

PD POWER LUNCHBOX

HANDOUT #3

NUTRITION + PARKINSON'S

Inflammation • Sugar • Alcohol • Mediterranean Diet

Medical Disclaimer: These downloads share ideas for education and discussion—not medical advice. Use them as conversation starters with your physician or Movement Disorder Specialist (MDS). Do not change medications, supplements, alcohol intake, or diet patterns without their guidance. What helps one person may not help another, and safety depends on your health history and medications.^[1]

— EXECUTIVE SUMMARY (WHY THIS MATTERS IN PD)

- Parkinson's affects more than movement. What you eat can influence energy, constipation, sleep, mood, and heart health.^[1]
- Many clinicians talk about inflammation because it may affect brain and body health. Diet is one way to influence inflammation.^[2]
- No diet cures Parkinson's. But Mediterranean-style eating is a strong overall pattern for health—and it is often described as anti-inflammatory.^[2]
- **Patient experience matters too:** many people report they feel steadier when they cut back on alcohol and added sugar and track what helps.

— INFLAMMATION (IN PLAIN LANGUAGE)

Think of inflammation as the body's "alarm system." Short-term inflammation helps you heal, but long-term (chronic) inflammation can stress the body. Many experts link chronic inflammation with health problems across the body.^[2]

Why we mention it here: Mediterranean-style eating is widely described as anti-inflammatory, and excess added sugar can increase chronic inflammation.^{[2][3]}

1) ADDED SUGAR: CUT BACK TO REDUCE “SPIKES” AND INFLAMMATION

Why it matters: Sugary drinks and sweets can cause blood sugar spikes followed by energy crashes. Too much added sugar is also linked to higher chronic inflammation.^[3]

Simple guardrails:

- **American Heart Association guidance:** about 25g/day added sugar for women and 36g/day for men.^[4]
- **World Health Organization guidance:** keep “free sugars” under 10% of daily calories; under 5% may provide extra benefits.^[5]

Easy wins (choose 1–2):

- **Start with drinks:** replace soda, sweet tea, juice drinks, and sugary coffee drinks with water, seltzer, or unsweetened tea.
- **Read labels:** added sugar hides as corn syrup, dextrose, maltose, cane sugar, etc.
- **Swap snacks:** nuts, fruit, yogurt (unsweetened), hummus + veggies.
- Make dessert a decision (2–3 days/week), not a default.

If you are losing weight or have low appetite: do not restrict calories. Ask your clinician or a registered dietitian for a safe plan.^[1]

2) ALCOHOL: CONSIDER ELIMINATING OR REDUCING (ESPECIALLY FOR SLEEP AND BALANCE)

Why it matters in PD: Alcohol can worsen balance and increase fall risk. It may also disrupt sleep—even if it helps you fall asleep at first.^[6]

Inflammation note: Alcohol can promote inflammation in the body and can disrupt the gut lining and gut health.^[7]

Safe, practical approach:

- Ask your MDS what is safe for you (especially if you have balance issues, sleep problems, mood symptoms, or multiple medications).
- Try “alcohol-free weekdays” or a full 30-day break and see how you feel (sleep, tremor, balance, mood).
- **Use swaps:** seltzer + citrus, non-alcoholic beer/wine, or a mocktail.

3) MEDITERRANEAN DIET: THE STRONGEST OVERALL PATTERN (AND ANTI-INFLAMMATORY)

What it looks like: vegetables, fruits, beans/lentils, whole grains, nuts, olive oil, and fish—while limiting ultra-processed foods and large amounts of red/processed meat.^[8]

Why it may matter for PD: Studies link Mediterranean-style eating to lower risk of developing PD and to better outcomes in some people living with PD (most evidence is observational; trials are ongoing).^{[9][10]}

A simple Mediterranean plate:

- ½ plate vegetables (any color)
- ¼ plate protein (fish, beans, lentils, poultry)
- ¼ plate whole grains (oats, brown rice, whole-wheat pasta, quinoa)
- **Healthy fats:** olive oil, nuts, seeds, avocado

One-day sample (simple):

- **Breakfast:** oatmeal + berries + walnuts
- **Lunch:** salad + olive oil dressing + beans or tuna
- **Snack:** yogurt (unsweetened) or hummus + veggies
- **Dinner:** salmon (or beans) + roasted vegetables + brown rice

— COORDINATE DIET WITH YOUR MEDICATIONS (VERY IMPORTANT)

If you take carbidopa/levodopa: for some people, high-protein meals can reduce how well a dose works. Clinicians may recommend timing levodopa 30 minutes before or 60 minutes after meals, or adjusting protein timing—but only with your prescriber’s guidance.^{[11][12]}

— MICHELLE HESPELER’S UNOFFICIAL “NUTRITION RULES” (PATIENT EXPERIENCE)

These are not medical advice. They are personal practices that many people ask her about. Use them as conversation starters with your MDS:

- Eliminate alcohol.
- Drastically reduce added sugar.
- Coordinate diet and medication timing with your MDS so food does not interfere with meds.
- **Keep a simple journal:** what you ate/drank, medication timing, sleep, constipation, and “how I felt.” Bring it to appointments.

— LEARN MORE (RECIPES + PRACTICAL GUIDES)

- [Oldways Mediterranean Diet Pyramid](#) + meal plans and recipes.^[13]
- [Michael J. Fox Foundation “Brain Food” guide](#) (includes recipes and tips).^[14]
- [Harvard Nutrition Source: Mediterranean Diet](#) + recipe collection.^[8]
- [Mayo Clinic Mediterranean meal plan](#) and recipes.^[15]

— A REALISTIC NEXT STEP (7 DAYS)

Choose ONE change for 7 days (example: no alcohol, or cut sugary drinks, or Mediterranean dinners 3 nights/week). Track how you feel in a journal and review it with your medical team.

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