Presentation
Madopar contains a combination of levodopa and the decarboxylase inhibitor benserazide in the ratio of 4:1. Madopar 62.5 capsules containing 50mg levodopa and 12.5mg benserazide hydrochloride (equivalent to 12.5mg of the base) Madopar 125 capsules containing 100mg levodopa and 25mg benserazide hydrochloride (equivalent to 25mg of the base) Madopar 250 capsules containing 200mg levodopa and 50mg benserazide hydrochloride (equivalent to 50mg of the base).

Indications
Parkinsonism – idiopathic, post-encephalitic

Dosage
Dosage is variable and the dosage sheet should be consulted for full details. The effective daily dose usually lies between four and eight capsules of Madopar 125 (two to four capsules of Madopar 250) daily in divided doses. Most patients require no more than six capsules of Madopar 125 daily. In some elderly patients initial treatment with one capsule of Madopar 62.5 once or twice daily, increasing by one capsule every third or fourth day may suffice. Patients who experience fluctuations in response may also benefit from administration of smaller more frequent doses using Madopar 62.5.

Contra-indications
Narrow-angle glaucoma, severe psychoneuroses or psychoses. It should not be given in conjunction with monoamine oxidase inhibitors or within two weeks of their withdrawal, to patients under 25 years of age, to pregnant women, or to patients who have a history of, or who may be suffering from, a malignant melanoma.

Precautions
Drugs which interfere with central amine mechanisms should be avoided. Endocrine, renal, pulmonary or cardiovascular disease, hepatic disorder, peptic ulcer, osteoporosis, sympathomimetic drugs, antihypertensive drugs. Patients who improve on Madopar therapy should be advised to resume normal activities gradually as rapid mobilisation may increase the risk of injury.

Side-effects
Nausea and vomiting, cardiovascular disturbances, psychiatric disturbances, involuntary movements.

Packings
Madopar 62.5 capsules, Madopar 125 capsules and Madopar 250 capsules in packings of 100.

Licence Numbers
0031/0125 (Madopar 62.5 capsules), 0031/0073 (Madopar 125 capsules), 0031/0074 (Madopar 250 capsules).

Basic NHS Cost
Madopar capsules 62.5 £5.41 per 100
Madopar capsules 125 £9.76 per 100
Madopar capsules 250 £17.47 per 100

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Indications: Epilepsy (grand mal and temporal lobe), trigeminal neuralgia. Dosage in epilepsy: Use a gradually increasing dosage scheme, adjusting to patient's needs.

Adults: 100-200 mg once or twice daily, increasing slowly up to 800-1,200 mg daily, in some cases 1,600 mg daily may be necessary. Children: up to 1 year old, 100-200 mg daily; aged 1-5 years, 200-400 mg daily; aged 5-10 years, 400-600 mg daily; aged 10-15 years, 600-1,000 mg daily. It may be helpful to monitor plasma drug levels. Optimum therapeutic range is 3-10 μg/ml (13-42 μmol/L). Dosage in trigeminal neuralgia: Begin with small doses, using 100 mg tablets or syrup, and increase gradually until satisfactory therapeutic response is obtained. 200 mg 3-4 times daily is generally sufficient to maintain pain-free state. Side effects: Dizziness and diplopia (usually dose-dependent), less frequently drowsiness, dry mouth, diarrhoea, nausea and vomiting. Generalised erythematous rash, disappearing on cessation of therapy. Isolated reports of oedema, hypotension, exfoliative dermatitis, leucopenia, thrombocytopenia, agranulocytosis, aplastic anaemia, cholestasis, jaundice and acute renal failure. Blood count should be checked in early stages of treatment. Precautions: Caution in patients taking oral anticoagulants or requiring oral contraception. In pregnancy, potential benefits of Tegretol must be weighed against potential hazards. Do not administer with, or within two weeks of cessation of, MAOI therapy. In rats treated with carbamazepine for two years, incidence of liver tumours increased (no evidence of significant bearing on the therapeutic use of the drug). Serum folate levels should be observed during anticonvulsant therapy. Contra-indications: Previous drug sensitivity to Tegretol. Do not administer to patients with atrioventricular conduction abnormalities unless paced. Packs: Tablets of 100 mg (PL 0003/15027) basic NHS price £2.99 per 100, £1.45 per 500; tablets of 200 mg (PL 0003/15028) £3.56 per 100, £2.67 per 500, tablets of 400 mg (PL 0003/00888) £10.92 per 100, syrup 100 mg/5 ml (PL 0003/0056) £3.34 per 300 ml bottle. Full prescribing information is available on request from Geigy Pharmaceuticals, Horsham, West Sussex.
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ABRIDGED PRODUCT INFORMATION

