

What's Medications Got to Do With It?

MEDICATION TRACKING IN PARKINSON'S DISEASE

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The Role of Medications

- Currently, medications do not **DIRECTLY** change the disease course of Parkinson's Disease
- However, medications can maximize exercise capacity, which **DOES** change the disease!

Dopamine Medications in PD

■ Carbidopa/levodopa 25/100 ■ Rasagiline

■ Carbidopa/levodopa CR ■ Pramipexole

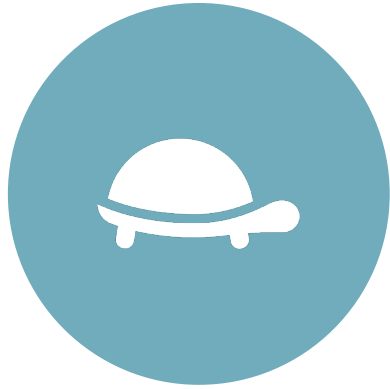
■ Rytary ■ Mirtazapine

■ Entacapone ■ ...and more!!

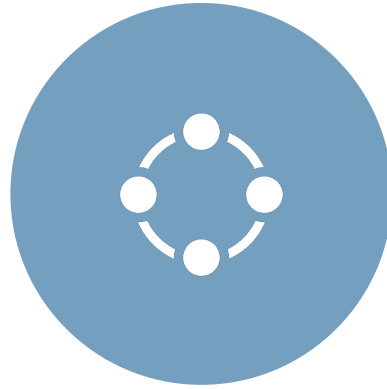
■ Selegiline

Carbidopa/levodopa (Sinemet)

What are symptoms that respond to dopamine medications?



**BRADYKINESIA
(SLOW AND SMALL
MOVEMENTS)**



**RIGIDITY
(STIFFNESS)**



TREMOR

What are symptoms that do NOT respond to dopamine medications?

Balance

Freezing of gait

Drooling

Cognitive
symptoms

Autonomic issues
(low blood
pressure)

Fatigue/energy
levels

Mood symptoms

What are some side effects of dopamine medications?

- Side effects are usually due to inert carbidopa/levodopa converting to active form OUTSIDE of the brain



