Dyskinesia

Dyskinesia are uncontrolled, unwanted and jerky movements. These movements usually affect your arms, legs, face, and the head, but can also affect the whole body.

What is dyskinesia?

Dyskinesia refers to involuntary, erratic, and often excessive movements that mainly occur when Parkinson's medications (especially levodopa) are at their peak. Although not as common, dyskinesias can occur at the start, and the end of the medication cycle (diphasic dyskinesia) and when in off-periods of medication, e.g. when the medication is not optimally working, and levels of dopamine are low.

Feeling stressed or excited can also bring on these movements, which could expose people to an increased risk of falls or accidents (e.g., tripping over, dropping something accidentally on the floor).

Many people with Parkinson's mention they'd rather have dyskinesia than spend time stuck in stiffness or with slowed movement. However, dyskinesia can sometimes be painful or make it hard to exercise, work, or enjoy social activities.

Dyskinesia typically appears after several years of treatment and is more common in women, those diagnosed at a younger age or those who have required higher doses of levodopa over time.

Dyskinesia is most commonly associated with Parkinson's, but it can also occur in other neurological conditions such as Tourette's syndrome and Wilson's disease, or as a side effect of certain medications, including some antipsychotics.

Symptoms

Dyskinesia can look and feel very different from one person to the next.

Body parts involved:

- Arms and hands fidgeting or flicking
- Legs and feet kicking, writhing, or tapping
- Head bobbing or nodding
- Face moving, particularly mouth, opening and closing involuntarily
- Torso shifting, rocking, or swaying
- In some cases, the entire body may move in a wave-like pattern.

Pattern and rhythm:

- Sudden, jerky bursts of movement or slow, writhing motions
- Random twitches one moment, rhythmic "dance-like" movements the next
- Some people describe it as feeling like their muscles can't stop moving.

Duration and intensity

- Short-lived flurries of motion or constant, chronic activity
- Ranges from barely noticeable to so pronounced it makes daily tasks hard
- May feel mildly annoying or, for some, painfully tight or cramping.

Triggers and timing

- Most commonly during "on" periods when your medication is working best
- Stress, excitement, or being in a rush can bring on or worsen movements
- Sometimes emerges gradually as medications take effect or wears off over time.

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