The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into your nearest library.

**Benefits of Pilates in Parkinson’s Disease: A Systematic Review and Meta-Analysis.**
[Pilates can be safely prescribed for people with mild-to-moderate PD. Preliminary evidence indicates that its practice could have a positive impact on fitness, balance and physical function. Its benefits on lower-body function appear to be superior to those of other conventional exercises. Future randomized studies with greater samples are needed to confirm these observations.]
Freely available online

**Risk of Developing Parkinson Disease in Bipolar Disorder: A Systematic Review and Meta-analysis.**
[This review suggests that patients with BD have a significantly increased risk of developing PD compared with the general population. Subgroup analyses suggested a possible overestimation in the magnitude of the associations. These findings highlight the probability that BD may be associated with a later development of PD and the importance of the differential diagnosis of parkinsonism features in people with BD.]
Freely available online

**The effect of exercise on high-level mobility in individuals with neurodegenerative disease: a systematic literature review.**
[Eight types of exercise interventions were investigated within which high-level mobility tasks were not commonly included. In the absence of outcome measures or interventions focused on high-level mobility, findings suggest some benefit from treadmill training for individuals with multiple sclerosis or Parkinson’s disease. Progressive resistance training for individuals with multiple sclerosis may also be beneficial.]
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**Select groups of older adults may benefit from emergency-based short-stay unit admission, as compared to standard medical admission.**
*Evidence-Based Nursing* 2019;22(4):109.
[Preliminary data suggests emergency-based, short-stay units reduced: functional decline, adverse events, readmission rates and hospital stays. Short-stay units reported similar 90-day mortality rates to standard medical admissions. Multicentre international studies are required. Future research should include a cost-analysis and powered studies to detect**
minimal differences in 90-day mortality.]
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Reports

The following report(s) may be of interest:

**National Clinical Audit of Anxiety and Depression: inpatient mental health services**
Healthcare Quality Improvement Partnership (HQIP); 2019.
[This report presents the main findings of the National Clinical Audit of Anxiety and Depression carried out by the Royal College of Psychiatrists between 2017 and 2018. It focuses on inpatient services, where people are admitted to hospital and stay overnight for a period of time, run by NHS mental health trusts in England.

To measure how services are doing, they are assessed on 13 standards that represent best practice. Co-produced with service users and carers.]
Freely available online

This Bulletin was created by Su Keill, Knowledge Specialist of NHS East Dorset Knowledge and Library Service.

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