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MADISON NEUROLOGY LLC

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Neurology Care 7 days a Week. Because Your Brain Matters.

Progressive Supranuclear Palsy (PSP)

Patient education guide · Neurodegenerative & Memory · Madison Neurology LLC

What is it?

PSP is a rare brain disorder that causes early balance problems and falls (often backward), slowness, stiffness, and a characteristic difficulty moving the eyes up and down. It also affects speech, swallowing, mood, and thinking. It is one of the 'atypical parkinsonisms' and is often initially mistaken for Parkinson's disease.

How does it happen?

PSP is caused by abnormal accumulation of tau protein in specific brain regions. It is not directly inherited in typical cases, and its cause is unknown; age is the main risk factor.

Common symptoms

- Early unexplained falls, especially backward
- Slow, stiff movements; a stiff, 'surprised' facial expression
- Difficulty looking down (trouble reading, seeing food on the plate)
- Slurred, growling speech and swallowing difficulty
- Apathy, impulsivity, and slowed thinking

How is it diagnosed?

Diagnosis is clinical, supported by MRI (which may show midbrain shrinkage, the 'hummingbird sign'). There is no definitive lab test; newer tau imaging and biomarkers are emerging. Response to levodopa is usually poor or brief, which is a diagnostic clue.

How is it treated?

There is no disease-modifying therapy, but much can be done: physical therapy and fall prevention, speech and swallowing therapy, prism lenses or Botox for eyelid problems, careful trials of Parkinson's

medications for stiffness, antidepressants, and Botox for drooling. Specialist centers and clinical trials offer access to emerging therapies.

What does the future hold?

PSP progresses over roughly 6-9 years on average, with swallowing problems and falls as the main safety concerns. Proactive therapy, home safety, and nutrition planning preserve function and comfort. Support organizations connect families facing this rare disease.

Questions patients commonly ask

Q: How is PSP different from Parkinson's?

A: Falls and eye-movement problems come early, tremor is usually absent, and response to Parkinson's medications is limited.

Q: Is PSP inherited?

A: Typical PSP is sporadic; a family history of the same disease is rare, though certain common gene variants slightly raise risk.

Q: What is the biggest safety priority?

A: Fall prevention and swallowing safety — physical therapy, mobility aids, and swallowing evaluations make the largest difference.

National support groups & resources

- **CurePSP** — psp.org — 1-800-457-4777
- **Parkinson's Foundation (Helpline)** — parkinson.org — 1-800-473-4636
- **National Organization for Rare Disorders** — rarediseases.org — 1-800-999-6673

(Organization contact details were current at the time of compilation; please verify online.)

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