

## Patients with PD describe hallucinations in new video with Dr. Friedman

*'Seeing small people, we call them Lilliputians, is common ...'*

MARY KORR  
RIMJ MANAGING EDITOR

Click on the video link at right to see a unique film in which Dr. Joseph H. Friedman, chief of the Movement Disorders Program at Butler Hospital, interviews some of his patients with Parkinson's Disease who have experienced hallucinations.

The following are quotes from two of the interviewees:

'Strange occurrences would happen around my house... I would see at nighttime an army assembling across the street... Once it was Gen. McArthur landing in the Pacific.'

'I see people with red skin in my house, dwarf in size...they did not speak; they did not eat or drink. Some would come for a day or a week, several would stay for three weeks; they are still there but with my additional medication they are reduced in number...but are digging trenches in my backyard...'

In the video, Dr. Friedmann says that in many visual hallucinations, "it is common to see small people, we call them Lilliputians, who often look normal. Patients have described seeing families living in house plants and who may be up to mischief or not."

It is not every physician who finds himself asking his patient: "Tell me about the lizards..." or, "Did the people have skinny legs or no legs at all?...Did they look like a Picasso?"

Created for the national Parkinson's Disease Foundation, the video will be of interest to clinicians as well as their patients, who may not be aware of this not uncommon side effect of dopamine medication.

In the following Q & A, Dr. Friedman offers an overview of hallucinations in PD, and what can be done to alleviate these often baffling and disturbing illusions, which, as he states in the video, can be visual, auditory, tactile, olfactory or gustatory.

### Q. How common are hallucinations with Parkinson's Disease patients?

A. They occur in 20-30% of drug-treated patients and almost all PD patients are treated with drugs that may cause hallucinations.

### Q. Are patients reluctant to discuss this with their neurologist or physician?

A. Patients are often reluctant to discuss these with anyone for fear of being considered "crazy." In my video, the last interviewee's husband says that he never knew she had this problem. Usually the family is aware because the patient asks about them, like, "what was that dog doing in the house?" The patient often learns then not to speak about them because it upset others, thinking that he is, in fact, "crazy."

### Q. Do they most often occur at night and are more akin to vivid dreams?

A. They are more common at night, and typically occur in low stimulus environments, like sitting alone watching TV. They may be confused with vivid dreams, but the hallucinations are almost always the same, with the same animals or people, dressed the same, doing the same things – unlike dreams, which usually are different each time.

### Q. Are the hallucinations induced by specific PD medications?

A. All the meds used to treat PD may cause them, and, regardless of the med, the hallucinations are all similar.

### Q. What is the treatment to alleviate the hallucinations?

A. If there isn't an infection or medical illness causing the problem, we try to reduce the meds that are contributing to the hallucinations. Once we reduce them as much as practicable, we try either quetiapine or clozapine, the only antipsychotic drugs that do not worsen mobility. A new drug, pimavanserin, was just approved by the FDA to treat the hallucinations and it should become available in the next several months.

### Q. Should a PD patient's primary care physician bring up the topic to his or her patient?

A. Doctors should always ask their patients about this since most will not volunteer that they have this problem, unless they've been well educated about PD. ❖

Watch the video: <http://youtu.be/JhccC8ISXWg>

