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ABSTRACTS

The official Journal of: The Canadian Neurological Society, The Canadian Neurosurgical Society, The Canadian Society of Clinical Neurophysiologists, The Canadian Association of Child Neurology

THE #1 DISPENSED **DOPAMINE AGONIST**

MIRAPEX: Treatment for all stages of Parkinson's



pramipexole dihydrochloride) Moving towards easier patient management



- Effective monotherapy in early disease^{2,3}
- Effective adjunct to levodopa in advancing disease 4,5
- Simple titration schedule⁵
 titrate to effective dose in just 3 weeks
- Generally well tolerated⁵
- Non-ergot derived dopamine agonist^{5,*}

* Clinical significance has not been established.

MIRAPEX is indicated in the treatment of the signs and symptoms of idiopathic Parkinson's disease. MIRAPEX may be used both as early therapy, without concomitant levodopa and as an adjunct to

See prescribing information for complete warnings, precautions, dosing and indications.

Early disease side effects (≥10% incidence) include nausea, dizziness, somnolence, insomnia, asthenia

Advanced disease side effects (≥10%) are postural (orthostatic) hypotension, dyskinesia, hallucinations, insomnia, dizziness, accidental injury, dream abnormality, constipation and confusion.⁵

Patients should be carefully monitored for signs and symptoms of hypotension, and informed of risk, especially during dose titration.5

Caution should be exercised in patients with renal insufficiency.5

Patients receiving treatment with MIRAPEX (pramipexole) and other dopamine agents have reported suddenly falling asleep while engaged in activities of daily living, including operating a motor vehicle, which has sometimes resulted in accidents. Patients should be advised that sudden onset of sleep has occurred without warning signs. Until further information is available on the management of this unpredictable and serious adverse event, patients should be warned not to drive or engage in other activities where impaired alertness could put themselves and others at risk of serious injury or death (e.g., operating machines). Other dopamine agonists may not alleviate these symptoms. Presently, the precise cause of these events is unknown. There is insufficient information to determine whether this event is associated with MIRAPEX (pramipexole), all dopaminergic agents, or Parkinson's disease itself.5

Patients should also be aware of the fact that hallucinations can occur and may adversely affect their ability to drive. Age appears to increase the risk of hallucinations.5





References: 1. IMS HEALTH, CompuScript, Total Prescriptions for the MAT ending December 2004. 2. Parkinson Study Group. Pramipexole vs. levodopa as initial treatment for Parkinson disease – a randomized controlled trial. JAMA 2000;284:1931-1938. 3. Shannon KM, Bennett JP, Friedman JH. Efficacy of pramipexole, a novel dopamine agonist, as monotherapy to mild to moderate Parkinson's disease.

Neurology 1997;49:724-728. 4. Guttman M. [International Pramipexole – Bromocriptine Study Group). Double Blind Comparison of Pramipexole and Bromocriptine Treatment with Placebo in Advanced Parkinson's disease.

Neurology 1997;49:1060-1065. 5. MIRAPEX (pramipexole dihydrochloride) Product Monograph. Boehringer Ingelheim (Canada) Ltd., August 2002.