

Article: 1234

Topic: EPV05 - e-Poster 05: Cognitive Neuroscience

Pharmacologic Management of Psychosis in Parkinson'disease.

A. Arous¹, S. Ouanes¹, R. Nefzi¹, F. Amdouni¹, Y. Abid¹

¹PINNEL, RAZI HOSPITAL, Tunis, Tunisia

Background:

Pharmacologic management of psychosis related to parkinson's disease (PD) generally reflects treatment of psychosis in other illnesses and primarily involves use of dopamine antagonists. However, the PD population can be challenging to manage in this respect as many antipsychotics have the potential to worsen PD motor symptoms by blocking dopamine D2 receptors.

Objective:

To be up to date to recent therapies for better management strategy of psychosis symptoms in PD.

Methods: Literatures was reviewed using Medline database. The following keywords were used: Parkinson's disease, psychosis, treatment, pharmacologic.

Results: All "typical" antipsychotics and some "atypical" antipsychotics are likely to aggravate parkinsonism, and should be avoided, specifically with use of risperidone . Laripiprazole and olanzapine were also recently evaluated and resulted in worsening of parkinsonism, and are not recommended for us in PD psychosis .

The results of clozapine have been positive in reducing psychosis without worsening of PD motor symptoms. The results of studies on quetiapine have been mixed with respect to efficacy , although in clinical practice is more widely used owing to ease of use. Pimavanserin, a serotonin 2A receptor inverse agonist, has also been examined as a treatment for PD-related psychosis.

Conclusion:

There are no PD-specific pharmacologic therapies available, and in many areas there are few studies that strongly support the use of any particular therapy. Elimination of exacerbating factors and simplification of drug regimens are the first and most important steps in improvement of such symptoms.