

PP 05 - Impact of dance on disease severity, functional mobility, and quality of life in people with Parkinson's disease

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Introduction: Individuals with Parkinson disease (PD) often demonstrate postural instability, gait difficulties, and reduced functional mobility that can lead to decreased quality of life (QOL). Although dance is an effective management option in alleviating the symptoms of PD, there is a limited number of studies that have objectively assessed effects of dance, particularly related to the Dance for Parkinson's Disease® (DfPD®) programme. This study explores the impact of dance on disease severity, functional mobility, and QOL in people with PD.

Methods: This pseudo-randomized controlled study was carried out with a Dance Group (DG; $n=17$; age=65.8±11.7 years) and a Control Group (CG; $n=16$; age=67.0±7.7years). Participants were diagnosed with early-stage PD (Hoehn & Yahr: DG=1.6 ± 0.7, CG=1.5 ± 0.8). The DG underwent one-hour dance class based on the DfPD® model, twice weekly for 12 weeks, while the CG had treatment as usual. Both groups were assessed at baseline and after 12 weeks on disease-related symptom severity (MDS-Unified Parkinson Disease Rating Scale: MDS-UPDRS), measures of functional mobility (Timed Up & Go:TUG- single & dual task, Tinetti, Berg, Mini-BESTest) self-rated balance and gait questionnaires (Activities Balance Confidence Scale:ABC-S; Gait and Falls:G&F-Q; Freezing of Gait:FOG) and QOL

Results: The participants of DG and CG were equal at the baseline. The DG participants significantly improved on the MDS-UPDRS (ES=-2.76,p=0.001),TUG(ES=-0.76,p=0.038), DT-TUG(ES=-1.23,p=0.001),Tinetti (ES=1.35,p=0.001), Berg (ES=2.20,p=0.001), Mini-BESTest (ES=2.07, p=0.001), ABC-S (ES=1.51, p=0.01), G&F-Q (ES=2.22, p=0.001), FOG (ES=0.94, p=0.02) and PDQ-39 (ES=0.79, p=0.030).

Conclusions: DfPD®-based dance classes improved disease-related symptom severity, functional mobility and QOL.

Keywords: Parkinson's disease, dance, disease severity, functional mobility, Quality of Life

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