AMANTADINE

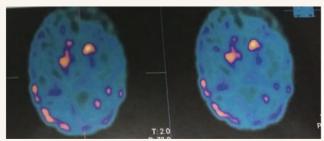
Some side effects associated with amantadine include hallucinations, confusion, jerky movements, a purple skin rash over the wrists and ankles (called 'livedo reticularis'), swelling of the legs, decreased sleep, nightmares, decreased appetite, and headache. Rarely, it can cause blurring of vision.



ANTICHOLINERGICS

Anticholinergics are poorly tolerated in older patients due to multiple side effects. These include dryness of mouth, blurring of vision, confusion, memory issues, inability to pass urine, and giddiness.







Prepared by National Parkinson Network , Movement Disorders Society Of India



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SIDE-EFFECTS OF MEDICINES USED TO TREAT PARKINSON'S DISEASE



LEVODOPA/ LEVODOPA-CARBIDOPA

Levodopa can induce nausea and vomiting, giddiness, increased sleepiness, headache and lowering of the blood pressure. Less commonly, it can cause confusion and hallucinations (hearing, seeing things that are not there). Some of these side effects, such as nausea and vomiting, are reduced by using the combination of levodopa and carbidopa. It is also important to start at a low dose and build up the dose gradually to avoid these side effects. Long-term use of levodopa is associated with the development of involuntary body movements called 'dyskinesias' as well as 'motor fluctuations' in which ON-OFF effects become apparent. Levodopa therapy should not be stopped abruptly. Sudden stoppage of levodopa or levodopa-carbidopa can lead to a very serious complications.

DOPAMINE AGONISTS

Some common side effects include vomiting, low blood nausea, pressure, swelling of the legs, constipation. faintness and Importantly, dopamine agonists may induce psychiatric side effects. These include hallucinations and impulse control disorders. Impulse control disorders can lead to compulsive behaviours, such as excessive shopping, gambling, binge eating and sexual increased behaviour. The family and caregivers often notice these behaviours as the patient may not realize the problem. It is important to report these behaviours to the treating clinician. Impulse control disorders usually improve with dose reduction.

Another important side effect reported with dopamine agonists (pramipexole and ropinirole) is episodes of sudden sleep attacks (called 'sleep attacks'), especially at higher doses. These usually occur when the dose is gradually increased and subside once the dose stabilizes. As a result, patients are advised caution while driving/ operating machinery while on these drugs.

MAO-B INHIBITORS

These are usually well tolerated. Some side effects include nausea and vomiting, fatigue, sleep issues, headache, and dry mouth. In some patients who are also taking antidepressants, the use of MAO-B inhibitors can lead to a serious complication called serotonin syndrome, which includes rapid heart rate, elevated blood pressure, fever, stiffness and tremulousness.

COMT INHIBITORS

COMT inhibitors can worsen dyskinesias. Other side effects associated with these drugs include nausea, diarrhea, vomiting, dizziness, headaches, confusion, dry mouth, hallucinations and orange discoloration of urine and tears.

