



THE TRANSMITTER

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Article Review

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Long-term effectiveness of dopamine agonists and monoamine oxidase B inhibitors compared with levodopa as initial treatment for Parkinson's disease (PD MED): a large, open-label, pragmatic randomised trial

The largest drug trial to date for PD showed that initial treatment with levodopa in early PD is associated with a modest but significant improvement in outcome as compared to those patients treated with a dopamine agonist or monoamine oxidase (MAO) inhibitor. The open label trial was carried out in Europe (mostly in the UK); median followup was 3 and maximum 7 years. Outcome was assessed using the mobility subscale of the 39 item Parkinson's Disease Questionnaire (PDQ-39), which estimates effects on quality of life and may be more sensitive to changes important to patients than are clinical rating scales. Initial treatment with a MAO inhibitor (such as rasagiline) was at least as effective as treatment with dopamine agonists (such as ropinerole or pramipexole). Levodopa-treated patients did have more dyskinesias, but these did not translate into a meaningful difference in quality of life. While not perfect, the study does suggest that, contrary to the prevailing view some fifteen years ago, early levodopa-sparing therapy is not necessarily the best approach, especially given the wide range of impulse control disorders associated with dopamine agonists.

PD MED Collaborative Group (2014): *Lancet*. Published online June 11, 2014.

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24928805>

Apathy in Parkinson's disease is associated with nucleus accumbens atrophy: A magnetic resonance imaging shape analysis

Apathy is a prevalent and often disabling symptom in PD. Much of what is known about apathy in PD has been derived from functional MRI studies of patients that have received DBS of the subthalamic nucleus. Ten patients each were studied in Lille, France from each of the following groups: apathetic PD patients, non apathetic PD patients, and healthy controls. The study found that apathetic patients showed differences in the shape of the nucleus accumbens, a striatal nucleus that also plays a role in limbic pathways affecting cognitive and emotional function. Apathetic patients showed more atrophy than did controls of the nucleus accumbens bilaterally, and severity of apathy was associated with degree of atrophy of the left nucleus accumbens. Apathetic patients also showed more atrophy of the dorsolateral head of the left caudate nucleus than did non apathetic patients. Unlike similar studies, the group in Lille did not find cortical atrophy to be associated with apathy. The study begins to shed more light on the functional neuroanatomy of apathy in PD.

Carriere, N., Besson, P., Dujardin, K., et al. (2014): *Movement Disorders* 29: 897-903.

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24817690>

Davunetide in patients with progressive supranuclear palsy: a randomised, double-blind, placebo-controlled phase 2/3 trial

Progressive supranuclear palsy (PSP) is a “Parkinson’s plus” syndrome characterized by eye movement problems, dementia, and gait decline. It is associated with brain deposition of the microtubule-associated protein tau/MAPT. In a transgenic mouse that expresses mutant forms of tau associated with frontotemporal dementia, treatment with a peptide derived from a glial-derived growth factor was associated with improved memory. Subjects in the US, Canada, Australia, and Europe received the peptide intranasally in a double blind placebo-controlled study for 1 year. The PSP Rating Scale and Schwab and England Activities of Daily Living Scales were the main outcome measure used, but the trial also examined brain atrophy and other biomarkers. Although davunetide was not effective, the study does set a precedent for using large collaborative multicenter trials in conjunction with imaging and other biomarkers to scrutinize potential disease modifying treatments for PSP.

Boxer, A.L., Lang, A.E., Grossman, M., et al. (2014): Lancet Neurology 13: 676-685.

