MEDICATION MANAGEMENT OF MOTOR SYMPTOMS IN PARKINSON DISEASE (PD)

PD is a progressive movement disorder characterized by a loss of dopamine in the brain. Dopamine is a chemical in the brain that helps initiate smooth movements, so a loss of dopamine over time results in difficulty executing movements.





Tremor uncontrollable shaking

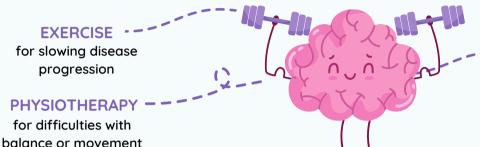


Rigidity stiff movements



Bradykinesia slow movements

WHAT ARE SOME NON-DRUG STRATEGIES FOR MANAGING THE MOTOR SYMPTOMS OF PD?



OCCUPATIONAL THERAPY

for difficulties with activities of daily living such as cooking, cleaning, bathing, shopping, etc.

COMMON MEDICATIONS USED IN PD

MAO-B Inhibitors

(rasagiline, selegiline, safinamide)

How it works

Stops dopamine from being broken down in the brain

Safety

Dyskinesias (lower risk), nausea/vomiting, low blood pressure, confusion, hallucinations

Efficacy

Least effective for motor symptoms



Dopamine Agonists

(ropinirole, pramipexole, rotigotine)

How it works

Mimics the effect of dopamine in the brain

Safety

Impulse control disorder (e.g. pathological gambling, hypersexual behaviour), daytime drowsiness, dyskinesias (lower risk), nausea/vomiting, low blood pressure, confusion, hallucinations

Efficacy

Moderately effective for motor symptoms



Levodopa/Carbidopa

How it works

Increases the amount of dopamine in the brain

Safety

Dyskinesias (higher risk), nausea/vomiting, low blood pressure, confusion, hallucinations

Efficacy

Most effective for motor symptoms



More Effective



