

**WHEN
PARKINSON'S DISEASE
TURNS THE
MORNING SHAVE INTO
A NIGHTMARE**

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levodopa 100 mg, MSD

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SINEMET[®]

Carbidopa and levodopa, MSD

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 suspicious 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

Choreiform, 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', 0025/0150

'Sinemet'-275, 0025/0085

'Sinemet'-110, 0025/0084

⊙ denotes registered trademark

⊕ denotes trademark

Issued April 1983



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Presentation

4+1 *the right balance in Parkinson's disease*

Indications

Dosage

Contra-indications

Precautions

Side-effects

Packings

Licence Numbers

Basic NHS Cost

100 mg tablets
50 mg tablets
25 mg tablets
100 mg capsules
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50 mg sachets
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Contemporary Neurology

Editor: Michael J G Harrison, DM, FRCP

February 1984 640 pages 0 407 00308 8 £19.50 approx

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Editor: Sidney Crown, PhD, FRCP, FPCPsych

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These volumes contain a series of critical reviews of key topics in neurology and psychiatry respectively. Written by experts and enthusiasts in each field, the reviews draw together established knowledge and new research to present a coherent and authoritative overview of each subject.

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The proceedings of the Joint Meeting of the European Chapters of the International Association for the Study of Pain held in May 1983—essential reading for all those concerned with the management of pain.

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OM P Sharma, BSc, MB BS, FACP, FCCP, DTM & H(Eng)

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April 1984 216 pages 0 407 00326 6 £36.00 approx

For a leaflet giving full details of these and other neurology and psychiatry titles please write to:



