## Randomised controlled trial of the Alexander Technique for idiopathic Parkinson's disease\*

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## **Alexander Technique (AT)**

- Concerns the practical relationship between thought and muscle activity involved in postural support and in movement
- Taught in one-on-one lessons with verbal advice and manual contact

## **Hypotheses**

- AT lessons alongside pharmacological therapy benefit people with Parkinson's disease (Stallibrass 1997)
- Sustained improvement is mainly due to learnt AT skills, rather than beneficial effects of touch and attention in hands-on work

#### Method

93 subjects were randomly allocated to 3 groups, balanced for age, gender, and duration and severity of illness

- Normal treatment only
- Normal treatment +24 AT lessons
- Normal treatment +24 therapeutic massage sessions (TM)

Assessments were made pre- and post-intervention (a three-month period) and 6 months after AT lessons and massage had ended



#### **Results**

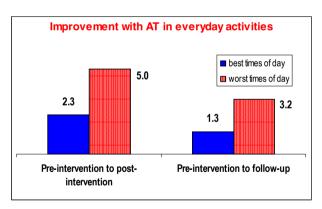
- 88 completed the pre-intervention and the post-intervention tests
- 84 completed the follow-up tests
- Attendance for AT lessons was 99%, for TM it was 97%

#### Results

## 1. Disability

# Main outcome measure: Self-rated Parkinson's Disease Disability Scale (25 everyday activities)

- After AT lessons the AT group performed everyday activities with less difficulty than the normal treatment only group, both at best (p=0.04) and at worst times of day (p=0.0004)
- At 6 month follow-up, the comparative improvement was maintained both for best times (p=0.03) and for worst times (p=0.01)
- Post-intervention the improvement in the massage group compared to the normal treatment only group was not statistically significant
- Parkinson's being a progressive disease, performance declined in all groups during follow-up but the AT group, unlike the other two groups, was still performing better than at the start of the trial (See chart below)



## Open-ended questionnaire, post-intervention

| % who mentioned           | AT  | TM |
|---------------------------|-----|----|
| improv ed balance/posture | 59% | 7% |
| improv ed w alking        | 48% | 3% |
| improv ed speech          | 38% | 3% |
| greater energy/less tired | 31% | 7% |
| reduced tremor            | 28% | 7% |

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#### Results

## 2. Feelings

#### **Beck Depression Inventory**

- Post-intervention, the AT group were comparatively less depressed than the normal treatment only group (p=0.03)
- At 6 month follow-up, comparative improvement was less marked (p=0.16)

#### **Attitudes to Self Scale**

- Post-intervention, absolute improvement in the AT group was 5.1 points compared to 1.6 for the normal treatment only group (p=0.07)
- At 6 month follow-up the comparative improvement was greater (p=0.04)

#### Open-ended questionnaire, post-intervention

| % who mentioned           | AT  | TM  |
|---------------------------|-----|-----|
| more positive/hopeful     | 41% | 14% |
| reduced stress/panic      | 35% | 7%  |
| improv ed self-confidence | 28% | 0%  |

## 3. Parkinson's disease medication and symptoms

#### Clinical records and Self-report questionnaire

- A higher proportion of non-AT subjects adjusted their Parkinson's disease medication to improve symptoms during the trial than AT subjects (p=0.001)
- And of subjects in non-AT groups who had not adjusted their PD medication at 6 month follow-up, a higher proportion reported worsening symptoms than of such subjects in the AT group (p=0.045)

## **CLINICAL MESSAGES**

- A course of Alexander Technique lessons leads to sustained benefits in people with idiopathic Parkinson's disease
- 2. Sustained benefits are mainly due to the ability to apply Alexander Technique skills in daily life
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