

Gastrointestinal symptoms as a risk factor for the appearance of motor fluctuations in advanced Parkinson's disease patients

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Introduction: The EP is a movement disorder characterized by tremor, rigidity, bradikinesia and postural instability. It is more frequent in males between 50 - 60 years. It's caused by the combination of genetic and environmental factors that provoke the death of the neurons of the substantia nigra, that produce dopamine, a fundamental neurotransmitter in regulation of the circuit of the basal ganglia. Motor fluctuations occurs in patients with advanced Parkinson disease treated with levodopa, and they are changes in motor state that make the patient stay between good mobility (ON) and bad mobility (OFF). At the beginning they can be predictable and related to the levodopa ingestion but the situation becomes complex since the fluctuations become unpredictable. **Hypothesis:** The gastrointestinal alterations in patients with Parkinson's Disease (EP) provoke alterations in the absorption of levodopa that facilitates the development of motor fluctuations. **Aims:** Study the role of gastrointestinal dysfunction in the EP and the development of the motor fluctuations. **Clinically characterize these gastrointestinal alterations.** **Methodology:** Retrospective study, observational. We have included patients followed up at Movement Disorder clinic that present criteria of advanced Parkinson disease **RESULTS:** In our population there are slightly more men than women. The mostly are on levodopa treatment and a more than a half were taking a combined therapy with dopamine agonists and levodopa. Gastrointestinal symptoms are frequent, especially constipation, as it has been previously described in literature. Motor fluctuations, particularly wearing-off, are observed by more than a half of the cohort. **CONCLUSIONS** Gastrointestinal symptoms should be considered as comorbidity in PD patients. They also may play a role in the development of fluctuations