

Under-dosing worsens prognosis for PD patients with infection

1 April 2016



versus 595 mg; P

"Decreased anti-Parkinson [treatment](#) is associated with increased risk for in-hospital mortality, worse discharge destination, and shorter time until next hospitalization," the authors write.

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(HealthDay)—For patients with Parkinson's disease (PD) admitted to the hospital, decreased treatment is associated with worse prognosis, according to a letter to the editor published online March 25 in *CNS Neuroscience & Therapeutics*.

Omer Segal, from Tel Aviv University in Israel, and colleagues conducted a retrospective study of consecutive PD patients diagnosed with pneumonia, urinary tract infection (UTI), or both and hospitalized to internal medicine departments. The medical records for 1,171 consecutive PD patients were reviewed; 205 patients were included in the analysis.

Of the patients, 52.2 percent were diagnosed with pneumonia, 59.5 percent had UTI, and 9.6 percent had both. The researchers found that 50.7 percent of the patients had lower L-dopa equivalent daily dose (LEDD) values upon admission compared with their regular medications. Mean LEDD values were significantly lower at the beginning of hospitalization versus before hospitalization (441.9

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