THE DEPENDENCY SERIES · WHITE PAPER · 2026

NEUROLOGICAL & COGNITIVE

Parkinson's Disease

A Progressive Neurological Cause of Dependency

PUBLISHED BY
The Dependency Series — Health Education Resource Center
www.thedependencyseries.com

Contents

Overview

Parkinson's disease (PD) is a chronic, progressive disease of the nervous system caused by the loss of dopamine-producing neurons in the brain. It affects approximately 1.2 million Americans, a number projected to reach 1.6 million by 2037.

Unlike many conditions, Parkinson's has no cure and no proven treatment that slows its progression. Current therapies manage symptoms effectively for years — sometimes decades — but the disease ultimately advances, driving increasing care needs over time.

The average age at diagnosis is 60, though 10–15% of patients are diagnosed before age 50. Men are about 1.5 times more likely than women to develop the disease.

1.2M	90,000+	$82.2B
Americans currently living with Parkinson's disease	new U.S. diagnoses each year	total U.S. economic cost of Parkinson's in 2024

How It Leads to Dependency

Parkinson's symptoms fall into two categories, both of which worsen over time. Motor symptoms — tremor, bradykinesia (slowness), rigidity, and postural instability — directly limit mobility, dressing, and self-care. Postural instability in particular becomes a major fall risk in later stages.

Non-motor symptoms are often underestimated but equally disabling: cognitive decline and dementia eventually affect up to 80% of patients, and depression or anxiety affects 40–60%. On average, a person lives 10–20 years after diagnosis, with wide variation in how quickly they progress through the five recognized stages.

Diagnosis & Early Warning Signs

There is no definitive blood test or brain scan that confirms Parkinson's with certainty. Diagnosis relies on a neurological exam by a movement disorder specialist, evaluating bradykinesia plus tremor, rigidity, or postural instability, while ruling out conditions with similar presentations.

Supporting tools include DaTscan imaging (which shows dopamine activity), MRI to rule out other causes, genetic testing for early-onset or familial cases, and a newer skin biopsy test that detects misfolded alpha-synuclein protein in nerve fibers.

Typical Care Needs

Early-stage care typically involves medication management and physical therapy. As the disease progresses, care needs expand to include help with dressing (buttons, fasteners become difficult with rigidity and tremor), bathing, and mobility, along with vigilant fall prevention given the sharply elevated fall risk from postural instability.

In advanced Parkinson's, the unpredictable 'on/off' fluctuations in medication effectiveness can mean a patient's functional ability changes dramatically within the same day, complicating care planning.

The Realistic Cost of Care

According to a March 2026 report from the Michael J. Fox Foundation and the Parkinson's Foundation, the total U.S. cost of Parkinson's disease in 2024 was $82.2 billion — projected to exceed $112 billion by 2045.

40%	50+ hrs/wk	40%
of Parkinson's caregivers report symptoms of clinical depression	caregiving load for families in advanced PD cases	of spousal caregivers predecease their PD partner due to caregiver stress

- Medicare covers physician visits, hospitalizations, medications, and rehabilitative therapies, plus short-term skilled nursing after a hospitalization (up to 100 days, with full coverage for only 20).
- Medicare does NOT cover custodial care — help with bathing, dressing, eating, and mobility when no skilled nursing is needed. This is the type of care most Parkinson's patients need for the longest stretch of their disease course.
- Because Parkinson's often progresses over 10-20 years, the cumulative custodial care gap compounds significantly compared to acute-onset conditions.

THE CAREGIVER BURDEN

Parkinson's disease is a family disease. As symptoms progress, spouses and adult children take on increasing responsibility, and caregiver burnout is a predictable outcome of an unsupported, sustained burden rather than a sign of personal failure.

Planning Considerations

These considerations are general and educational. They are not financial or legal advice, and no specific product or provider is endorsed here.

- Connecting with a movement disorder specialist early ensures the most accurate diagnosis and access to the newest medication options and clinical trials.
- Because Medicare does not cover custodial care, families should estimate the potential 5–10 year cost of custodial care based on local rates and identify available resources well before a crisis.
- Documenting a clear advance directive while cognitive status is intact is important, since roughly 80% of Parkinson's patients eventually experience some degree of cognitive decline.

Sources & Further Reading

1. Michael J. Fox Foundation — 2024 Economic Burden Report — https://www.michaeljfox.org/
2. Parkinson's Foundation — https://www.parkinson.org/