



TREATING PARKINSON'S DISEASE SYMPTOMS

FIVE QUESTIONS FOR... SHARED DECISION-MAKING FOR TREATING PARKINSON'S DISEASE SYMPTOMS

Shared decision-making helps patients and their health care providers make decisions together. Health care decisions should consider the best evidence and the patient's health care goals. This guide will help you and your neurologist talk about:

- What therapies work best
- The side effects and risks of treatment
- How the treatment might affect your quality of life
- How cost will affect your decision

1. WHAT IS PARKINSON'S DISEASE?

Parkinson's disease (PD) is a progressive disorder where patients slowly lose neurologic functions. PD causes a drop in dopamine levels. Dopamine is a chemical that sends messages from the brain to parts of the body and controls movements. Over time, a person with PD becomes unable to control their movements.

2. HOW WILL PARKINSON'S DISEASE AFFECT ME?

PD causes both motor and non-motor symptoms. Motor symptoms include tremor, slowness, rigidity, and walking difficulties. Non-motor symptoms may include cognitive impairment, sleep troubles, constipation, and depression. This shared decision-making tool will help patients and their doctor discuss these issues.

3. WHAT DRUGS CAN BE USED TO TREAT THE MOTOR SYMPTOMS OF PARKINSON'S DISEASE?

People with PD are often wary to start medications. They are concerned that starting drugs will speed up the disease or will stop working. There is no evidence to support these concerns. If PD symptoms are affecting quality of life or work performance there is no benefit to delaying therapy. In fact, there may be an increased risk of unsteadiness, falls, and fractures.

Drugs can improve the symptoms of Parkinson's disease. Options early in the disease include:

Drug	How it works	Potential risks and side effects
Carbidopa / Levodopa	<ul style="list-style-type: none"> • Creates more dopamine in the brain • Used to treat the stiffness, tremors, and slowness of movement • Shown to provide more motor benefit • Sustained-release isn't better than immediate-release • Prescribed together to increase effectiveness • Comes as a regular tablet, an orally dissolving tablet, and a long-acting tablet • Usually taken three or four times a day 	<ul style="list-style-type: none"> • Associated with a higher risk of involuntary movements, such as twitching or repetitive movements of the tongue, face, arms, or legs • Changes in mood or behaviors • Sleepiness • Nausea • Lightheadedness • Dizziness
MAO-B Inhibitors <i>(Selegiline, Rasagiline)</i>	<ul style="list-style-type: none"> • Prevents the breakdown of dopamine in the brain • Has a very mild impact on symptoms • Used alone or with other drugs • Comes as a capsule and an orally dissolving tablet • Usually taken twice a day 	<ul style="list-style-type: none"> • Muscle pain or stiffness • Trouble sleeping • Increased risk of hypertension • Stomach/abdominal pain
Dopamine agonists <i>(Apomorphine, Pramipexolole, Ropinirole, Rotigotine)</i>	<ul style="list-style-type: none"> • Stimulates the receptors in the brain that normally would be stimulated by dopamine • May be used in the early stages of PD to reduce symptoms • Taken orally, by patch, or via injection • Usually taken once a day or three times per day 	<ul style="list-style-type: none"> • Impulse control disorders • Impulsivity symptoms such as weight gain, gambling/spending, hyper sexuality • Sleepiness • Swelling of the legs
Amantadine	<ul style="list-style-type: none"> • Comes as a capsule and liquid • Usually taken once or twice a day 	<ul style="list-style-type: none"> • Depression or anxiety • Blurred vision • Dizziness • Lightheadedness • Trouble sleeping • Swelling and redness of the legs
Anticholinergics	<ul style="list-style-type: none"> • Helps control tremor and stiffness in the muscles of the arms, legs, and body • May be used in people whose main symptom is tremor 	<ul style="list-style-type: none"> • Constipation • Difficult or painful urination • Dryness in the mouth nose and throat • Blurred vision
COMT-Inhibitors <i>(Entacapone, Tolcapone)</i>	<ul style="list-style-type: none"> • Makes more levodopa in the brain available to help reduce PD symptoms • Used in combination with levodopa • Entacapone is prescribed with each dose of levodopa • Tolcapone is taken three times a day, no matter how many doses of levodopa are prescribed 	<ul style="list-style-type: none"> • May exaggerate some levodopa-related side effects especially dyskinesia • Confusion • Hallucinations • Diarrhea

4. HOW CAN I TALK WITH MY DOCTOR ABOUT REACHING A DECISION?

- Decide if you need more information to make the decision.
- Talk with your doctor about studies with good data and the possible risks and benefits of these treatments.
- Discuss if there are any risks that concern you more than the others.
- Talk about the cost of these treatments and if insurance covers the costs.

5. WHAT IS THE EVIDENCE?

- Miyasaki, JM; Martin, Suchowersky, WO; et al. *Practice parameter: Initiation of treatment for Parkinson's disease: An evidence-based review: Report of the Quality Standards Subcommittee of the American Academy of Neurology*. Neurology 2002;58;11-17

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