

Natureza do trabalho: Resumo

TÍTULO

PARKINSON'S DISEASE: CONCEPTS, DIAGNOSIS AND TREATMENT

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RESUMO

Introduction: Parkinson's disease (PD) is the second most common neurodegenerative disease^{1,4,5}. It is estimated about 5 million people worldwide affected by this disorder. It affects men and women of all ethnicities, occupations and countries¹. Understanding this pathology allows healthcare professionals suspect previously of its appearance, thus allowing early referral for medical evaluation, culminating, possibly, with diagnosis and appropriate treatments. Diagnosis of this condition is clinical. **Objective:** Present the concepts on DP, diagnosis and treatment, allowing for better dissemination of knowledge about this condition among health professionals. **Materials and Methods:** This research consists of a literature review guided by theoretical frameworks, including books and articles published in English and Portuguese. The databases consulted included "Medline" and "PubMed". **Results:** The keywords were used "Parkinson" associated with the word "disease" in the last 10 years with 17.764 results in PubMed and 623 Medline. The research has been done in recent publications and considered relevant to the topic under discussion. **Discussion and Conclusion:** PD is the most common form of parkinsonism (general term for bradykinesia with rigidity and / or tremor)^{1,4}. Starts on average at 60 years, reaching patients aged 20 or less¹. The cases are sporadic (85-90% of cases, against 10 to 15% of family origin) of unknown cause, believing it to be a combination of gene mutation, which induces susceptibility, and toxic environmental factors^{1,4}. Pathologically, the DP consisting mainly of degeneration of dopaminergic neurons of the substantia nigra, reduced striatal dopamine and proteinaceous intracytoplasmic inclusions (Lewy bodies)^{1,2,4}. The "essential" clinical manifestations include resting tremor, rigidity, bradykinesia, and gait impairment, associated with other motor features like facies in mask hypophonia and freezing of gait; and not including the motor characteristics autonomic disturbances (orthostatic hypotension, gastrointestinal and genitourinary disorders, and sexual dysfunction), sensory, sleep, psychosis, depression, dementia and anosmia^{1,2,4,5,6,7,8}. The diagnosis is clinical and currently considers resting tremor, asymmetry and good response to levodopa¹. Images tests are rarely needed in clinical practice. Currently, the management of treatment is individualized and there is no standardized approach, but should take into account the functional, cognitive and emotional commitments, beyond the point of introduction of neuroprotective drugs. The main drug is levodopa, dopamine precursor. This drug is commonly associated with a peripheral decarboxylase inhibitor^{1,3,5}. Besides this, other work in the extension of dopamine action as dopamine agonists, inhibitors of monoamine oxidase type B (MAO-B) and inhibitors of catechol-O-

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methyltransferase (COMT)¹. Another feature is the surgical treatment such as deep brain stimulation that simulates the effects of a brain injury, the more secure techniques of brain parenchyma such as pallidotomy^{2,3}. Knowledge of this condition during the clinical examination is essential to suspicion and clinical diagnosis as well as pharmacological and non pharmacological and surgical (if necessary) in order to ensure the well-being, quality of life and survival of patients.

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