disease?

The symptoms that may occur during OFF time and dyskinesia are commonly confused because they are uncontrollable movements, or Parkinson's disease (PD) motor complications.

### OFF time

- Slowed movements
- Tremor, rigidity, and balance difficulties

vs.

### Dyskinesia

- Sudden, jerky, or dance-like movements
- Occurs in the face, arms, legs, or trunk
- Complications of PD medication use

## What causes OFF?

As PD progresses, the brain makes less of the chemical dopamine, which is involved in coordinating movement and balance. The standard treatment is a levodopa-based medication, which replaces dopamine. The periods of time when PD symptoms are present and not well controlled by medication are called OFF time. The motor symptoms of OFF can include slowed movement, tremors, rigidity, and balance problems.

## What causes dyskinesia?

Unlike OFF, dyskinesia is not a symptom of Parkinson's, but is caused by levodopa-based medications.

### How is dyskinesia different than tremors during OFF?

Dyskinesia and tremors are commonly confused. Tremors include shaking or trembling movements. They are usually felt in the hands and legs when a person's muscles are relaxed or at rest.

It is important to note that there are treatment options for OFF and/or dyskinesia to maximize GOOD ON time. Visit [picturemoretimepd.com](http://picturemoretimepd.com) for more information.

## How can OFF and/or dyskinesia impact daily activities for people with PD?



## Percentage of people who experience motor complications (OFF, dyskinesia or both)<sup>1,2</sup>



People with PD can unpredictably transition between periods of being OFF, dyskinesia, and GOOD ON time throughout the day.

## How do you treat OFF and/or dyskinesia?

Both OFF and dyskinesia impact GOOD ON time – when movements are well controlled without dyskinesia.

Approaches that adjust or limit levodopa therapies often result in a “trade-off”: reducing OFF but increasing dyskinesia, or vice versa. Starting levodopa

sooner does not increase dyskinesia and, in fact, can be helpful in treating OFF symptoms earlier in the disease.<sup>3,4</sup> However, because dopamine levels rise and fall throughout the day, it may become difficult to maximize GOOD ON time.

### MAXIMIZING LEVODOPA (LD) THERAPY

Over time, it can be difficult to achieve GOOD ON time by adjusting levodopa



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2. Mizuno Y, Shimoda S, Origasa H. Long-term treatment of Parkinson's disease with levodopa and other adjunctive drugs. *Journal of neural transmission* 2018;125(1):35-43

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