Nausea



**Dizziness/light
headedness**



**Low blood
pressure**

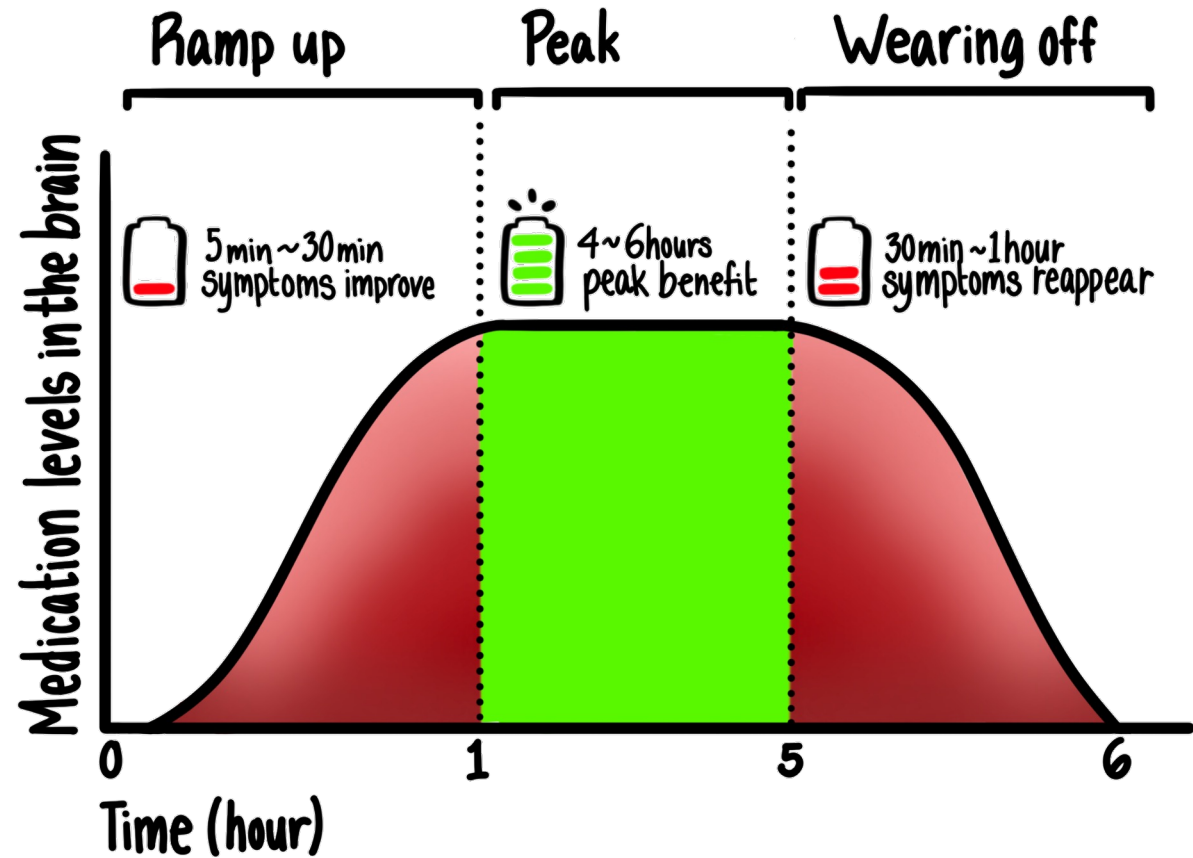


Flushing



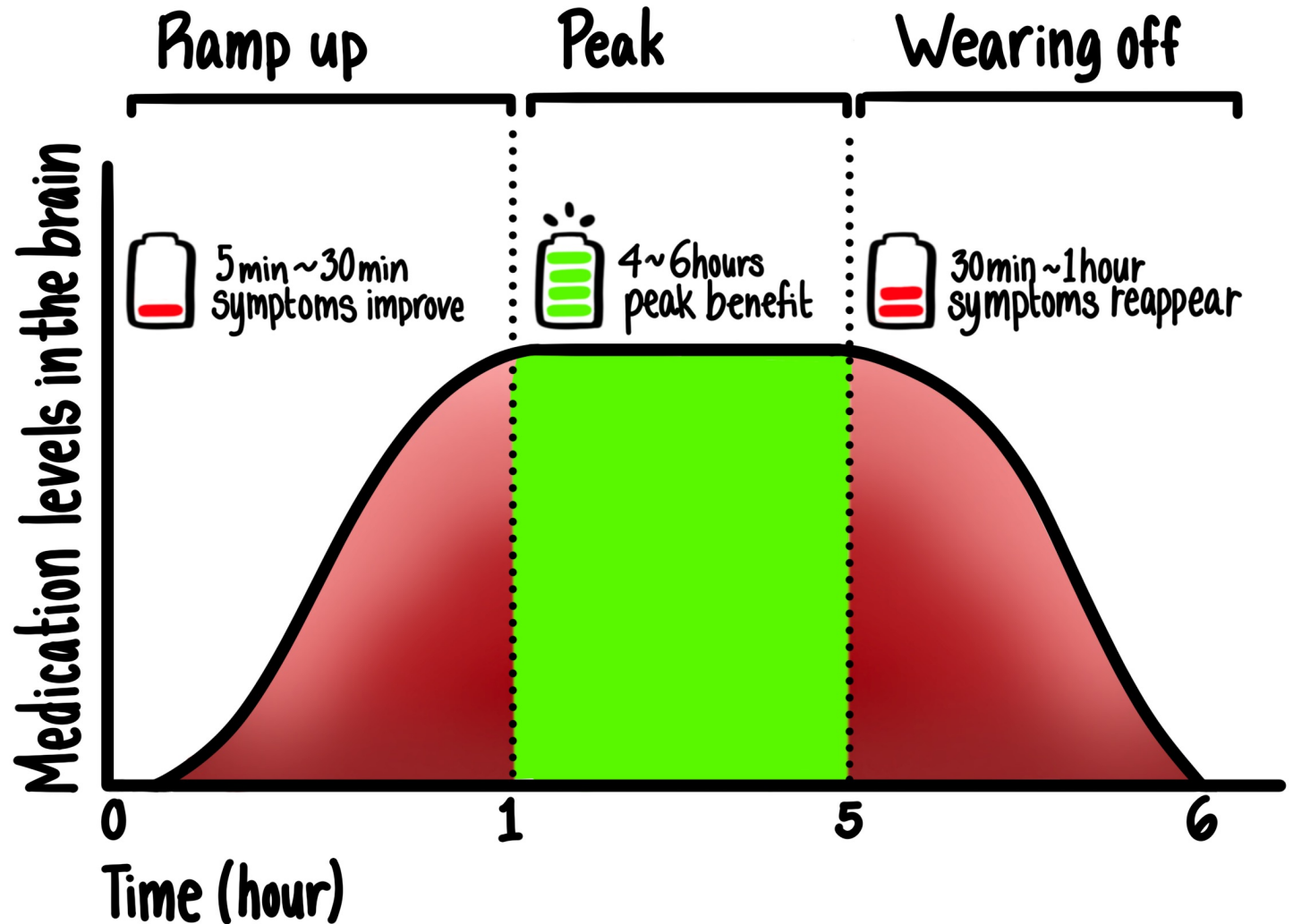
**“Not feeling
good”**

