

Important Safety Information

DUOPA (carbidopa and levodopa) enteral suspension is a prescription medicine used for treatment of advanced Parkinson's disease. DUOPA contains 2 medicines: carbidopa and levodopa.

DUOPA is given over a period of 16 hours by a pump through a tube that requires a small hole (stoma) into the stomach. Before the procedure, a discussion with a healthcare provider about any previous procedures or problems with the abdomen area is required. Risks of the procedure may result in blockage of the stomach or intestine, stopping of movement through the intestine, infection, inflammation of the pancreas, stomach pain, gas, stomach and intestinal ulcers or bleeding, nausea, blocking of the tube, or other serious outcomes that may lead to surgery or be fatal.

DUOPA should not be taken by people who are currently taking or have recently taken (within 2 weeks) a medicine called a nonselective monoamine oxidase (MAO) inhibitor. Serious side effects of medicines that contain carbidopa and levodopa, including DUOPA, include sleepiness or suddenly falling asleep without warning during daily activities. Patients should not drive or operate heavy machinery until they are sure how DUOPA affects them. Some patients taking Parkinson's disease medications, including DUOPA, can experience low blood pressure; fast, irregular heartbeat or chest pain; dizziness or fainting; hallucinations or confusion; intense urges they are unable to control, including the urge to gamble, spend money, or overeat; increased sexual urges; and other intense urges. DUOPA can cause or worsen depression. Patients should be counseled to report symptoms of depression or thoughts of suicide. Suddenly stopping DUOPA or rapid dose reduction can result in fever and confusion. Taper dose and monitor patients for fever, confusion, or severe muscle stiffness. Progressive weakness or loss of sensation in the fingers or feet may occur. People with Parkinson's disease have a greater risk of melanoma than the general population and should be monitored while on DUOPA. Worsening of glaucoma may occur. The most common adverse reactions (>7% and greater than carbidopa and levodopa immediate release) were complication of device insertion, nausea, constipation, incision site erythema, dyskinesia, depression, post procedural discharge, peripheral edema, hypertension, upper respiratory tract infection, oropharyngeal pain, atelectasis, confusional state, anxiety, dizziness, and hiatal hernia.