CLAIMS

What is claimed is:

1. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered by inhalation to the Parkinson's disease patient,

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration, and

wherein said patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 15 minutes after administration.

2. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered by inhalation to the Parkinson's disease patient,

wherein within 10 minutes of administration, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml for every 10 mg of levodopa delivered as compared to the patient's plasma levodopa concentration prior to administration of levodopa by inhalation, and

wherein said patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 15 minutes after administration.

3. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient population,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg is to be administered by inhalation to a first Parkinson's disease patient who takes a first average daily dose of oral levodopa,

at least at least one fine particle dose (FPD) of 20 mg to 50 mg is to be administered by inhalation to a second Parkinson's disease patient who takes a second average daily dose of oral levodopa, and

wherein both patients have a reduction in motor symptoms within 20 minutes of administration of said levodopa by inhalation upon administration of the same dose of pulmonary levodopa, and

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration.

4. The use of claim 3, wherein said first average daily dose of oral levodopa is higher than the second average daily dose of oral levodopa.

5. The use of claim 3, wherein said first average daily dose of oral levodopa is higher than the second average daily dose of oral levodopa and both average daily doses range from 200mg to 2500mg of levodopa.

6. The use of claim 3, wherein said first average daily dose of levodopa is between 400-700mg.

7. The use of claim 3, wherein said second average daily dose of levodopa is between 700-2000mg.

8 The use of claim 3, wherein said second average daily dose of levodopa is between 1000-2000mg.

9. The use of claim 3, wherein said pulmonary levodopa is to be administered to more than two patients wherein said patients take multiple different average daily oral doses of levodopa ranging from 200mg to 3000mg per day.

10. The use of claim 3, wherein said patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 15 minutes after administration.

11. The use of claim 3, wherein said pulmonary levodopa dose contains a salt.

12. The use of claim 3, wherein said pulmonary levodopa dose contains a phospholipid.

13. The use of any one of claims 1 or 2, wherein the dose contains a salt.

14. The use of any one of claims 1 or 2, wherein the dose contains a phospholipid.

15. The use of any one of claims 1, 2 or 3, wherein a dopa decarboxylase inhibitor is to be co-administered to the patient.

16. The use of any one of claims 1, 2 or 3, wherein the patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 20 minutes after administration.

17. The use of any one of claims 1, 2 or 3, wherein the patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 30 minutes after administration.

18. The use of any one of claims 1, 2 or 3, wherein the patient's plasma levodopa concentration maintains said increase of at least 200 ng/ml for a time period of at least 60 minutes after administration.

19. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered to the patient by inhalation,

wherein said patient receives immediate relief of motor fluctuations within 10 minutes of said inhalation,

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration, and

wherein said patient maintains said relief for a period of at least 30 minutes.

20. The use of claim 19, wherein an oral dosage of levodopa is to be administered to said patient.

21. The use of claim 19, wherein said relief of motor fluctuations is maintained for a period of at least 4 hours.

22. The use of claim 1, wherein said Parkinson's disease patient is a stage 2, 3 or stage 4 Parkinson's disease patient.

23. The use of claim 1, wherein said dosages of levodopa are not affected by a central nervous system food effect.

24. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered to the patient by inhalation wherein the $Cmax^{Pul}/AUC^{Pul}$ divided by $Cmax^{Oral}/AUC^{Oral}$ is greater than 1 on a comparative dose of levodopa, and

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration.

25. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered by inhalation,

wherein the ratio of $T^{1/2} / T^{max}$ is less than 1/2, and

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration.

26. The use of claim 25, wherein said ratio is less than 1/5.

27. The use of claim 15, wherein the dopa decarboxylase inhibitor is to be administered to the patient before, simultaneously with or after, administration of levodopa by inhalation.

28. The use of claim 1, wherein the dose of levodopa comprises 90% by dry weight levodopa, 8% by dry weight dipalmitoylphosphatidylcholine (DPPC) and 2% sodium chloride.

29. Use of levodopa in the manufacture of a medicament for providing rapid relief of motor fluctuations in a Parkinson's disease patient,

wherein at least one fine particle dose (FPD) of 20 mg to 50 mg of levodopa is to be administered to said patient such that the patient's plasma levodopa levels is increased by 200-500 ng/ml,

wherein within 10 minutes of administration of levodopa by inhalation, the patient's plasma levodopa concentration increases by at least 200 ng/ml but no more than 1000 ng/ml as compared to the patient's plasma levodopa concentration prior to administration.

30. The use of claim 29, wherein said levodopa is to be administered by the oral route, pulmonary route or parenteral route.

31. The use of claim 29, wherein said plasma levodopa levels are increased by 200-400 ng/ml, 300-400 ng/ml, 350-450 ng/ml or 400 ng/ml.

32. The use of claim 29, wherein said levodopa is to be administered by the pulmonary route and is at a dose of 25-40 mg of levodopa to the pulmonary system.

33. The use of claim 29, wherein said patient has at least a 100% improvement in UPDRS score within 20 minutes of administering said levodopa.