



### Welcome Terry Mangin, M.D., Movement Disorder Special Fellow

Dr. Mangin is participating in the fellowship in Movement Disorders at Portland VA Medical Center (PVAMC). Dr. Mangin earned her medical degree from University of Pennsylvania. She completed her neurology resi-

dency at the Hospital of the University of Pennsylvania. Dr. Mangin is clinically and scientifically interested in the spectrum of movement disorders. She also has an interest in international health endeavors, particularly in sub-Saharan Africa. Her enthusiasm and energy is a welcome addition to the Parkinson's Disease Research, Education, and Clinical Center (PADRECC).

### PADRECC In Progress

**Jessie Little**, Program Support Clerk, graduated this summer with her Bachelors of Science in Mathematics and Statistics. She will be continuing to work for the PADRECC for the next year. Congratulations to her.

Congratulations to **Marsha Andrews, MSW**, on graduating with her Masters in Social Work from Portland State University. Marsha has been working for the PADRECC for three years to reform and manage our Registry Databases.

We would like to say goodbye to our LPN, **Candace Tepper**. She has moved on to work at Kaiser Permanente Hospital here in Portland, OR as a Research Nurse.

**Julie Anderson, MD**, our psychiatry resident has finished out her year long appointment in the PADRECC. **Daniel Dick, MD** has taken her place and started with us in July 2008.

### Movement Disorders Society 12<sup>th</sup> International Congress

In June 2008, four Portland VA PADRECC physicians traveled to Chicago, IL to present at the 12th annual Movement Disorders International Congress. The following is a summary of the posters that each physician presented.

**Joe Quinn, MD**, presented a poster and abstract entitled "Screening for Cognitive Impairment in a Parkinson's Disease Clinic". This abstract looked at 77 participants who were administered a verbal fluency, clock draw and three word recall (mini-cog), Mini Mental State Examination (MMSE), and trails A and B. It was found that the mini-cog and verbal fluency could be administered faster than the MMSE with comparable detection of cognitive impairment. Trails A and B was much more time consuming than the MMSE and was difficult for many Patients with Parkinson's Disease to complete. Demented patients were found to be significantly older than non-demented patients, however disease duration was not significantly different between the two groups. A more rigorous dementia diagnosis is needed to determine the sensitivity and specificity of each screen than what was available in this data set.

**Jeff Kraakevik, MD**, presented a poster and abstract entitled "Admission for injurious falls in Parkinson's Disease". Jeff ran a query of VA VISN 20 patients with a diagnosis of Parkinson's Disease. It was found that of 4,498 PD patients identified, 238 (5.3 %) were admitted for a fall and/or a fracture. Adjusting for all other variables, demented PD patients are 2.86 times more likely to be admitted for fall and/or fracture than non-demented patients. Furthermore, those PD patients with osteoarthritis are 1.5 times more likely to be admitted for fall/fracture than non-osteoarthritis patients.

**Amie Peterson, MD**, presented a poster entitled "Instituting a Medication Comment in an Electronic Ordering System to Decrease the Prescription of Dopamine Blockers to Parkinson's Patients". In June of 2004 the Portland VA Medical Center instituted an information comment through the electronic ordering system. When certain medications (risperidone, haloperidol, thiothixene, fluphenazine, thioridazine, molindone, ziprasidone, olanzapine, prochlorperazine, metoclopramide) are ordered, a comment appears in an information window to avoid them in PD patients.

Continued on Page 2...

### **NW PADRECC Retreat**

The NW PADRECC hosted a faculty and staff retreat on Friday, September 26, 2008 at the Residence Inn Portland Downtown at RiverPlace. The retreat aimed to facilitate the collaboration and cooperation of the PADRECC Portland and Seattle faculty and staff, sharing information to improve the health and well-being of veteran patients with Parkinson's Disease and other movement disorders through the integration of research, education, and clinical care. Key presentations include a demonstration projects on Neuroleptics by Dr. Amie Peterson and Falls by Jeff Kraakevik, and Biomarkers in PD by Dr. Matt Brodsky. The retreat also including research updates on the Washington PD registry by Dr. Mike Kim. For more information please contact Ryan Rieger, PADRECC Administrative Officer, at 503.220.8262 x55203.