Full prescribing information is available on request and should be consulted before prescribing.

Indications
Parkinson's disease and syndrome.
Dosage and administration
Dosage variable.
Patients not receiving levodopa
Usually 1 tablet of 'Sinemet-Plus' three times a day. Adjust as necessary. Maximum daily dose is 8 tablets. If more levodopa required, substitute 'Sinemet-275' 1 tablet three or four times a day. If further titration needed, increase 'Sinemet-275' to maximum 8 tablets a day.
Patients receiving levodopa
Discontinue levodopa at least twelve hours (24 hours for slow-release preparations) before starting 'Sinemet'. Dose of 'Sinemet' approximately 20% of previous daily dosage of levodopa. Usual starting dose 'Sinemet-275' 1 tablet three or four times a day. Patients requiring less than 1,500 mg levodopa a day start with 'Sinemet-Plus' 1 tablet three or four times a day. Maximum is 8 tablets a day.

Contra-indications
Narrow-angle glaucoma; known hypersensitivity. Do not use in patients with history of melanoma or with suspected undiagnosed skin lesions. Discontinue MAO inhibitors at least two weeks before starting 'Sinemet'.

Pregnancy and lactation
Not recommended in lactating mothers. Use in women of childbearing potential requires that anticipated benefits be weighed against possible hazards should pregnancy occur.

Precautions
Not recommended for drug-induced Parkinsonism. Use cautiously in patients with severe cardiovascular or pulmonary disease, bronchial asthma, renal, hepatic, endocrine disease, psychoses, chronic wide-angle glaucoma, with a history of myocardial infarction; and when receiving antihypertensives (adjust dosage if necessary). Monitor carefully for mental changes, depression with suicidal tendencies, and other serious antisocial behaviour. Observe carefully patients with history of severe involuntary movements or psychoses when 'Sinemet' substituted for levodopa.
GI haemorrhage may occur in patients with history of peptic ulcer. If general anaesthesia is required, 'Sinemet' may be continued whilst patient permitted oral intake. Usual daily dosage may be given when oral medication is possible.
Transient abnormalities in renal function tests, liver function tests, and protein-bound iodine may occur without evidence of disease. Not recommended for children under 18 years of age.

Side effects
Choreaform, dystonic, and other involuntary movements are most common. Other mental changes are less common. Less frequent are cardiovascular irregularities, the 'on-off' phenomenon, GI intolerance, and dizziness.
Rarely, GI bleeding, duodenal ulcer, hypertension, phlebitis, leucopenia, and agranulocytosis.
Positive Coombs test reported but haemolytic anaemia extremely rare.
Other side effects include psychiatric, neurological, GI, dermatological, respiratory, urogenital, special senses, hot flushes, weight gain or loss, and abnormalities in laboratory tests.

Basic NHS cost
'Sinemet-Plus' (25 mg carbidopa/100 mg levodopa BP) tablets £13.07 per 100 pack;
'Sinemet-275' (25 mg carbidopa/250 mg levodopa BP) tablets £14.89 per 100 pack;
'Sinemet-110' (10 mg carbidopa/100 mg levodopa BP) tablets £7.70 per 100 pack.

Product licence numbers
'Sinemet-Plus' 0025/0180
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'Sinemet-110', 0025/0064
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Issued April 1983

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