The long-term impact of levodopa/carbidopa intestinal gel on 'off'-time in patients with advanced Parkinson's disease: a systematic review

Angelo Antonini, Per Odin, Rajesh Pahwa, Jason Aldred, Ali Alobaidi, Yash J Jalundhwala, Pavnit Kukreja, Lars Bergmann, Sushmitha Inguva, Yanjun Bao, K Ray Chaudhuri

STUDY SELECTION

P	POPULATION	Patients with Parkinson's disease
I	INTERVENTION	LCIG as an active intervention
C	COMPARATOR	Any or none
O	OUTCOME	Change in 'off'-time
T	TIMING	≥12 months after LCIG initiation
S	SETTING	Studies with ≥10 patients

A LARGE POPULATION

27 studies included in the review

1875 patients with advanced Parkinson's disease

Duration of LCIG treatment **12-120 m**

'OFF'-TIME SIGNIFICANTLY REDUCED WITH LONG-TERM LCIG

61% weighted average reduction in 'off'-time

38-84% reduction in 'off'-time at end of follow-up

'OFF'-TIME REDUCTIONS MAINTAINED UP TO 5 YEARS

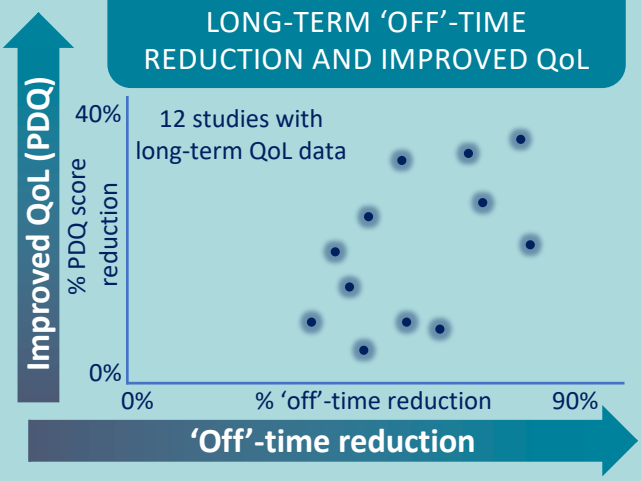
At 3-6 months
47-82% reduction in 'off'-time

At 1 year
33-84% reduction in 'off'-time

At 2 years
37-82% reduction in 'off'-time

At 3-5 years
68-83% reduction in 'off'-time

A CORRELATION TREND BETWEEN LONG-TERM 'OFF'-TIME REDUCTION AND IMPROVED QoL



- LEVODOPA/CARBIDOPA INTESTINAL GEL (LCIG) SIGNIFICANTLY REDUCES 'OFF'-TIME
- REDUCTIONS IN 'OFF'-TIME EVIDENT WITHIN 3 MONTHS OF STARTING LCIG
- REDUCTIONS IN 'OFF'-TIME MAINTAINED IN THE LONG-TERM UP TO 5 YEARS
- 'OFF'-TIME REDUCTIONS CORRELATED WITH IMPROVED QUALITY OF LIFE

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