



Bromocriptine is effective in early Parkinson's disease

Clinical question	How effective and safe is bromocriptine (BR) monotherapy as an alternative to levodopa (LD) therapy in patients with early Parkinson's disease?
Bottom line	Bromocriptine monotherapy had a comparable effect to levodopa therapy on impairment and disability in patients with early Parkinson's disease able to tolerate bromocriptine. The use of bromocriptine in early treatment may be of benefit in delaying the motor complications and dyskinesias associated with levodopa therapy.
Caveat	The trials were of low methodological quality and were heterogeneous so that the authors were unable to perform a meta-analysis. The conclusions were made on the basis of a qualitative review of the data. Overall, there were more dropouts (statistically significant) in the BR group because of inadequate therapeutic response or intolerable side effects, such as nausea and confusion.
Context	Currently, the best treatment for Parkinson's disease is LD. However, as the number of LD treatment years increases, new disabling fluctuations of movement occur. To overcome this problem, BR has been tried as an alternative drug.
Cochrane Systematic Review	Van Hilten JJ. et al. Bromocriptine versus levodopa in early Parkinson's disease. Cochrane Reviews 2007, Issue 4. Art No: CD002258. DOI:10.1002/14651858. CD002258.pub2. This review contains 6 trials involving 850 participants.
Pearls No. 68, May 2008, written by Brian R McAvoy	

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.