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DOSE DEPENDENT LEVODOPA/CARBIDOPA-INDUCED HYPONATREMIA AND HYPOCHLOREMIA: A CASE REPORT

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ABSTRACT:

Parkinson's disease is a neurodegenerative disorder that affects predominately dopaminergic neurons in substantia nigra. Levodopa, combined with a peripheral decarboxylase inhibitor, has been regarded as the gold standard for the treatment of Parkinson's disease. It still remains in many respects the most efficacious drug treatment. As an ADR of Levodopa and Carbidopa, it has tendency to cause hypokalemia, as levodopa causes increased excretion of potassium and rarely sodium. We herein report a rare ADR of hyponatremia and hypochloremia caused by levodopa and carbidopa in dose dependent pattern in 83year old male. The regular monitoring of serum electrolyte levels revealed the gradual decrease in serum sodium and chloride levels as the lead point. In spite of constant decrease in serum electrolyte levels which is clearly evident as levodopa and carbidopa induced, patient was discharged against medical advice with T. Levodopa/ Carbidopa and T. Tolvaptan to maintain serum sodium levels within the normal limits.

Keywords: Levodopa/Carbidopa, hyponatremia, hypochloraemia, Tolvaptan

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