

PK-MERZ IN THE PHARMACOTHERAPY OF PARKINSON'S DISEASE

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Introduction. L-glutamate - the major excitatory neurotransmitter in the brain of humans and animals. Glutamate is found in the CNS of all, since it is not only a neurotransmitter, but also a precursor of other amino acids.

Excitatory neurotransmitter glutamate can cause damage and death of dopaminergic neurons (DA neurons), and therefore the damaging effect of glutamate on neurons is designated by the term "excitatory amino acid toxicity" or "excitotoxicity". Glutamate excitotoxicity mediated by NMDA-receptors, called for a specific antagonist of N-methyl-D-aspartate. Parkinson's disease (PD) accompanied by neuronal loss due to glutamate excitotoxicity, could be a target for the treatment of NMDA-receptor blockers.

The objective of our research was to investigate the clinical efficacy of glutamate blockers in patients with PD.

Materials and methods. Amine derivative of amantadine (amantadine, midantan, midantan, PK-Merz) were assigned to patients with Parkinson's disease as antagonists of glutamate in the neurological clinic. Ukraine has registered amantadine sulfate (PK-Merz).

Results and conclusions. PK-Merz was recommended as a means to BP initial therapy in patients with a predominance of rigidity and hypokinesia. The starting dose for all members of the class of amantadine is 100 mg per day. If necessary, the dose is increased to 100 mg per week to a daily dose of 300 mg in young and middle-aged patients and not more than 200 mg for elderly patients. A further increase in the dose usually does not lead to clinical improvement, but significantly increases the risk of side effects. The maximum daily dose PK-Merz is 600 mg. Since the PC-Merz has a sufficiently long half-life, the daily dose is recommended to be divided into 2 doses. PK-Merz may be effective as monotherapy in the early stages of PD, allowing the delay time of the appointment of levodopa, and as an adjunct to levodopa in the later stages of the disease, helping to lengthen the action of levodopa, a reduction of hyperkinesia caused by levodopa, cupping akinetic crises. Intravenous amantadine sulfate is effective in cases of akinetic crisis and expressed drugs for complications of levodopa therapy, which is an additional indication for its use.

Thus, based on advanced algorithms treat PD, PK-Merz used in clinical practice in the form of monotherapy, including patients treated previously anticholinergics or levodopa is used for reducing dyskinesias, including in the form of intravenous infusions.