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# DIAGNOSABLE IMPULSE CONTROL BEHAVIOURS IN PATIENTS WITH PARKINSON'S DISEASE

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### Introduction

Impulse control behaviours (ICB) are repetitive and excessive activities that are subsyndromal, unfulfilled the diagnostic criteria but potentially challenging problem. Impulse control disorder (ICD) on contrary is an established diagnosis which requires clinical attention.

# Objective

To determine the proportion of patients with ICD among those screened positive with ICB among patients with Parkinson's disease in an Asian population. The factors associated with ICB were also examined.

#### Method

Eighty consecutive patients attending neurology clinic who fulfilled the inclusion criteria i.e. diagnosis of idiopathic Parkinson's, on stable dopaminergic medication for at least 3 months were recruited in this prospective cross-sectional study. ICB were identified using the Questionnaire for Impulsive-Compulsive Disorder for Parkinson's disease (QUIP). Those who were screened positive, with controls, then underwent semi structured interview based on SCID-ICD.

### Results

11.3% were screened positive for ICB; these were significantly associated with higher education (p=0.022), advanced stage of disease (p=0.026) and higher levodopa dosage (p= 0.01). The most frequent ICB was compulsive medication use (7.5%), followed by hobbyism (6.25%), hypersexuality (5%), compulsive buying (3.75%), punding (2.5%), walkabout (2.5%), compulsive eating (1.25%) and pathological gambling (1.25%). 50% of those with positive QUIP (section1) fulfilled the criteria for ICD (50% positive-predictive value) while none with negative QUIP had ICD (100% negative predictive value).

# Conclusions

About 1 in 10 patients with Parkinson's disease displayed ICB, half of which might have a diagnosable ICD. The risk should alert the physicians of the need for routine assessment of impulse control problems in patients with Parkinson's disease.