[0008] Nyholm *et al.* (European Journal of Neurology, 2012, 19, 820-826) shows that oral administration of 200 mg entacapone and concomitant intraintestinal infusion of levodopa and carbidopa at a dosage equal to 80% of the optimized dose of a patient, allows maintaining a blood level of levodopa that is substantially the same as that achieved by administration of the optimized dose of levodopa and carbidopa, without entacapone. In other words, Nyholm *et al.* shows that oral administration of entacapone allows reducing the initial dose of levodopa and carbidopa administered by 20% and still maintain the desired blood level of levodopa.

[0009] Yet, the various formulations disclosed do not provide the optimal treatment of Parkinson's disease due to still relatively high level of side effects and levodopa blood level fluctuations. There is thus an ongoing and urgent need for methods for treatment of movement disorders such as Parkinson's, that will provide patients with a constant blood levodopa level that will lead to constant dopaminergic stimulation in the brain, and at the same time limit the side effects caused by high peripheral levodopa concentration resulting from high dose levodopa administration.

SUMMARY

[0009a] In one aspect of the present disclosure, there is provided a use of carbidopa, levodopa and a COMT inhibitor in the manufacture of a medicament for the treatment of Parkinson's disease, wherein the medicament comprises a sole parenteral composition and an oral composition to be administered as a combination, wherein the sole parenteral composition comprises said carbidopa and said levodopa, and is to be administered subcutaneously; and the oral composition comprises said COMT inhibitor.

[0010] The present disclosure also provides a method for treatment of Parkinson's disease in an individual in need thereof comprising parenterally administering a pharmaceutical composition comprising carbidopa and levopoda, or pharmaceutically acceptable salts thereof, to said individual; and orally administering a catechol-O-methyl transferase (COMT) inhibitor such as entacapone or tolcapone.

[0011] The present disclosure further relates to carbidopa or a pharmaceutically acceptable salt thereof, levodopa or a pharmaceutically acceptable salt thereof,

CLAIMS

1. Use of carbidopa, levodopa and a COMT inhibitor in the manufacture of a medicament for the treatment of Parkinson's disease, wherein the medicament comprises a sole parenteral composition and an oral composition to be administered as a combination, wherein the sole parenteral composition comprises said carbidopa and said levodopa, and is to be administered subcutaneously; and the oral composition comprises said COMT inhibitor.

2. The use according to claim 1, wherein said parenteral composition is suitable for substantially continuous administration.

3. The use according to claim 1 or 2, wherein said parenteral composition further comprises arginine.

4. The use according to claim 3, wherein said parenteral composition has a molar ratio of carbidopa and levodopa to arginine of 1:2 to 1:3.5.

5. The use according to claim 4, wherein said parenteral composition comprises (i) arginine, 0.1% to 2% by weight carbidopa, and 4% to 8% by weight levodopa; or (ii) arginine, 0.6% to 1.5% by weight carbidopa, and 6% by weight levodopa.

6. The use according to claim 5, wherein the parenteral composition is to be administered at a rate of 0.1 to 1000 µl/h/site; or at a volume of 2 to 10 ml/24h/site; or at a dose of 80 to 800 mg levodopa/day and 20 to 200 mg carbidopa/day; or at a rate of 240 to 360 mg levodopa and 60 to 90 mg carbidopa/day/site.

7. The use according to claim 6, wherein said parenteral composition is to be administered at a volume of 4 to 6 ml/24h/site.

8. The use according to claim 4, wherein said parenteral composition comprises (i) arginine, about 1% to about 4% by weight carbidopa, and about 6% to about 16% by weight levodopa; or (iv) arginine, about 1.5% to about 2.5% by weight carbidopa, and about 12% by weight levodopa.

9. The use according to claim 8, wherein said parenteral composition is to be administered at a rate of 0.2 to 2000 µl/h/site; or at a volume of 10 to 24 ml/24h/site; or at a dose of 600 to 4000 mg levodopa/day and 60 to 500 mg carbidopa/day; or at a rate of 800 to 1600 mg levodopa and 200 to 400 mg carbidopa/day/site.

10. The use according to claim 9, wherein said parenteral composition is to be administered at a volume of 12 to 16 ml/24h/site.

11. The use according to any one of claims 1 to 10, wherein the COMT inhibitor is entacapone or tolcapone.