Typical Dopamine Curve

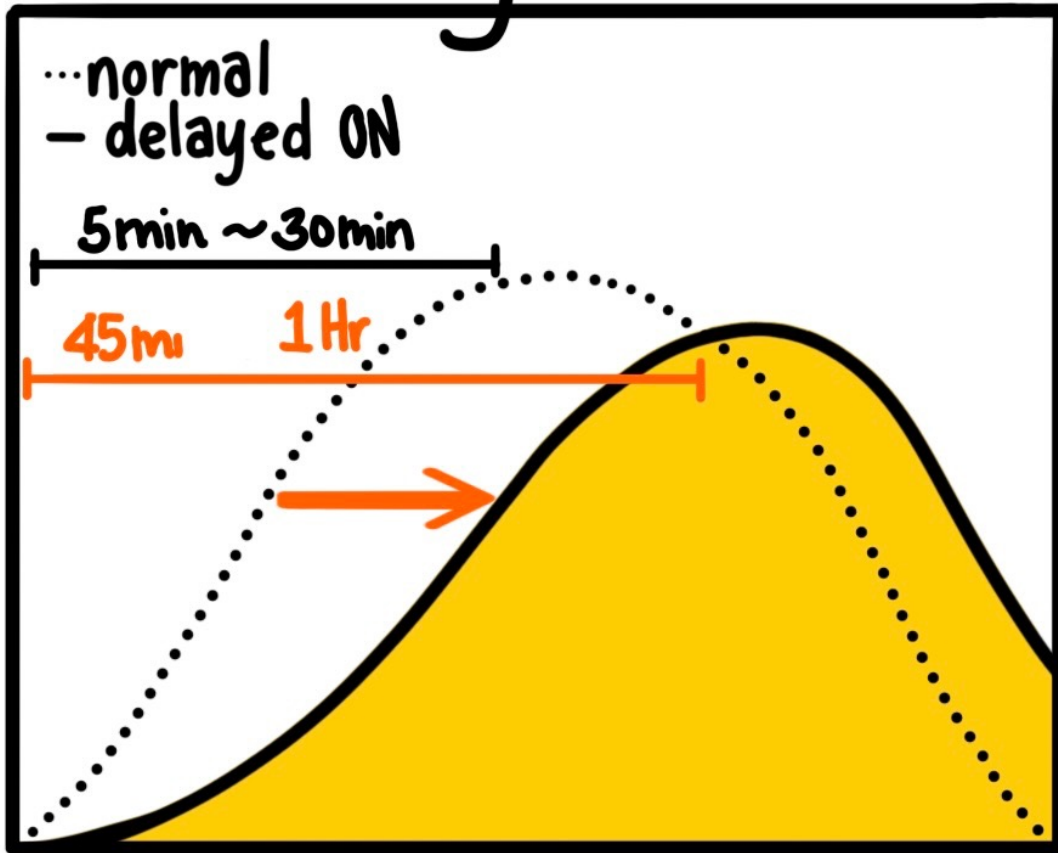


Ramping ON

- Time it takes for the medicine to be absorbed through the gut and enter the brain!
- 5 – 30 minutes



