Apomorphine Response Test

This leaflet explains more about the Apomorphine Response Test and what you can expect when you come to hospital. If you have any further questions, please speak to your Consultant or Parkinson’s Disease Nurse Specialist.

What is the Apomorphine Response Test?
The Apomorphine Response Test is a way of testing for responsiveness to the medication, apomorphine, which is used in the treatment of Parkinson’s Disease. The test involves completing an assessment of your movement, rigidity, balance and walking during the ‘off’ phase (without medication) and your ‘on’ phase (with medication). We use a measurement tool called the Unified Parkinson’s Disease Rating Scale (UPDRS) to assess the effect of apomorphine.

Why should I have the Apomorphine Response Test?
The Apomorphine Response Test is undertaken to assess the dose best suited to manage your Parkinson’s Disease symptoms. The test has been suggested to you as your Consultant considers apomorphine to be an option to manage your Parkinson’s Disease symptoms, in addition to oral medication. The test allows us to plan how you would use either occasional injections or a daytime infusion of apomorphine.

How can I prepare for the Apomorphine Response Test?
The Parkinson's Nurse Specialist will speak with you about temporarily stopping your Parkinson’s medication prior to the day of the test. Details relating to which medications you need to stop and when you need to stop taking them will depend on the Parkinson’s medications which you take. Please follow your nurse’s instructions carefully.

As a guide:

- If you take levodopa (Sinemet®, Madopar® or Stalevo®) and a dopamine agonist Ropinirole, pramipexole or rotigotine), you will be advised to stop taking these at least six hours before your appointment.
- Other medications such as amantadine, entacapone, selegiline and rasagiline should not be taken on the morning of your assessment.

If you think you may find it difficult to stop taking your medications, please discuss this further with the Parkinson’s Nurse Specialist. You should continue taking any non-Parkinson’s medications that you usually take.
**Are there any risks?**
Temporarily stopping your Parkinson’s medication will lead to short term return of your symptoms (slowness, rigidity and tremor). However you will be assessed promptly so that the amount of time spent is limited. There are no long term risks associated with this test. During the procedure we will monitor your blood pressure when you are sitting and standing to see if the medication causes any dizziness.

On the morning of the assessment, please eat just a light breakfast.

It is unlikely, but in some people apomorphine can cause sickness. We will therefore request via your GP that you receive a prescription for an anti-sickness tablet called domperidone. This medication should be taken three times a day for three days before and on the morning of the test.

**Asking for your consent**
It is important that you feel involved in decisions about your care. You will be asked to formally agree to the apomorphine response test. You can withdraw your consent at any time, even if you have said ‘yes’ previously. If you would like more details about our consent process, please ask for a copy of our policy.

Please note that your assessment may be video recorded and this recording will form part of your clinical record. We will ask for your written consent before doing this.

**What happens during the Apomorphine Response Test?**
The Parkinson’s nurse or Apomorphine Nurse Advisor will first assess you during your ‘off’ phase (without medication). This will involve a series of movements and an assessment of your rigidity and balance. We understand some of the assessment may be difficult for you without your Parkinson’s medication(s) however this is a key aspect of the assessment. This first part of the assessment should take no longer than 20 minutes.

After the first part of the assessment you will be given a low dose of apomorphine via an injection just under the skin. The physical assessment will be repeated after approximately 15-30 minutes to assess your response. Depending on how you have responded, a further slightly higher dose of apomorphine may be given. This process will be repeated until a good response to apomorphine has been identified. A good response is when you are back in the ‘ON’ phase for your Parkinson’s symptoms.

**What happens after the Apomorphine Response Test?**
Please bring your Parkinson’s medication with you to restart following your assessment. For a short period after the assessment you may experience more Parkinson’s Disease symptoms, these will settle over 24 hours.
Will I have a follow-up appointment?
The results of the assessment will be discussed with you on the day and forwarded to your GP as well. There will be an opportunity to discuss how you wish to proceed with treatment from this discussion. For example you may be sent home with ‘apomorphine pens’ for when you are experiencing troublesome ‘off’ symptoms. Full instruction of how to use the apomorphine pen will be given and followed up at home. If it is felt that daytime infusion of apomorphine is an option this will be discussed and arrangements made to start this at a later date. In most cases the infusion of apomorphine can be started at home.

You will continue to be seen by your usual neurologist and Parkinson’s nurse.

Useful sources of information
Parkinson’s UK Help line 0808 800 0303.

Contact us
If you have any questions or concerns about the apomorphine response test, please contact your Parkinson’s Nurse Specialist on 020 8725 2141 or 4677 (Monday to Friday, 9am to 5pm). Out of hours, please call the Parkinson’s UK helpline on 0808 800 0303.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)
PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).
Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

NHS Choices
NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.
Web: www.nhs.uk

NHS 111
You can call 111 when you need medical help fast but it’s not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.
Tel: 111
AccessAble
You can download accessibility guides for all of our services by searching ‘St George’s Hospital’ on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

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