

**VA**

U.S. Department of Veterans Affairs

Veterans Health Administration  
Parkinson's Disease Research,  
Education & Clinical Centers**NATIONAL VA PARKINSON'S DISEASE****C O N S O R T I U M***Education · Collaboration · Advocacy*

# THE TRANSMITTER

*March 2023*

## Article Reviews

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### **Using Downgaze Palsy Progression Rate to Model Survival in Progressive Supranuclear Palsy-Richardson Syndrome**

Prognosticating survival in progressive supranuclear palsy (PSP) is complicated by patients' individual trajectories of symptom development. For example, some patients develop supranuclear palsy relatively early in their disease course and others relatively late. The authors analyzed a longitudinal database of 414 patients with probable PSP-Richardson syndrome from 1994-2000 to assess relationships between the rate of progression of each item on the PSP Rating Scale and disease duration, with a particular focus on the progression of downgaze palsy and axial symptoms. Multivariate analysis revealed the following as significant risk factors for shorter survival in PSP: older age of onset, PSP stage, progression of the rate of downgaze palsy, dysphagia for liquids, and impaired quality of sitting down transfers. Limitations of the study include autopsy confirmation of the diagnosis in <10% of the sample and the lack of quantitative measurement of downgaze palsy, but these limitations are not unlike the real-world clinical environment. This survival analysis has implications for individual patient prognostication in PSP-RS as well as clinical trial development.

*Mov Disord. 2023 Feb;38(2);304-312. PMID: 36573662.*

<https://pubmed.ncbi.nlm.nih.gov/36573662/>

### **Naltrexone for impulse control disorders in Parkinson disease: a placebo-controlled study.**

Impulse control disorders (ICDs) can occur in Parkinson's disease as a result of medications, particularly dopamine agonists. Common ICDs include compulsive gambling, shopping, sexual behavior, and eating. Treatments for ICD are limited and they usually necessitate the reduction in medication at the expense of motor skills. This study enrolled 50 patients in a randomized controlled design to test the drug Naltrexone, which is already used to treat drug and alcohol addiction and has been shown to benefit non-PD patients with problematic gambling. They followed patients for 8 weeks and the dosing was flexible, allowing for increases if no change was detected at week 4. The study could

not show a difference with the drug for the primary outcome scale that was chosen (C-GIC), but it did show a difference based on a more granular and involved questionnaire which may have allowed for detection of a smaller difference. Further studies are needed to determine if this drug will help PD ICD.

*Neurology. 2014 Aug 26;83(9):826-33.*

### **MDS Criteria for the Diagnosis of Multiple System Atrophy**

MSA is a rapidly progressive neurodegenerative disorder characterized by autonomic failure, cerebellar syndrome and parkinsonism. No reliable diagnostic biomarkers are currently available for MSA, and definitive diagnosis can only be made through biopsy pathology postmortem. The accuracy of clinical diagnosis in MSA has thus far been inadequate with misdiagnosis rates of 21-38%. The aim of this study was to validate the MDS-MSA diagnostic criteria (recent International Parkinson and Movement Disorder Society diagnostic criteria for multiple system atrophy) against neuropathological diagnosis and compare diagnostic performance to previous clinical criteria in clinical practice. This was a retrospective cohort study including patients with brain donation to the Queen Square Brain Bank between 2009 and 2019 who presented clinically with either parkinsonism, or cerebellar syndrome. All patients were required to meet the essential criteria of MDS-MSA criteria (n = 318, 103 MSA, 215 non-MSA). Clinically probably MDS-MSA showed 95.1% sensitivity, 94% specificity and 94.3% accuracy. Interestingly, sensitivity at early stages was lower at 62.1%. Clinically established MDS-MSA showed 100% specificity (even at early stages in the disease). Limitations of this study included lower sensitivity at early stages of the disease. The article highlighted that MDS-MSA is a reliable diagnostic tool for clinical practice and research when compared to neuropathological diagnosis.