Delayed ON



- When the ramping ON takes longer than usual
- Questions to know
 - How long is your ramping ON period?
 - Are there any factors contributing to the delay?
 - Are you eating food with your dose?

Good Benefit!!

The optimal effect of your medication

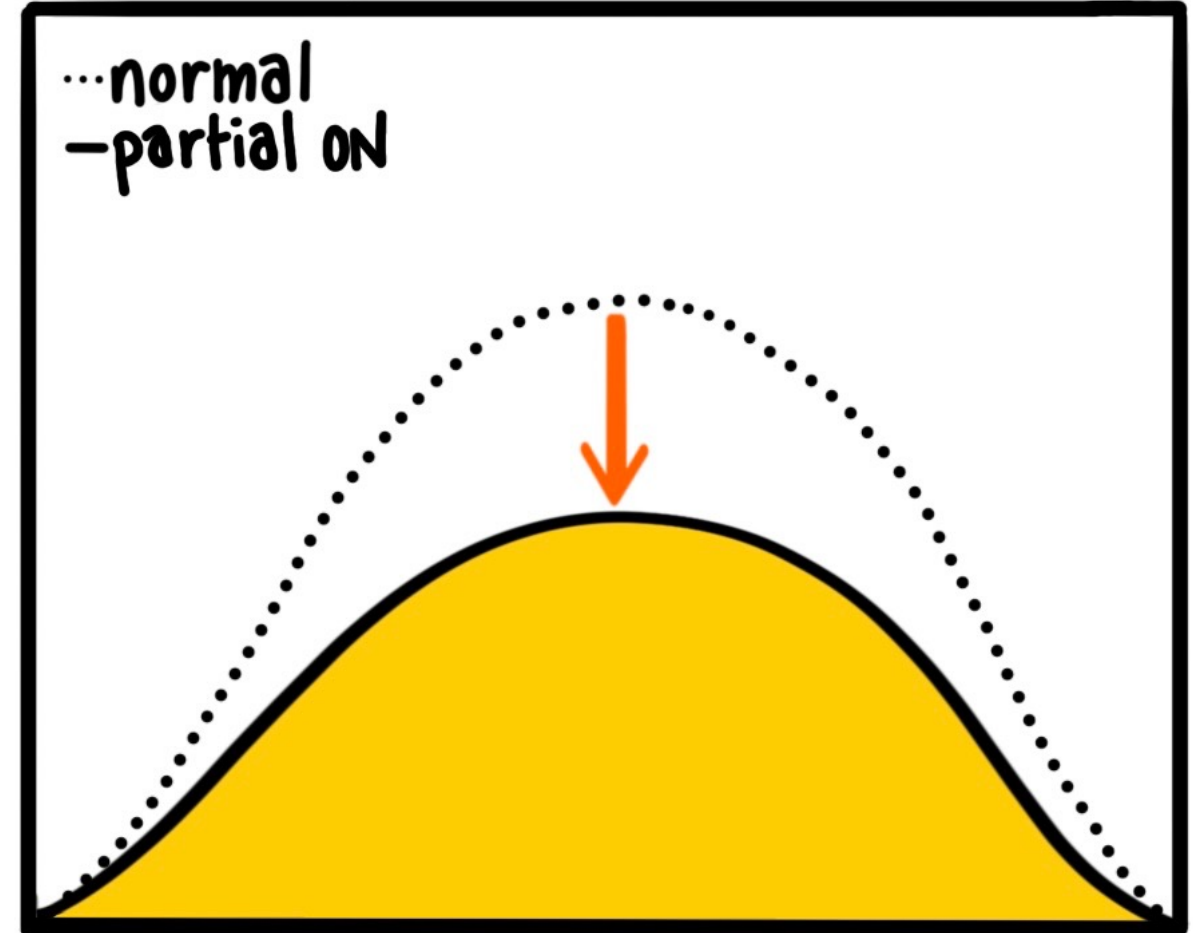
Questions to know:

How good is this benefit? 50%? 90%?

