

Supplementary Material

Patient and therapist perspectives on motor imagery training in Parkinson's Disease: a qualitative descriptive study

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Patient Questions

- 1) When were you diagnosed with Parkinson's Disease?
- 2) What are the biggest functional changes you have noticed since your diagnosis?
- 3) How does your Parkinson's Disease change from day to day?
- 4) Tell me about the symptoms you most often experience.
- 5) Which of these symptoms has had the biggest effect on your daily life?
- 6) Are there any activities you now find particularly difficult?
 - a. What makes them difficult?
- 7) What daily activities are most important for you to keep doing?
- 8) Tell me about your experience with rehabilitation.
- 9) What are some strategies you use to help with movement?
- 10) What about strategies to help with focus and concentration?
- 11) What are your thoughts on home-based rehabilitation interventions?
 - a. What would be some of the challenges?
 - b. What would be some of the benefits?
- 12) Before this study, had you ever heard of motor imagery?
 - a. If so, where?
 - b. Have you ever used it before?
- 13) When you imagined the task, did you...
 - a. Imagine it as if you were looking through your own eyes? Or watching yourself on film?
 - b. Focus on seeing the movement, or feeling the movement?
- 14) Is there anything specific you would want to learn about motor imagery before participating in a training program?
 - a. Why?
- 15) Do you think an introduction session where you learnt more about motor imagery would be helpful?
- 16) What device do you use to listen to music or the radio?
- 17) Would you prefer training sessions longer, less frequent motor imagery session? Or shorter and more frequent?
 - a. Why?
- 18) Are there any activities you would particularly like to practice with motor imagery?
 - a. Why these activities in particular?
- 19) Would you prefer to keep track of training online, or in a physical log?
- 20) Would photographs accompanying the audio recordings be helpful?

Therapist Questions

- 1) How long have you worked with patients with Parkinson's Disease?
- 2) What are the most common difficulties patients with Parkinson's Disease report in therapy?
- 3) What are the most common goals you work on with Parkinson's Disease patients?
- 4) What are the biggest barriers your patients report regarding rehabilitation?
 - a. What are the biggest barriers *you* perceive regarding participation in rehabilitation?
- 5) Are there any particular movement strategies you find most effective in Parkinson's Disease?
 - a. Why?
 - b. Do you use cueing with Parkinson's Disease patients? What kind of cues?
- 6) Do you ever provide patients with home exercises or activities to complete between therapy sessions?
 - a. Why or why not?
- 7) What are factors that you think influence patient motivation to participate in a home program?
 - a. What about compliance?
- 8) Are you familiar with motor imagery?
- 9) If yes, have you ever used motor imagery with Parkinson's Disease patients during sessions?
 - a. Why or why not?
- 10) Is motor imagery something you would consider recommending patients to practice at home?
- 11) Would you recommend at home training sessions be longer and less frequent? Or shorter and more frequent in Parkinson's Disease?
 - a. Why?
- 12) Are there any particular activities you would like to see patients with Parkinson's Disease to practice with motor imagery?

Motor Imagery Exercise

Participants were asked to stay seated and close their eyes as the interviewer read aloud from the following script:

“You are now sitting at your dining room table, your back is straight and your hands are flat on the table. Imagine a bowl of soup sitting on the table in front of you, a soup spoon on the right side of it.

You lift right hand and forearm off the table and reach for the spoon. The fingers in your right hand slowly open and reach around to grasp the spoon. Focus on how the cold metal feels in your palm.

You slowly lift the spoon and bring it towards the bowl. As you lower the spoon into the bowl, watch as it slowly fills with soup. Once the spoon is full, you lift the spoon out of the bowl and slowly bring it towards you. Focus on making this movement as fluid as possible, ensuring that you don't spill any soup on the table or yourself.

You flex your neck and trunk slightly forwards to meet the spoon. Your lips close around the spoon and you ingest the soup. Once you have ingested the soup, you extend your neck and trunk back to your starting position and begin to lower the spoon back into the bowl.”