*Virameteekul, S., Revesz, T., Jaunmuktane, Z., Warner, T. T., & De Pablo-Fernández, E. (2023). Pathological Validation of the MDS Criteria for the Diagnosis of Multiple System Atrophy. Movement Disorders.*

## **Committee Activities**

### **Clinical Care Committee**

- **Rotation of Committee Chair:** Leadership for the clinical care committee rotates amongst the PADRECCs. The San Francisco PADRECC leads the committee for March/April. The committee meets via conference call the first Tuesday of the month at 12pm (EST)
- **Standardize and Optimize Clinical Care:** The committee continues to discuss treatment strategies, new medications and other procedures, and other clinical issues to improve patient care and outcomes across the national PADRECCs service area. It also serves to provide clinical support to the consortium network by focusing on procedures and measures to standardize clinical care across the PADRECC network.
- Recent agenda items have included:
  1. Future planning to enhance clinical service provision at PADRECCs : Suggestions and Strategies
  2. Discussion of DBS management and surgical programs at the PADRECCs

### 3. Discussion regarding management of e-consults

## Education Committee

- **PADRECC/EES Movement Disorder Series-Webinars:** knowledge-based webinars to provide VHA healthcare professionals with current practice standards and emerging trends in the treatment of Parkinson's disease and other movement disorders. CEs are typically provided for the live webinars. Check out the following link for a list of past webinars and if you are interested in receiving a recording of a past webinar please email [Gretchen.glenn@va.gov](mailto:Gretchen.glenn@va.gov) and list the date/topic of interest: [https://www.parkinsons.va.gov/Consortium/Presentations/Audio\\_Conference/MDS.asp](https://www.parkinsons.va.gov/Consortium/Presentations/Audio_Conference/MDS.asp)
- **Webinar- [Nursing Care Across the PD Spectrum: An Introduction](#) - **Registration Now Open** – **Date: April 19, 2023 – 9am - 1pm PST / 12pm - 4pm EST****  
Parkinson's Disease is one of the fastest growing neurological disorders. Over 110,000 veterans with Parkinson's Disease receive care throughout the US Department of Veteran Affairs. This number is expected to rise as our Veteran population continues to age and is expected to significantly impact the current health care system. Nurses are critical to Parkinson's care and are often the first points of contact of care. This knowledge-based, live virtual training will provide nurses an overview of the different nursing roles (i.e. LPN, RN, APRN, PA..) across the PD spectrum.
- **PD 101-Webinar for Patients and Caregivers- **April 20, 2023**** - Opportunity for Veterans and Caregivers to learn about PD symptoms, treatment options and expert care available at the VA.
- **National VA PD Newsletter-Call for articles coming soon!!!** Keep an eye out as we would love to hear and highlight the work you are doing for Veterans with PD!
- **VHA/PADRECC & The Parkinson's Foundation Partnership:** Goal of the partnership is to improve the care and quality of life for Veterans living with PD through collaborative education, research and services. This committee spearheads many of the projects for this partnership. Please check out the Transmitter email for current partnership offerings/activities
- **National Website Maintenance:** The committee performs periodic maintenance checks of the National Website to ensure information is current and up-to-date.
- **PADRECC Transmitter:** This committee continues to assemble and distribute this *e*-newsletter every other month.
- **Resources available on the National Website:**
  - **Patient Education Brochures-** <https://www.parkinsons.va.gov/patients.asp>
    - Exercise and Physical Activity
    - Fall Prevention
    - Motor Symptoms
    - Non-Motor Symptoms
    - Agent Orange and Toxic Exposures and PD

- **PADRECC Support/Education Groups:** The PADRECCs are now holding virtual groups open to Veterans and care partners interested in attending. Please check out the National Website for listing of dates/times and contact person to register for the groups and please share with your patients/care partners: <https://www.parkinsons.va.gov/patients.asp>
- **My Parkinson's Story-**<https://www.parkinsons.va.gov/patients.asp>  
A series of short videos prepared by the VA PADRECCs addressing various aspects of Parkinson's disease.
- **Suggested Education Essentials for Veterans with PD**
  - **Digital version:** <https://www.parkinsons.va.gov/patients.asp>
  - **Printer friendly version:**



Suggested Education  
Essentials