MEMANTINE TREATMENT IN PATIENTS WITH ALZHEIMER’s DISEASE ALREADY RECEIVING DONEPEZIL

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Alzheimer’s Disease (AD) is a neurological disorder in which the death of brain cells causes memory loss and cognitive decline. There are three stages of AD: - preclinical; mild cognitive impairment and dementia.

Many surveys showed that people of age 65 years or more are usually diagnosed with AD. The main treatment of AD includes Donezepil, Alantimine, Rivastigmine and Tacrine which belong to cholinesterase inhibitors. Memantine is an N-methyl-D-aspartate-receptor inhibitor which works by blocking excess activity of glutamate in brain and helps reduce the symptoms of AD. Memantine is a first and only member of a new class of medication showing clinical benefit and good tolerability in AD. Memantine has also exhibited efficacy and safety in a placebo-controlled trial.

This review is about the many theories proposed for the administration of memantine to AD patients receiving stable donezepil therapy would result in clinical benefit and are safe and well tolerated which has been researched. Many clinical trials are still ongoing.

This review is based on study on two groups of AD patients where one group is given placebo with donezepil and other group is given 20mg memantine with donezepil; then both the groups are compared. Many clinical trial results are based on the comparative study of both the group of patients where the patients (40%) receiving memantine added to donezepil significantly outperformed those patients (52%) receiving placebo with donezepil.

Therefore many clinical trials had produced positive results when the drugs memantine and donezepil were concomitantly administered. Based on the studies the patients receiving antglutamatergic treatment showed an improvement in the cognition scores for moderate to severe AD patients.

Keywords: Alzheimer disease, Memantine and Donezepil