### **NW PADRECC Outreach**

NW PADRECC Clinical Staff traveled to Cheyenne, Wyoming and Anchorage, Alaska for an outreach program in August and September 2008. The objective of the outreach program was to provide an increased awareness and education of Parkinson's Disease and other movement disorders to providers and patients within the NW PADRECC service areas. Dr. Jeff Kraakevik presented to patients and providers new updates in treatment and research of Parkinson's Disease in Anchorage, AK. Dr. Kathy Chung and Susan O'Connor, RN, held educational lectures for both providers and patients in Cheyenne, WY. Both outreach visits initiated the recruitment of the Cheyenne VAMC and Alaska VA Healthcare System into becoming official VA National Parkinson's Disease Consortium Centers. For more information on the outreach program please contact Ryan Rieger, PADRECC Administrative Officer, at 503.220.8262 x55203.

### **National VA PD Consortium**

The National VA Parkinson's Disease Consortium hosted a National Conference on September 3-5, 2008 in Pittsburgh, Pennsylvania. The objective of the National VA Parkinson's Disease Consortium is to strengthening the influence of the Consortium Center Network. The conference reviewed current management strategies and discussed program direction. The Consortium also invited providers to showcase their Parkinson's Disease research and educational initiatives in poster form. Highlighted events during the conference included debates on pre-motor PD, therapy, dopaminergic stimulation, and Lewy body disease. The conference included an update on the Deep Brain Stimulation study progress as well. For more information on the VA National Parkinson's Disease Consortium please contact Ryan Rieger, PADRECC Administrative Officer, at 503.220.8262 x55203.

*...Continued from Page 1*

Via the veterans health administration data warehouse investigators determined the number of times each of these medications was prescribed to a person with PD. The data was reviewed in 12 month intervals for 4 years before and 3 years after the comment was implemented. Results indicate that a medication comment system may have reduced the number of dopamine blockers prescribed to persons with PD. There is one major confounding factor to this conclusion; the rates of use of dopamine blockers in PD appeared to be on a decline prior to the implementation of the comment. It is possible that the declining number of prescriptions may be a consequence of this trend.

**Kathryn Chung, MD**, presented a poster and abstract entitled "Quantification of Dyskinesia Using a Force Plate." Subjects went off their Parkinson's Disease medications over night, and then received 2 hours of intravenous levodopa. Subjects are then asked to stand on a force plate for one minute with and without a cognitive task. Clinical rating scale (CRS) 0-4 in 7 body parts and force plate measurement was performed 1 hour before L-dopa and about hourly through the cycle until "off". It was found that a force plate can objectively measure L-dopa induced dyskinesia during an L-dopa dose cycle with a correlation of 0.78 against a common clinical rating scale while subjects perform a mental task. The advantages of the force plate include objective measures, ease of use and portability.

**If you would like more information or a copy of one of these abstracts, please e-mail Ryan Rieger at [ryan.rieger@va.gov](mailto:ryan.rieger@va.gov).**

### **Neurologists in the 21<sup>st</sup> Century: What's New for 2009?**

The Oregon Health and Sciences University hosted a CME sponsored course for providers titled "Neurologists in the 21<sup>st</sup> Century: What's New for 2009?" on September 27, 2008 at Doernbecher Children's Hospital VEY Conference Room. The event provided updated information on new clinical trials and updated research findings, as well as current options for diagnosing and treating neurology patients. By the conclusion of the program, attendees improved knowledge of developments in epilepsy, managing Alzheimer's, treating insomnia, MS, ALS, movement disorders, and proper uses of neuroradiology. Key speakers included Dr. Marty Salinsky on "Surgery for Epilepsy: Challenges in Patient Selection," Dr. O'Neil Bains on "A Practitioners Approach to Treating Insomnia," and Dr. Leslie Weiner on "The Viral Hypothesis of MS: Past and Present." For more information on the CME please contact Ryan Rieger, PADRECC Administrative Officer, at 503.220.8262 x55203.