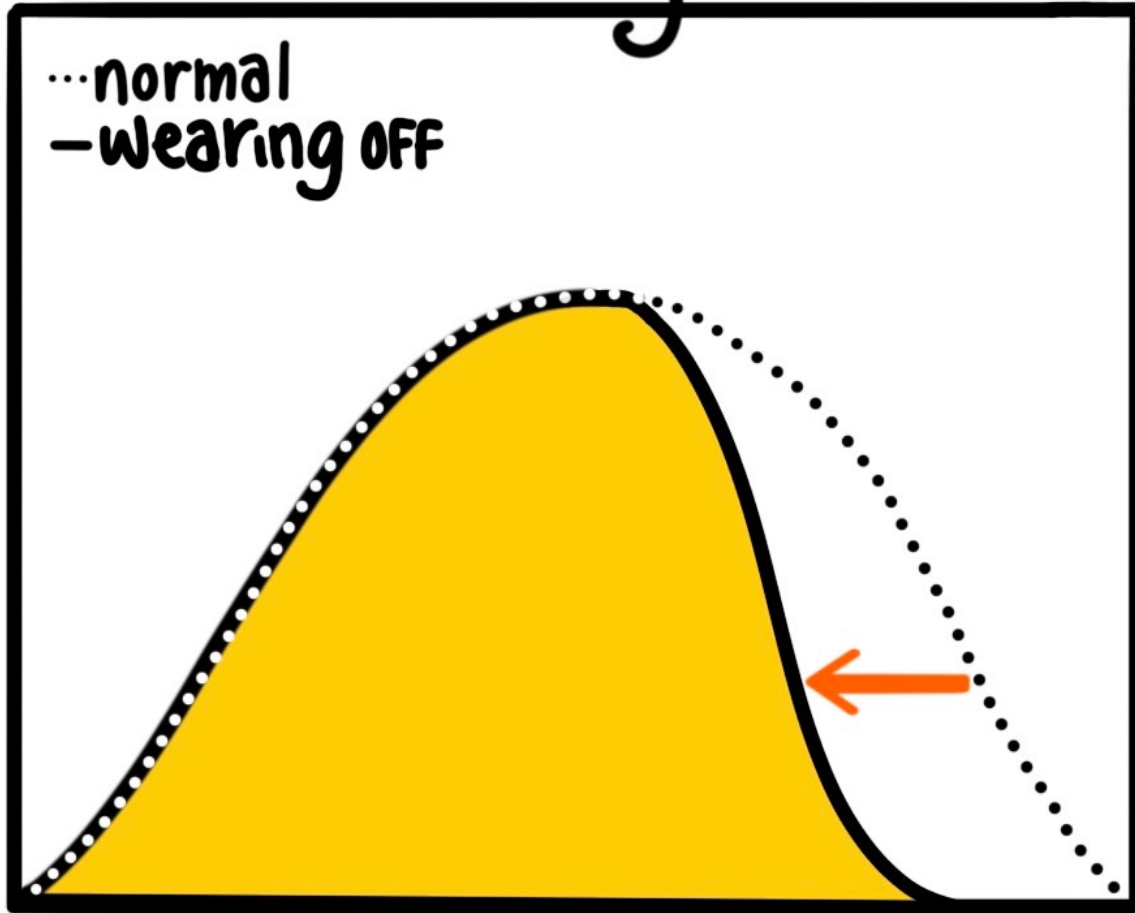
How long does it last for?

Is it consistent with every dose?

