



최 성 민

전남의대

Movement Disorders Update

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There have been several recent studies that have been of interest. In a double-blind, randomized, placebo-controlled trial (TOLEDO) in PD patients with motor fluctuations, subcutaneous infusion of apomorphine was well tolerated, with a significant reduction in off time compared with placebo. Mild improvements of motor scores in PD patients who were treated with the GLP-1 receptor agonist (Exenatide) compared with placebo. In a secondary analysis of the EARLY-STIM open-label randomized trial, PD patients with early motor complications who were treated with STN-DBS showed decreased neuropsychiatric fluctuations and a 39% decrease of levodopa-equivalent dose than those who were treated with medical therapy alone. In a multicenter, double-blind, placebo-controlled, delayed-start trial (LEAP) of levodopa plus carbidopa in early PD patients, there was no difference in the change of the UPDRS score between early-start and delayed start group. Those result implies that levodopa had no disease modifying effect. In this session, I will discuss the movement disorder update focusing on the recent interesting clinical studies.

Key Words: Movement disorders, Parkinson's disease, Levodopa, Apomorphine, Deep brain stimulation

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