Parkinsonism: Disorders Where Parkinsonism May Be Symptomatic

Dementia Neuropsychology · https://neuro.vip/neuropsychology/dementia-neuropsychology/parkinsonism-disorders-where-parkinsonism-may-be-symptomatic/

Parkinsonism is a **clinical syndrome** characterised by a combination of **motor symptoms**, most notably **bradykinesia (slowness of movement), muscular rigidity, resting tremor, and postural instability**. These features resemble those seen in Parkinson's disease, but parkinsonism can result from a **range of underlying neurological conditions including neurodegenerative diseases, certain medications, or vascular causes**. Importantly, while Parkinson's disease is the most well-known and common cause, the presence of parkinsonism does not necessarily indicate a diagnosis of Parkinson's disease itself.

Disorders Where Parkinsonism May Be Symptomatic

Disorder	Parkinsonism?	Comment
Amnestic variant Alzheimer's disease	Possible	Not typical early; extrapyramidal signs can appear late or with Lewy body co-pathology.
Behavioural variant frontotemporal dementia (bvFTD)	Possible	Often due to underlying PSP/CBD-spectrum pathology; genetic FTD (e.g., MAPT/GRN) may show parkinsonism. Not typically associated with MSA.
Creutzfeldt-Jakob disease dementia	Possible	Akinetic-rigid features can emerge, especially later, alongside myoclonus and rapid decline.
Corticobasal degeneration (CBD)	**Core**	Classically asymmetric, levodopa-poor parkinsonism within corticobasal syndrome (CBS).
Dementia with Lewy bodies (DLB)	**Core**	Parkinsonism is a core feature (with fluctuations and visual hallucinations).
Huntington's disease dementia	Sometimes	Akinetic-rigid "Westphal" variant (esp. juvenile) and later-stage HD can show parkinsonism.

Disorder	Parkinsonism?	Comment
Logopenic variant primary progressive aphasia (lvPPA)	Rare/possible	Usually AD pathology; parkinsonism uncommon but can occur with overlap (e.g., LBD/CBS).
Multiple system atrophy (MSA)	**Core**	Defining parkinsonism in MSA-P with autonomic failure; may be minimal in MSA-C.
Nonfluent agrammatic PPA (nfaPPA)	Yes (not rare)	Frequently evolves to PSP/CBS phenotypes with axial rigidity, gait freezing, or apraxia of speech.
Parkinson's disease dementia (PDD)	**Core**	By definition, parkinsonism precedes dementia by ≥ 1 year.
Posterior cortical atrophy (PCA)	Rare/possible	Typically AD-related visual syndrome; parkinsonism suggests LBD/CBS overlap.
Progressive supranuclear palsy (PSP)	**Core**	Core atypical parkinsonism with early postural instability/falls, axial rigidity, vertical supranuclear gaze palsy or slow vertical saccades; poor levodopa response.
Semantic variant PPA (svPPA)	Rare	Usually TDP-43; parkinsonism is uncommon and typically late/minor if present.
Vascular cognitive impairment	Yes	Vascular parkinsonism is a recognised phenotype (lower-body predominant, poor levodopa response).