Partial ON

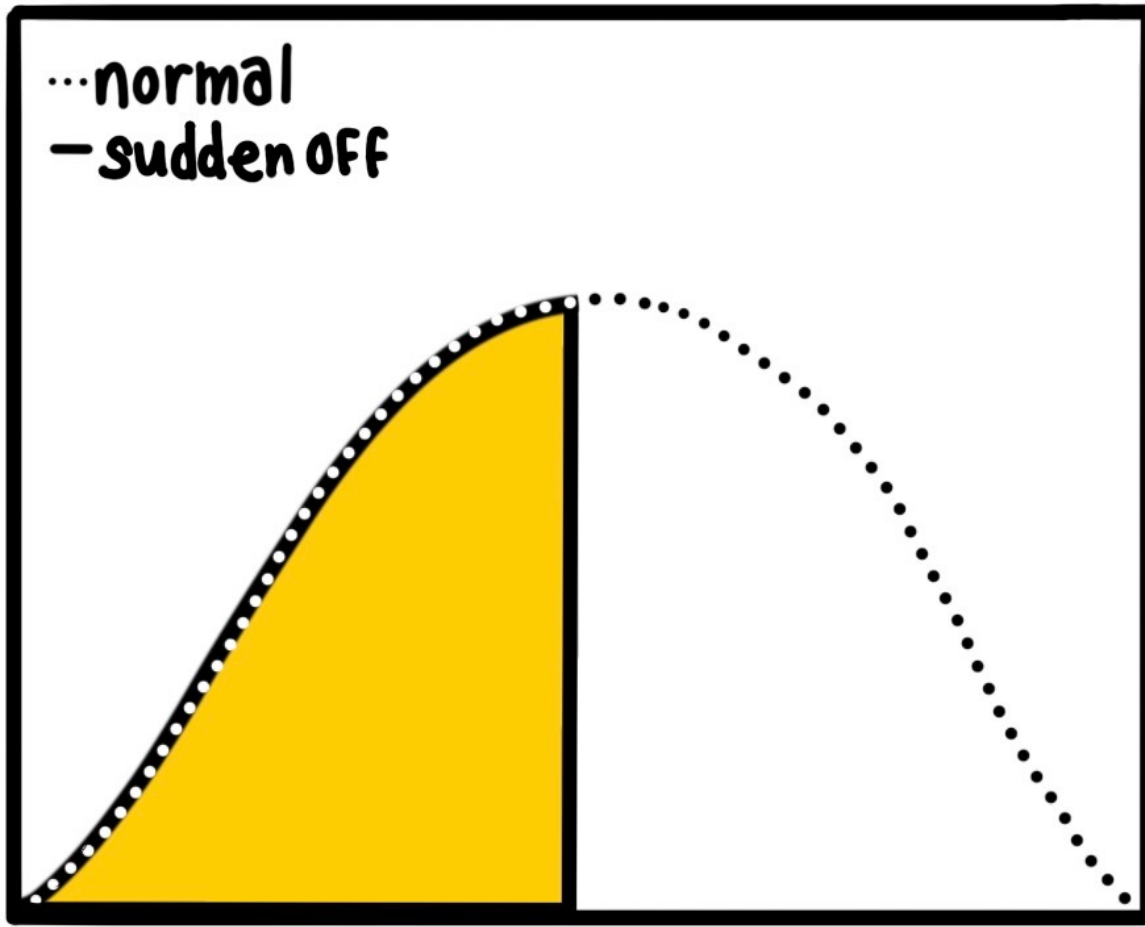


Wearing OFF



- When the medications are leaving your system. Benefit starts to wear off and some symptoms start coming back
- Questions to know
 - When does wearing off start for you?
 - How long is your wearing off period?

Sudden OFF



- When the medications seen to suddenly stop working
- Questions to know
 - Are there any stressors happening around the same time?
 - Is this happening consistently or randomly?



Now, to throw a
monkey wrench
into the mix!

What about Dyskinesias?

