

EFFECTS OF OLANZAPINE IN VARIOUS MOVEMENT DISORDERS

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Introduction: Dopamine receptor blocking agents (neuroleptics) are effective drugs for hyperkinetic movement disorders. However, antidopaminergic drugs are problematic because of affective and cognitive side-effects, as well as a real risk for the development of parkinsonism or tardive syndromes (1). Due to their new pharmacologic profile, atypical neuroleptics may be a better alternative for these problems. Olanzapine, a serotonin-dopamine receptor antagonist, is an atypical antipsychotic drug .

We report the effect of olanzapine in the treatment of a group of patients with various hyperkinetic movement disorders.

The aim of this retrospective study was to investigate the efficacy of olanzapine in long-term treatment in various hyperkinetic movement disorders.

Methods: Twelve patients with various hyperkinetic movement disorders (mean age, 47.4±14.5 years; mean disease duration, 9.08±7.01 years) received olanzapine. Patients with chorea due to Huntington's disease, oromandibular dystonia, post-ischemic hemidystonia, and post-traumatic rubral tremor were included in the study. The effects of treatment were assessed after treatment initiation according to the findings of the general clinical observation at visits with 6-month intervals.

Results: The mean follow-up time was 24 months and the mean olanzapine dose was 11.2±5.1 mg/day (median 10 mg/day). The mean general clinical observation degree was 2.4±0.5 (moderate improvement). Four patients were scored +3 on the general clinical observation degree (marked improvement). The improvement of the general clinical observation degree was significant at 24-month olanzapine treatment (p=0.05). Conclusion: Olanzapine may be used for the treatment of a large variety of hyperkinetic movement disorders. This is a long-term study on the effects of olanzapine in various hyperkinetic movement disorders. No serious side effects were reported.