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Cholinesterase inhibitors stabilize Alzheimer's disease

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Abstract

During the last decade, a systematic effort to develop a pharmacological treatment for Alzheimer disease (AD) has resulted into three drugs being registered for the first time in the USA and Europe for this specific indication. All three are cholinesterase inhibitors (ChEI). The major therapeutic effect of ChEI on AD patients is to maintain cognitive function at a constant level during a six-month to one-year period of treatment, as compared to placebo. Additional drug effects might slow cognitive deterioration and improve behavioral and daily living conditions. Comparison of clinical effects of six ChEI demonstrates a rather similar magnitude of improvement in cognitive measures. For some drugs, this may represent an upper limit, whereas for other it may still be possible to further increase the benefit. In order to maximize and prolong positive drug effects, it is important to start early and adjust dosage during the treatment. Recent studies show that in many patients the stabilization effect produced by ChEI can be prolonged for as long as a 24-month period. In order to explain the stabilizing effect of ChEI, a mechanism other than AChE inhibition, based on beta-amyloid metabolism, is postulated.

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