

# International Conference on **Parkinson's Disease & Movement Disorders**

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## Treatment of dystonia and tremors in Parkinson's disease

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**D**ystonia, defined as a neurological syndrome characterised by involuntary, patterned, sustained, or repetitive muscle contractions of opposing muscles, causing twisting movements and abnormal postures, is one of the most disabling movement disorders. A small portion of patients have a known cause and respond to specific treatments, such as levodopa in dopa-responsive dystonia or drugs that prevent copper accumulation in Wilson's disease. Therapeutic options must be tailored to the needs of individual patients. In patients on chronic dopaminergic treatment, peak-dose dystonia, diphasic dystonia and off-dystonia can be seen. The later constitutes the major dystonic feature of chronic levodopa therapy, and a wide variety of strategies are available to manage this complication. Many therapeutic options are available viz. Chemo-denervation with botulinum toxin injections and medical treatments. Among them, Deep Brain Stimulation (DBS) of the sub-thalamic nucleus has proved to be the most effective one. Parkinsonian tremor is most likely due to oscillating neuronal activity within the CNS. The most likely candidate producing these oscillations is the basal ganglia loop and its topographic organization might be responsible for the separation into different oscillators which, nevertheless, usually produce the same frequency. The relative efficacy of trihexiphenidyl hydrochloride, amantadine hydrochloride, and low-dose carbidopa-levodopa in reducing Parkinsonian tremors was investigated using objective techniques. Trihexiphenidyl and carbidopa-levodopa decreased tremor by greater than 50%. Some patients responded to one drug but not to the other. Amantadine decreased tremor less than 25%. Monotherapy with trihexiphenidyl or carbidopa-levodopa should be the initial treatment for the tremor of Parkinson's disease.

### Biography

Sanjay Jaiswal has completed his MD from RNT Medical College, Udaipur, India and DM Neurology from Institute of Medical Sciences BHU, Varanasi, India. He is a Consultant Neurologist at Jaiswal Hospital and Neuro Institute, Kota, Rajasthan, India. He has published several papers in reputed journals and has been serving as a Faculty in most of the neurology conferences. He has got an extensive experience of organizing and conducting conferences in the field of neurology and has been awarded by State Government for the contribution to social welfare.

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