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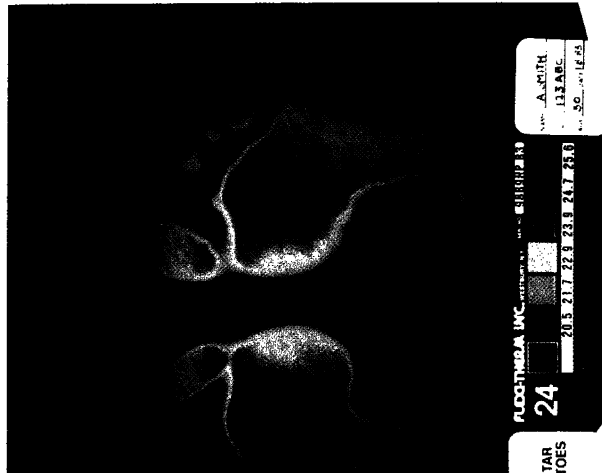
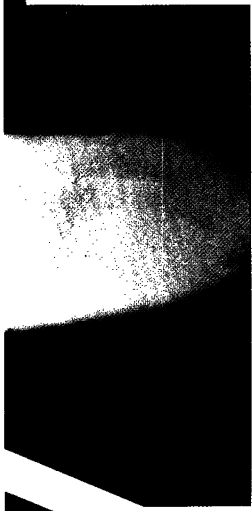
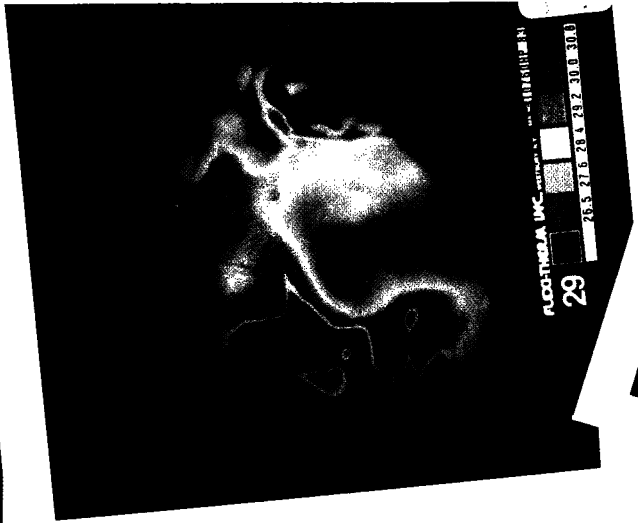
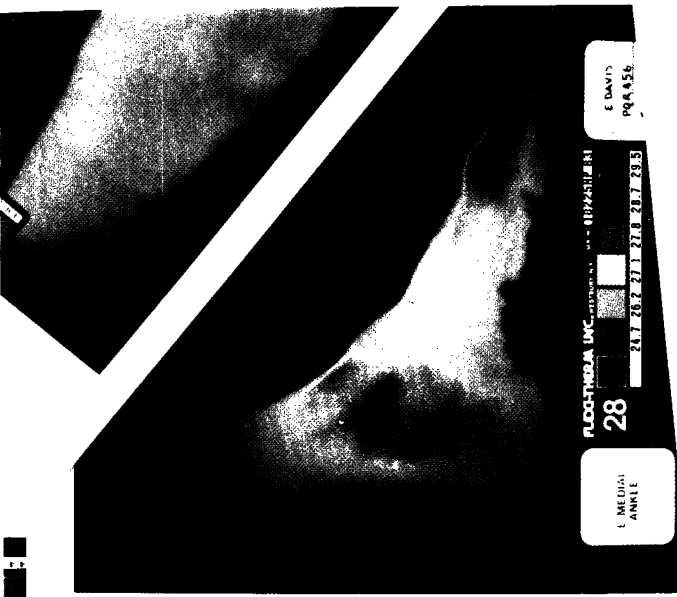
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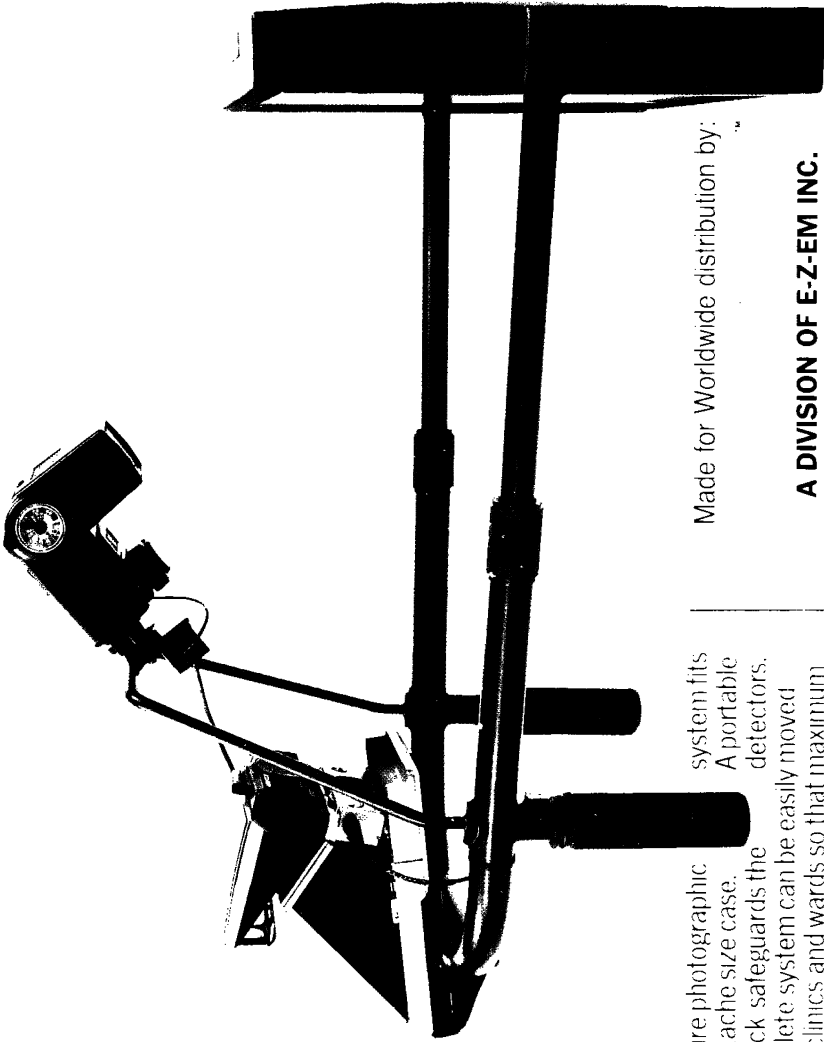
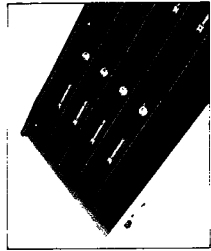
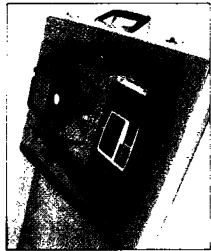
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