

## Stop! Observe! Assess!

Before you detain a person you suspect is under the influence, please consider that he/she might have Huntington's Disease or another type of neurological disorder which may present the appearance of intoxication, defiance or refusal to comply.

## What is HD?

- Fatal brain disorder
- Cognitive impairment
- Movement disorder
- Emotional disturbances
- Inherited/not contagious

Huntington's Disease (HD) results from genetically programmed degeneration of brain cells, called neurons. This degeneration causes uncontrolled movements, loss of intellectual faculties, and emotional disturbance. Each child of an HD parent has a 50/50 chance of inheriting the HD gene. Some early symptoms of HD are mood swings, depression, irritability or trouble driving, learning new things, remembering a fact, or making a decision. As the disease progresses, concentration on intellectual tasks becomes increasingly difficult.

*Reference from National Institute of Neurological Disorders and Stroke: <http://www.ninds.nih.gov/disorders/huntington/>*

For more information: [www.help4hd.org](http://www.help4hd.org)

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**Officer,  
I'm not drunk;  
I have HD!**

**Huntington's Disease  
Awareness for  
Law Enforcement**

**Help  
4HD**





*Sheriff's Deputy Michael Hinshaw,  
diagnosed in 2007 with Huntington's Disease*

## What do you see?

- Look for Medic Alert bracelet/necklace
- Stumbling gait
- Loud or agitated
- Chorea (uncontrolled dance-like movements)
- Impaired communication skills

You are on patrol and you observe a person who can't keep his/her balance, or someone calls 911 to report a person who is walking with an odd stumbling gait and appears to be



*Image by Diana Kastelic*

drunk. His/her movements cannot be stopped even if ordered! Chorea is not kicking or hitting; it is uncontrolled movements.

Maybe he/she created a disturbance in a restaurant. The person is getting loud or agitated; the staff doesn't know how to handle him/her and calls 911.

You hear that his/her speech is slurred and his/her movements are jerky, and he/she seems to have a fixed stare. You conclude, correctly, that this person is impaired.

## Is it HD?

- Delayed response
- Loss of memory
- Poor judgment
- Symptoms increased by stress
- Lack of awareness

You begin to ask questions, but he/she doesn't reply. You instruct him/her to do something, but he/she doesn't respond. It seems like he/she is resisting or defying your instructions. Complicating resolution, symptoms get worse when the person with HD is under stress. People with HD seem to get frozen at times.

He/she may be able to tell you that he/she has this disorder or he/she may not. An ER or psychiatric receiving facility may be advisable if he/she appears to have psychosis or delusions.

## Behaviors!

- Psychosis
- Perseveration (repetitive words/thoughts/actions)
- Hallucinations
- Rages

## People with HD are protected by the ADA

If you conclude that this behavior is not from intoxication, you may be able to send the person on his/her way or ask if you can call his/her caregiver or family member to come pick him/her up. If you cannot reach the family, a hospital ER or a psychiatric receiving facility is an option.

If the person has violated the law and must be arrested, tell the intake officers that you know or suspect the person has a neurological disorder. The caregivers or family members may need to bring medication to the jail for their loved one. Interruptions in the medication schedule can make behaviors more difficult to manage.

## Is he/she homeless?

Some people with HD are homeless. With the stresses of their illness they lose their ability to work. Unless the person has an advocate to help navigate the social services system, he/she may not be able to successfully complete this process. Try to determine if the person has a home to go to; try to call the caregiver or family member. If unreachable, please help the person access the appropriate resources for homeless people in your city or town.

**Thank you for protecting  
the safety, civil rights,  
dignity and privileges  
of people with  
Huntington's Disease.**