



Medications To Be Avoided Or Used With Caution In Parkinson's Disease

AMERICAN PARKINSON DISEASE ASSOCIATION

The manufacturers of these medications may not list Parkinson's disease as an absolute contraindication; however, better choices within a medication class may be suggested. Some of these medications alter the brain's dopamine system causing an increase in Parkinson's symptoms, others may chemically interact with Parkinson's medications and cause side effects. This is not intended to be a complete list and additional brand names may occur for each medication. If you have any questions about this list, please talk to your physician or pharmacist.

Medications That Should Be Avoided

Medication	Chemical Name	Brand Name	Mechanism of Interaction
Older Antipsychotics (used to treat behavioral disorders)	Chlorpromazine Fluphenazine Haloperidol* Loxapine Thioridazine Thiothixene Trifluoperazine Pimozide	Thorazine® Prolixin® Haldol® Loxitane® Mellaril® Navane® Stelazine® Orap®	Block dopamine receptors in the brain, worsening PD symptoms
Antiemetics (used to treat nausea or vomiting)	Chlorpromazine Droperidol Metoclopramide Prochlorperazine Promethazine	Thorazine® Inapsine® Reglan® Generics® Generic	Block dopamine receptors in the brain, worsening PD symptoms
Antihypertensives (used to decrease blood pressure)	Reserpine Methyldopa	Serpalan® Aldomet®	Decrease dopamine stores and activity, worsening PD symptoms
Antidepressants (used to treat depression)	Phenelzine Tranlycypromine	Nardil® Pamate®	Inhibit monoamine oxidase. Should not be taken in patients receiving levodopa, may increase blood pressure, fever, or agitation
	Amoxapine	Generics®	Block dopamine receptors in the brain, worsening PD symptoms

Note: There may be additional brand names for each medication. This is not intended to be a complete list.

* The package insert for Haldol® (haloperidol) lists use in patients with Parkinson's disease as a contraindication

Medications that should not be taken with Selegiline HCL (Eldepryl, Deprenyl, Zelapar) and Rasagiline (Azilect)

Medication	Chemical Name	Brand Name
Narcotic/Analgesic	Meperidine Tramadol Methadone Propoxyphene	Demerol® Ultram® Dolophine® Darvon®
Antidepressants	Mirtazapine St. John's Wort	Remeron® Several Brands
Muscle Relaxants	Cyclobenzaprine	Flexeril®
Cough Suppressant	Dextromethorphan	Numerous Brands
Decongestants/ Appetite Suppressants (found in cough, cold, allergy, and sinus medicines)	Pseudophedrine Phenylephrine Ephedrine	Sudafed® Sudafed PE®

Note: There may be additional brand names for each medication. This is not intended to be a complete list. Using these agents with selegiline or rasagiline increases the risk of one or more of the following: high blood pressure, increased heart rate, respiratory depression, seizures, tremors, fever, confusion, or behavior changes.

Medication classes that should be discussed with doctor or pharmacist

Newer Antipsychotics:

The newer antipsychotics have a lower risk of worsening Parkinson's symptoms. They include: aripiprazole (Abilify®), olanzapin (Zyprexa®), risperidone (Risperdal®), ziprasidone (Geodon®), Lurasidone (Latuda®), iloperidone (Fanapt®), paliperidone (Invega®), and asenapine, (Saphris®). Clozapine (Clozaril®) and quetiapine (Seroquel®) have the least risk of worsening symptoms.

Antidepressants:

Some agents within this class may worsen PD symptoms, increase confusion, or interact with some of your PD medications.

Antihistamines:

These are found in cough, cold, allergy, and sleep medications. When taking these medications, the elderly are at an increased risk of the following side effects: blurred vision, confusion, constipation, urinary retention, and dry mouth. The newer antihistamines loratadine (Claritin®) and desloratadine (Clarinex®) may have less side effects than older antihistamines. Cetirizine (Zyrtec®) may or may not

have less risk. Topical eye or nose sprays/drops have the least risk of these side effects.

Non-prescription medications and supplements:

Some of these agents may interact with PD medications. They may not be contraindicated; however, an adjustment in the timing of the medication may be needed. For example, iron supplements may decrease the absorption of levodopa and these medications should be spaced as far as possible.

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The information contained in this supplement is solely for the information of the reader. It should not be used for treatment purposes, but rather for discussion with the patient's own physician.

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