

Parkinson's disease



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Parkinson's Disease Parkinson's disease is a neurological disorder most often seen in individuals over the age of 50. It is prevalent in 2 out of every 1, 000 people and was first observed in England by a Dr. Parkinson. The symptoms of Parkinson's include tremors, lack of coordination and dementia (Larkin, 2007). The current medications which are used to treat the symptoms of Parkinson's are Amantadine and Levodopa, which are 2 of several medications to alleviate the symptoms associated with the disease.

The drug known as Amantadine is relatively common as a choice to treat Parkinson's Disease associated symptoms, but has also proven to be an inappropriate treatment choice in patients with a history of psychosis or seizures. Amantadine may also be used to treat outbreaks of influenza A in humans. The problems experienced with the use of Amantadine is that its side effects are almost as bothersome or adverse as the symptoms that it is meant to treat. It is also lethal if taken by patients with renal conditions or with renal failure. Amantadine essentially is flushed out of the body via urine. In cases of renal failure however, a patient's body may not effectively excrete the amount of Amantidine expected to be expelled by the body per normal dosage.

When researching this particular medication, it is quite difficult to ascertain all of the facts surrounding its potency and effectiveness. Medline Plus provides only an approximation of what a dosage might be in patients prescribed this medication, as well as a few possible side effects that may be experienced. Another site known as mental health. com, describes in more detail, the pharmacology of Amantadine which is also known as Symmetrel. This source explains that Amantadine works by allowing the brain to release dopamine from nerve endings. This allows for available dopamine excretion

which then activates dopaminergic receptors. (Long M. D., 1995). Among the few sources discussed thus far, the depth to which the antiparkinson's drug known as Amantadine was examined was somewhat vague and lacking in detail or argument as to why this drug supersedes the potency or effectiveness of other antiparkinson's medications. A more thorough source which detailed a double blind study by Thomas et al effectively described the specifics of Amantadine's use in patients with Parkinson's Disease as well as how those patients benefit from this particular drug which possesses a still unknown mechanism of effectiveness (Thomas et al, 2004).

The drug known as Levodopa is another drug to consider in the treatment of the symptoms of Parkinson's Disease. According to Medline Plus, the combination of Levodopa and Carbidopa actually converts to dopamine once in the brain. This is extremely beneficial to Parkinson's patients as the lack of dopamine which they experience due to their disease, is thought to be the reason for their poor coordination, shaking and stiffness. This is a different mode of action than what is thought to occur in Amantadine as Amantadine is thought to stimulate dopamine production versus actually turning into the important brain chemical itself, which is what Levodopa and Carbidopa do by synergistic means (Medline Plus, 2006).

After the review of the following list of sources, it is concluded that not only should each source be more thorough in listing the adverse effects of both of the afore mentioned Parkinson's treatments but should also recommend alternative medications for patients with renal or psychological impairments. Though not entirely researched and perhaps not yet as cost efficient as prescription medicines, it is recommended that stem cell therapy be used in the treatment of neural degeneration of Parkinson's Disease versus utilizing

medications which merely alleviate symptoms and yield adverse side effects.

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