

Assessment of tolerability and efficacy of opicapone in daily clinical practice

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Background: Opicapone is a peripherally selective, once-daily catechol-O-methyl transferase inhibitor recently approved as adjunctive therapy to levodopa/DOPA decarboxylase inhibitors in patients with PD and end-of-dose motor fluctuations. Objectives: To analyse the tolerability and efficacy of opicapone added as adjunctive therapy in a group of patients with PD in daily clinical practice. Methods: Eighty-five patients with PD were included in the study, 56% males with a mean age of 69,8. The mean disease duration was 11,4 years and mean Hoehn & Yahr staging was 3. Forty-five per cent of the patients were akinetic-rigid cases, 46% tremor-dominant and 9% had a mixed subtype. Mean levodopa equivalent daily dose was 897 ± 415 . Forty one per cent of patients were on an oral or transdermal dopamine agonist and 19% were on advanced therapies for PD. Opicapone was added as adjunctive therapy because of motor fluctuations in 41 patients and due to suboptimal motor control in 44 patients. Tolerability and response to treatment were recorded at months 6 and 12. Results: Forty five per cent of patients improved during follow up, 40% remained stable and just 15% deteriorated. No serious adverse events were recorded. Treatment had to be withdrawn in 27 patients due to different causes. The most frequently identified reason for discontinuation was behavioural or cognitive deterioration, followed by aggravation of dyskinesia. There were no significant differences between the good responder and the non-responder group. The rigid-akinetic subtype was significantly more common in the group of patients that had to discontinue the drug. Conclusions: Opicapone has a good tolerability profile in patients with PD on polytherapy revealed by the high rate (68%) of continuation of treatment in our study. Most of the patients exhibited a good response to treatment by improving or remaining stable while on opicapone.