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CORRELATION BETWEEN PLASMA LEVELS OF INTERFERON-GAMMA AND VIRAL LOAD IN PATIENTS WITH HIV STAGE 1
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COMPARISON OF FUGL-MEYER SCORE BETWEEN PATIENTS WITH ACUTE THROMBOTIC INFARCT STROKE TREATED WITH STANDARD MEDICATION AND FLUOXETINE

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Abstract

Fluoxetine, an inhibitor of serotonin (5-HT) reuptake, increases activation in executive motor areas of healthy subjects. Acute singledose 20 mg administration will increase extracellular 5-HT level in frontal cortex. Fluoxetine also inhibit calcium influx in smoothmuscle vessels. All of that will increase cerebral blood flow and serotonergic transmission in motor cortex. The objective of the research is to prove benefits of combination treatment (standard, physical treatment and fluoxetine) than standard treatment on improving motor deficit in cerebral infarction patient. The study was performed at neurological patient in ward A Dr. Soetomo Hospital from February 12th, 2009 until May 12th, 2009. The study sample was acute cerebral infarction patients that fulfilled both inclusion and exclusion criteria. By using prospective single blind randomization, we performed motor examination (with motor Fugl-Meyer scoring) on both groups before and after treatment. The comparison result was analyzed by Mann-Whitney test. There are median motor Fugl-Meyer scale improvement in both groups on day 5th, but the improvement is better in fluoxetine group statistically significant (p=0.025). Time of administration didn’t influence on treatment effects. Fluoxetine administration besides standard treatment could increase motor outcome (motor Fugl-Meyer scale) in acute cerebral infarction patients (onset < 72 hours) significantly. (FMI 2014;50:100-103)

Keyword : fluoxetine, serotonin, motor, system, cerebral, infarction,

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