

Title: Spinocerebellar Ataxia Type 3 *GeneReview* – Medications that were not effective
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Medications not found to be useful in the treatment of SCA3. Of note, relatively few clinical trials of medications have been performed in SCA3, and none has yet been confirmed to show a definite benefit:

- A small study of six individuals with SCA3 suggested that lamotrigine may improve balance; however, benefit was not confirmed during the withdrawal phase of the trial [Liu et al 2005].
- While an earlier study suggested that tremethoprim-sulfamethoxazole may be beneficial in treating SCA3 [Sakai et al 1995], a larger study of 22 persons failed to show any benefit [Schulte et al 2001], leading the authors to conclude that long-term therapy with this drug combination is not recommended.
- A study of fluoxetine failed to show benefit for motor symptoms [Monte et al 2003].
- A study of the 5-HT_{1A} agonist, tandospirone, in ten persons suggested improvement in depressive symptoms, ataxia, insomnia, and leg pain in a subset of individuals [Takei et al 2004]. A subsequent open-label four-week symptomatic study by the same investigators tested tandospirone in a variety of degenerative ataxias, including 14 persons with SCA3. Four of 14 showed improved scores in an ataxia rating scale [Takei et al 2010]. A larger, double blind placebo-controlled study is needed to confirm such benefits.
- Tremor-controlling drugs do not work well for cerebellar tremors.
- No dietary factor has been shown to curtail symptoms.

References

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