## PADRECC Website



The PADRECC website provides information about Parkinson's Disease and other movement disorders, as well as services available to veterans and their caregivers. Here are some things you can find on the website:

- ◆ PADRECC staff and contact information
- ◆ Information about Parkinson's Disease and it's treatments
- ◆ Information about PADRECC Clinics
- ◆ Information about local support groups
- ◆ Patient Education events
- ◆ Research projects occurring at the Portland VA PADRECC
- ◆ Other Internet resources for people with Parkinson's Disease

Check out the newly updated PADRECC Website at <http://www.visn20.med.va.gov/portland/PADRECC>

## Research Opportunities at the VA

### Memory and Movement Disorders Demonstration Project (VA IRB ID: 1585 VA IRB Grant Number: #02-2202)

Dr. Joseph Quinn, MD is conducting this research study in order to track the frequency and types of changes in mental functioning that occur over time in Parkinson's patients. Participants would be asked to attend one or more study visits. All study visits would take place at the Portland VA Medical Center. The first visit would take less than twenty minutes. If asked to continue in the study there would be a second 90 minute visit and then follow-up examinations once a year for the next 3 years. All patients in the Parkinson's Disease Research, Education and Clinic Center (PADRECC) are invited to participate in this study. You may or may not personally benefit from participating in this study. However, by serving as a subject, you may help us learn how to benefit patients in the future. For more information on how to participate, please contact Susan O'Connor, RN at (503) 721-1091.

### Parkinson Associate Risk Study (PARS): Evaluating Potential Screening Tools for Parkinson Disease (VA IRB ID: 2021; VA IRB Grant Number: # 05-0307)

Dr. Penny Hogarth is conducting this research study to estimate the frequency of olfactory loss in first-degree relatives of Parkinson's patients. Participation by a first-degree relative of a Parkinson's patient would require 6 one hour annual visits to the Portland VA Medical Center and completion of 6 annual smell tests by mail. The sub-study would require travel to Connecticut for a brain imaging procedure. All costs for travel to Connecticut will be paid by the study sponsor. All first-degree relatives of PD patients above the age of 50 or within 10 years of the age of diagnosis of PD are invited to participate. This is a research study and not treatment or diagnosis of PD. You may not benefit from participating in this study. However, by serving as a subject, you may help us learn how to benefit patients in the future. For more information on how to participate, please contact Susan O'Connor, RN at (503) 721 – 1091.

## Research Opportunities at OHSU

### Fish Oil for Depression in Multiple Sclerosis (MS) and Parkinson's Disease (PD)

The Parkinson's Center of Oregon at Oregon Health & Science University is looking for people with a confirmed diagnosis of PD who are suffering from Depression. The purpose of the study is to determine if taking omega-3 fatty acids along with your current antidepressant helps with symptoms of depression in people with PD. In addition we will determine if omega-3 fatty acids decrease blood levels of substances that are associated with depression.

You may be eligible to participate in the study if you meet all of the following criteria.

- Have a definite diagnosis of PD
  - On a stable dose of anti-depressant medication
- Between 18-85 years of age

This is a three-month pilot study in which 60 participants with either PD or MS will be randomly assigned to receive either fish oil capsules (which have high amounts of omega-3 fatty acids) or placebo capsules. The study requires 5 visits to OHSU. The research study will pay for all costs associated with the participation in this study. You will be responsible for any expenses that have to do with other aspects of your participation such as childcare and transportation. If you meet the eligibility requirements described above and are interested in participating in this study please call Dr. Lynne Shinto at (503) 494-5035.