- Dyskinesias are uncontrolled, involuntary movements of the body
- Some descriptors:
 - The Dancer
 - The Wiggles
 - Restless or Listless
 - Chewing gum



Dyskinesia Features

- Cause: Related to the changes of dopamine levels in the brain
- Distribution: can occur in one body part or multiple body parts
- Involuntary means: patients are not aware of doing it themselves!
- Not painful BUT can interfere with activities
- Not permanent, goes away when dopamine levels stabilize



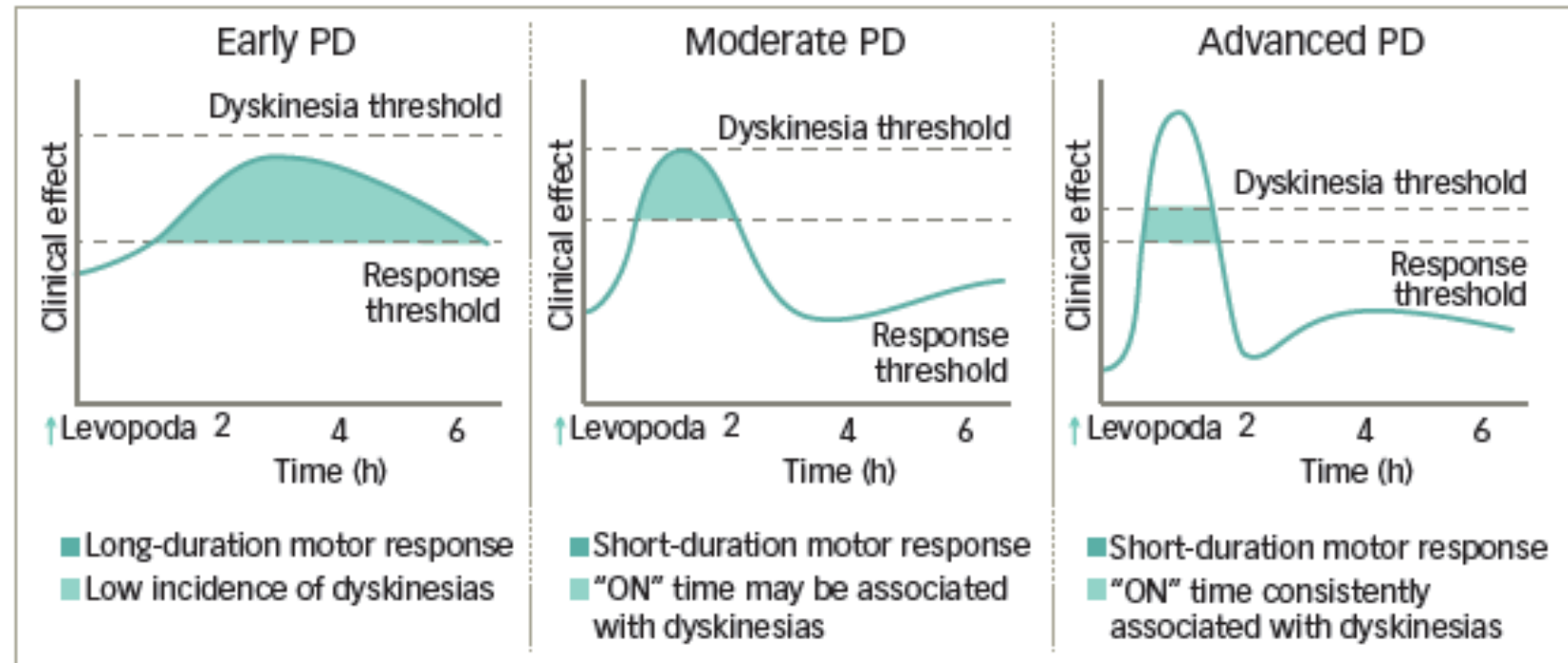
When do I get Dyskinesias?

- Peak dose dyskinesia
- Wearing off dyskinesias
- Peak and wearing off dyskinesias
- Stress induced

... Basically, any situation!!

Why do I Care?

- This is helpful to guide you and your neurologist in adjustments!
- Response patterns change with disease progression



PD = Parkinson's disease. Adapted from Longo et al., 2011.³⁰



Thank you and question time!

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