<http://www.ncbi.nlm.nih.gov/pubmed/?term=24873720>

Committee Activities

Clinical Care Committee

- **Rotation of Committee Chair:** Leadership for the clinical care committee rotates amongst the PADRECCs. The Houston PADRECC leads the committee for July/August. Committee meets via conference call the first Tuesday of the month at 12pm (EST)
- **Standardize and Optimize Clinical Care:** Continues to discuss a variety of clinical issues to learn from each other’s experience, establish usage patterns of existing and emerging therapies, and discuss ways to enhance overall patient care. The committee continues to provide clinical support to the Consortium network, and work on measures to standardize clinical care across the PADRECC network. Recent agenda items have included ongoing discussion on:
 - Use of Clinical Video Telehealth for movement disorders and home monitoring devices
Review of applications in clinical arena for subset of patients, and ways to expand access to CBOCs and remote areas where subspecialty expertise is not available. Research ideas pertaining to the use of home monitoring devices in movement disorders patients.
 - Palliative Care: Review of palliative care resources in the PADRECCs
 - Therapy Topics: DBS target selection, Experience with various Neurotoxins, Use of newer anti-PD formulations (e.g. Neupro Patch) across the PADRECC’s etc.
 - Quality improvement/assurance project looking at hospitalized PADRECC patients and use of dopamine-blocking medications
 - The use of DAT scans in clinical practice : Applications and pitfalls of use

- **PADRECC Transmitter:** PADRECC clinicians provide reviews of recent movement disorder publications that are included in the PADRECC Transmitter

Education Committee

- **PADRECC/EES Movement Disorder Series:** The last audio conference for FY 14 will be held on **September 11, 2014** “Sleep Disorders in PD.” The audio conferences are archived on the National website www.parkinsons.va.gov under the Movement Disorder Series tab. All evaluations for CMEs are being done electronically via TMS and preregistration is required. Audio conferences are now held via Microsoft Lync, participants can use audio access through their computer or by calling a conference line (similar to VANTS). Please see the **Dates to Remember** section below for listing of upcoming audio conferences.
- **Patient Education Video Project:** The My Parkinson’s Story video series from FY 11& 12 are now available for viewing on the National PADRECC & VA Consortium Website: <http://www.parkinsons.va.gov/patients.asp> and on You Tube.
- **Enduring Materials Project:** In collaboration with EES, the committee is developing an on-line TMS self study program that will offer CME credit for a 3 year period. The purpose of this training is to provide VHA healthcare professionals with a broadened medical awareness of **Mood Disorders in PD.**
- **Caregiver Support Telephone Education Group:** In collaboration with the National VA Caregiver Support Line (CSL) a telephone education group will be held **on September 23rd, 2014 at 3pm EST** specifically for Caregivers affiliated with the PADRECCs. Please contact your local PADRECC and ask to speak to the Associate Director of Education for additional information.
- **National Newsletter:** The National Newsletter is in the editing phase.
- **PADRECC Transmitter:** The committee continues to assemble and distribute this e-newsletter every other month.

Houston PADRECC Service Area Updates

Houston PADRECC

Director: Dr. Aliya Sarwar

- The third Patient and Family Forum for fiscal 2014 is scheduled for Sept 5, 2014
- The National Newsletter “VA Report” is being edited and will be sent out in early August.
- Houston PADRECC publishes, twice yearly Newsletter- “*PADRECC Pathways*” . The latest issue discusses benefits of Tai Chi in Parkinson’s disease and includes a review of literature in this regard.
- The Clinical Care Committee for July and August will be chaired by the Houston PADRECC Director, Aliya Sarwar.

- The September EES lecture will be conducted by the Houston PADRECC Director, Aliya Sarwar, titled *Sleep Disorders and Parkinson's disease*.
- Hold a weekly Noon- 1 pm [Central time] Educational Conference
- Once a month Journal Club is conducted by PADRECC staff members on topics related to PD.
- Conduct a “Monthly Support Group” for PD patients and their caregivers on the First Thursday of each month
- 5th Annual Caregiver Conference in collaboration with a prominent community organization the Houston Area Parkinson's Society (HAPS) is being planned for November, 2014.
- Annual ABB *Run for a Reason* 5K run/walk with HAPS Superhero Squad Saturday before the Chevron Houston Marathon, January 17, 2015. In 2014 our shirts were blue and red and we looked like Superman, we even had red capes! In 2015 we will look like Batman.

Dates to Remember

September 11, 2014;

EES/PADRECC Movement Disorder Series

Topic: Sleep Disorders in PD

<http://www.parkinsons.va.gov/>

November 13, 2014

EES/PADRECC Movement Disorder Series

Topic: Exercise and PD

<http://www.parkinsons.va.gov/>