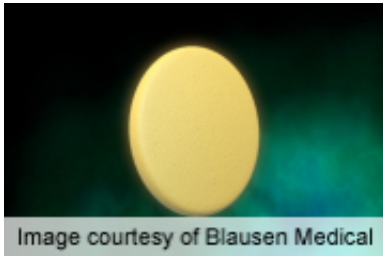


Cost of meds contributes to placebo effect in Parkinson's

29 January 2015



(HealthDay)—Results of a small study suggest that Parkinson's patients seem to improve if they think they're taking a costly medication. The findings have been published online Jan. 28 in *Neurology*.

In the study, 12 [patients](#) had their movement symptoms evaluated hourly, for about four hours after receiving each of the placebos. On average, patients had bigger short-term improvements in symptoms like tremor and muscle stiffness when they were told they were getting the costlier of two drugs. In reality, both "drugs" were nothing more than saline, given by injection. But the study patients were told that one drug was a new medication priced at \$1,500 a dose, while the other cost just \$100—though, the researchers assured them, the medications were expected to have similar effects.

Yet, the researchers found that when patients' movement symptoms were evaluated in the hours after receiving the fake drugs, they showed greater improvements with the pricey placebo. What's more, [magnetic resonance imaging](#) scans showed differences in the patients' [brain activity](#), depending on which placebo they'd received. The patients in the study didn't get as much relief from the two placebos as they did from their regular medication, levodopa. But the magnitude of the expensive placebo's benefit was about halfway between that

of the cheap placebo and levodopa. What's more, patients' brain activity on the pricey [placebo](#) was similar to what was seen with levodopa.

And this effect is "not exclusive to Parkinson's," according to Peter LeWitt, M.D., a neurologist at the Henry Ford West Bloomfield Hospital in Michigan, who wrote an editorial published with the study. Research has documented the [placebo effect](#) in various medical conditions, he told *HealthDay*. "The main message here is that medication effects can be modulated by factors that consumers are not aware of—including perceptions of price."

More information: [Abstract](#)

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