

Dopamine agonists and dopamine reuptake inhibitors provide similar quality of life for Parkinson disease patients

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For patients with Parkinson disease on levodopa therapy, patient-rated quality of life is similar for those receiving adjuvant therapy with dopamine agonists compared with dopamine reuptake inhibitors (DRIs); and among DRIs, monoamine oxidase type B (MAO-B) inhibitors are preferable to catechol-O-methyltransferase (COMT) inhibitors, according to a study published online Dec. 28 in *JAMA Neurology*.

Richard Gray, from the University of Oxford in the United Kingdom, and colleagues compared the long-term effects of adding a dopamine agonist versus a DRI (MAO-B inhibitor or COMT inhibitor) to <u>levodopa</u> <u>therapy</u> for patients with motor complications of Parkinson disease. Five hundred patients with idiopathic Parkinson disease who developed uncontrolled motor complications, without dementia, were randomly assigned to an open-label dopamine agonist, MAO-B inhibitor, or COMT inhibitor.

The researchers found that participants in the dopamine agonist group had a mean 39-item Parkinson's Disease Questionnaire (PDQ-39) mobility score that was 2.4 points better than the combined MAO-B and COMT groups during a median of 4.5 years, but the difference was not significant. Compared with those in the COMT group, participants in the MAO-B group had mean PDQ-39 mobility scores that were 4.2 points better and EuroQol 5-dimension 3-level utility scores that were 0.05 points better; a nonsignificant improvement was also seen in the PDQ-39 summary index, and there was a nonsignificant reduction in dementia. The outcomes were similar when dopamine agonists were compared with MAO-B inhibitors only.

"The MAO-B inhibitors produced <u>disease control</u> that was equivalent to that of dopamine agonists, which suggests that MAO-B inhibitors might be underused as <u>adjuvant therapy</u> for the treatment of people with Parkinson disease," the authors write.



More information: Richard Gray et al, Long-term Effectiveness of Adjuvant Treatment With Catechol-O-Methyltransferase or Monoamine Oxidase B Inhibitors Compared With Dopamine Agonists Among Patients With Parkinson Disease Uncontrolled by Levodopa Therapy, *JAMA Neurology* (2021). DOI: 10.1001/jamaneurol.2021.4736

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