

**NEW STRENGTH STALEVO 200/50/200 mg FOR PARKINSON'S  
DISEASE PATIENTS NOW LISTED ON THE PBS**

From 1<sup>st</sup> December 2008, a new strength of Stalevo 200/50/200 mg (levodopa 200 mg / carbidopa 50 mg / entacapone 200 mg) is available on the Pharmaceutical Benefits Scheme (PBS) providing physicians with more dosing options and flexibility for their patients with Parkinson's disease (PD) who experience end-of-dose motor fluctuations.<sup>1,2</sup>

A recent Australian study published in the *Journal of Clinical Neuroscience* suggests that end-of-dose motor fluctuations often go unrecognised<sup>3</sup>

The study found more than one in two apparently stable PD patients may in fact, be experiencing end-of-dose motor fluctuations.<sup>3</sup> The wearing-off patient questionnaire helped identify motor fluctuations in up to 57% of patients assessed. Furthermore, over 77% of investigators assessed the wearing-off patient questionnaire as either very useful or quite useful for detecting motor fluctuations.<sup>3</sup>

Neurologist, Dr Andrew Evans from the Royal Melbourne Hospital said this study reiterates the importance of careful monitoring for 'wearing off' symptoms, and believes the availability of the new strength of Stalevo 200/50/200 mg dose provides patients and healthcare professionals with an effective treatment regimen that can be adjusted to suit each patient's requirements as their disease progresses.

"Stalevo can improve overall patient care in improved motor symptom control, activities of daily living and quality of life.<sup>4-8</sup> Stalevo is now available in four doses, providing both patients and healthcare professionals with a smooth transition of treatment through all PD stages," Dr Evans said.

Stalevo is an optimised levodopa therapy that significantly improves PD patients' ability to control body movements and the ability to perform basic functions, such as walking and dressing, compared with standard levodopa.<sup>1</sup>

Stalevo 200/50/200 mg will be available for patients with Parkinson's disease requiring higher doses of levodopa.<sup>1,2</sup> This higher dose of Stalevo<sup>®</sup> may be prescribed for patients with Parkinson's:

- as a replacement therapy for current standard levodopa-decarboxylase inhibitor combinations (Sinemet<sup>®</sup> and Madopar<sup>®</sup>) when they experience fluctuations in motor function due to end-of-dose wearing-off.<sup>1,2</sup>
- in place of standard levodopa and entacapone (Comtan<sup>®</sup>), thus reducing the pill burden for patients.<sup>1,2</sup>

Stalevo targets end-of-dose 'wearing-off' experienced by patients by combining levodopa / carbidopa, with entacapone. While carbidopa reduces the side effects of levodopa, entacapone extends the delivery of

levodopa, allowing significantly more levodopa to reach the brain, helping patients have better symptom control for longer.<sup>4-7</sup>

The optimal daily dosage of Stalevo must be individually determined.<sup>1</sup> Stalevo tablets are available in four strengths, each in 4:1 ratio of levodopa to carbidopa and combined with 200 mg of entacapone in a standard release formulation; Stalevo 50/12.5/200 mg, Stalevo 100/25/200 mg, Stalevo 150/37.5/200 mg and now Stalevo 200/50/200 mg.<sup>1</sup>

For further information about the Stalevo range, call 1800 671 203 or visit [www.novartis.com.au](http://www.novartis.com.au).

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**PBS Information:** Authority required. Parkinson's disease in patients being treated with levodopa-decarboxylase inhibitor combinations who are experiencing fluctuations in motor function due to end-of-dose effect. Parkinson's disease in patients stabilised on concomitant treatment with levodopa-decarboxylase inhibitor combinations and entacapone.

**Stalevo**<sup>®</sup> (levodopa/carbidopa/entacapone)

**References:**

1. Stalevo Product Information Novartis
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5. Poewe WH et al. Acta Neurol 2005; 62: 905-910
6. Larsen JP et al. European Journal of Neurology 2003; 74:1071-1079
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