

International Parkinson and Movement Disorder Society

# **SPES/SCOPA-Motor**

Short Parkinson's Evaluation Scale/Scales for Outcomes in Parkinson's Disease-Motor Function

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# SPES/SCOPA

## A. Motor evaluation

#### Clinical examination

#### 1. Rest tremor

assess each arm separately during 20 seconds; hands rest on thighs; if tremor is not evident at rest, try to keep the patient attentive, e.g. by having him/her count backwards with eyes closed 0 = absent

- 1 = small amplitude (< 1 cm) occurring spontaneously, or obtained only while keeping patient attentive (any amplitude)
- 2 =moderate amplitude (1-4 cm), occurring spontaneously
- 3 =large amplitude ( $\geq 4$  cm), occurring spontaneously.

#### 2. Postural tremor

check with arms outstretched, pronated and semipronated, and with index fingers of both hands almost touching each other (elbows flexed); assess each position during 20 seconds

- 0 = absent
- 1 =small amplitude (< 1cm)
- 2 = moderate amplitude (1-4 cm)
- 3 =large amplitude ( $\geq 4 \text{ cm}$ ).

#### **3.** Rapid alternating movements of hands

rapid alternating pronation/supination movements of upper hand, each time slapping the palm of the horizontally held lower hand during 20 seconds; each hand separately

- 0 = normal
- 1 = slow execution, or mild slowing and/or reduction in amplitude; may have occasional arrests
- 2 = moderate slowing and/or reduction in amplitude or hesitations in initiating movement or frequent arrests in ongoing movements
- 3 =can barely perform task.

#### 4. Rigidity

assess passive movements of elbow and wrist over full range, with the patient relaxed in sitting position; ignore cogwheeling; check each arm separately

0 = absent

- 1 =mild rigidity over full range, no difficulty reaching end positions
- 2 = moderate rigidity, some difficulties reaching end positions
- 3 = severe rigidity, considerable difficulties reaching end positions.

#### 5. Rise from chair

patient is instructed to fold arms across chest; use straight back chair

- 0 = normal
- 1 = slowly; does not need arms to get up
- 2 = needs arms to get up (can get up without help)
- 3 = unable to rise (without help).

#### 6. Postural instability

stand behind the patient and pull patient backwards, while s/he is standing erect with eyes open and feet spaced slightly apart; patient is <u>not</u> prepared

- 0 = normal, may take up to 2 steps to recover
- 1 = takes 3 or more steps; recovers unaided
- 2 = would fall if not caught
- 3 = spontaneous tendency to fall or unable to stand unaided.



#### 7. Gait

assess gait pattern; use walking aid or offer assistance, if necessary

- 0 = normal
- 1 = mild slowing and/or reduction of step height or length; does not shuffle
- 2 = severe slowing, or shuffles or has festination
- 3 = unable to walk.

#### 8. Speech

- 0 = normal
- 1 = slight loss of expression, diction and/or volume
- 2 = slurred; not always intelligible
- 3 = unintelligible always or most of the time.

#### Historical information

#### 9. Freezing during 'on'

Freezing is characterized by hesitation when trying to start walking or 'gluing' to the ground while walking.

0 = absent

- 1 = start hesitation only, occasionally present
- 2 = frequently present, may have freezing when walking
- 3 = severe freezing when walking.

#### 10. Swallowing

- 0 = normal
- 1 = some difficulty or slow; does not choke; normal diet
- 2 = sometimes chokes; may require soft food
- 3 = chokes frequently; may require soft food or alternative method of food intake.

# B. Activities of Daily Living

#### 11. Speech

- 0 = normal
- 1 = some difficulty; may sometimes be asked to repeat sentences
- 2 =considerable difficulty; frequently asked to repeat sentences
- 3 = unintelligible most of the time.

#### 12. Feeding (cutting, filling cup, etc.)

- 0 = normal
- 1 = some difficulty or slow; does not need assistance
- 2 =considerable difficulty; may need some assistance
- 3 = needs almost complete or complete assistance.

#### 13. Dressing

- 0 = normal
- 1 = some difficulty or slow; does not need assistance
- 2 = considerable difficulty; may need some assistance (e.g. buttoning, getting arms into sleeves)
- 3 = needs almost complete or complete assistance.

#### 14. Hygiene (washing, combing hair, shaving, brushing teeth, using toilet)

0 = normal

- 1 = some difficulty or slow; does not need assistance
- 2 = considerable difficulty; may need some assistance
- 3 = needs almost complete or complete assistance.



# 15. Changing position (turning over in bed, getting up out of bed, getting up out of a chair, turning around when standing)

- 0 = normal
- 1 = some difficulty or slow; does not need assistance with any change of position
- 2 = considerable difficulty; may need assistance with one or more changes of position
- 3 = needs almost complete or complete assistance with one or more changes of position.

#### 16. Walking

- 0 = normal
- 1 = some difficulty or slow; does not need assistance or walking aid
- 2 =considerable difficulty; may need assistance or walking aid
- 3 = unable to walk, or walks only with assistance and great effort.

#### 17. Handwriting

- 0 = normal
- 1 = some difficulty (e.g. slow, small letters); all words legible
- 2 = considerable difficulty; not all words legible; may need to use block letters
- 3 = majority of words are illegible.

#### C. Motor Complications

#### 18. Dyskinesias (presence)

- 0 = absent
- 1 =present some of the time
- 2 = present a considerable part of the time
- 3 = present most or all of the time.

#### 19. Dyskinesias (severity)

- 0 = absent
- 1 =small amplitude
- 2 = moderate amplitude
- 3 =large amplitude

#### 20. Motor fluctuations (presence of 'off' periods)

What proportion of the waking day is patient 'off' on average?

- 0 = none
- 1 =some of the time
- 2 = a considerable part of the time
- 3 = most or all of the time.

#### 21. Motor fluctuations (severity of 'off' periods)

- 0 = absent
- 1 = mild end-of-dose fluctuations
- 2 = moderate end-of-dose fluctuations; unpredictable fluctuations may occur occasionally
- 3 = severe end-of-dose fluctuations; unpredictable on-off oscillations occur frequently.

Use of this questionnaire in studies should be communicated to the International Parkinson and Movement Disorder Society (MDS). No changes may be made to the questionnaire without written permission from MDS. Please use the following reference in publications: Marinus J, Visser M, Stiggelbout AM, Rabey JM, Martínez-Martín P, Bonuccelli U, Kraus PH, van Hilten JJ. A short scale for the assessment of motor impairments and disabilities in Parkinson's disease: the SPES/SCOPA. *J Neurol Neurosurg Psychiatry* 2004;75:388-395.

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