A TOUR OF THE CUTTING EDGE OF PARKINSON'S TREATMENTS

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- Movement Disorders Specialist
- Residency & Medical School: The Icahn School of Medicine of Mount Sinai in New York City



- Fellowship: UC San Diego
- Since 2016- Kaiser Permanente San Rafael
- Academic interests: environmental causes of Parkinson's, lifestyle management for prevention and symptom management of neurologic disease



TOUR MAP

- 1. Vaccines and immunotherapy
- 2. Oral drugs
- 3. Gene Therapy
- 4. Gait treatments
- 5. Miscellaneous

STUDY PARTICIPATION

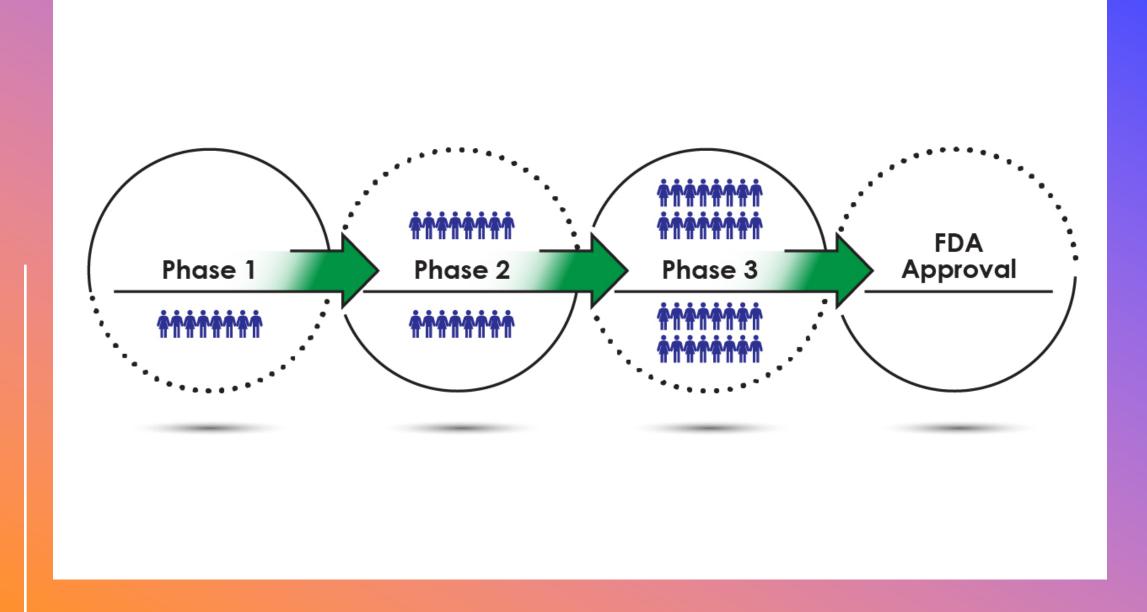


Note Clinical Trial "identifier"

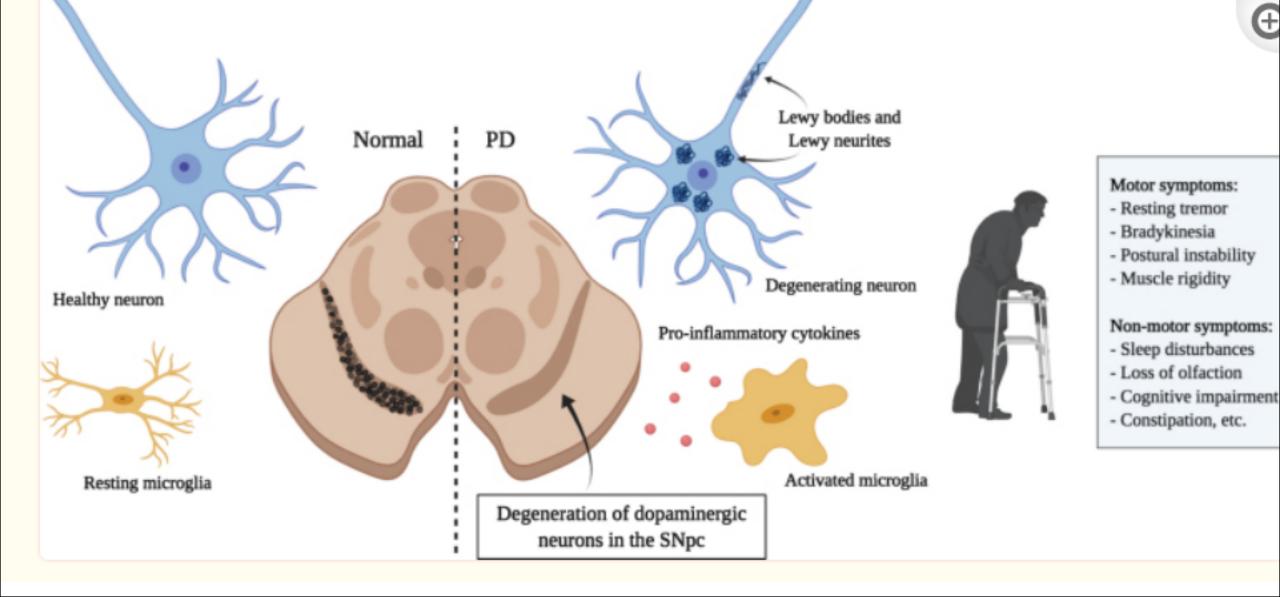
NCT Number: The National Clinical Trial number is an identification that ClinicalTrials.gov assigns a study when it is registered

highlighted those at UCSF

STUDY PHASES: WHAT ARE THEY?









How Vaccines work

- Two related strategies to protect against this accumulation of alphasynuclein
- 1) Introduction of antibodies to alpha-synuclein into the body, also known as *passive immunity*
- 2) Introduction of a molecule that induces the body to produce its own antibodies against alpha-synuclein, also known as *active immunity*

Vaccine therapies

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	Phase	Sponsor	Outcomes	Clinical Trial Identifier
AFFITOPE-PD01A	1b	Affiris	Well tolerated and safe	NCT02618941
PRX002/Prazinezumab	2	Roche/Prothena	No motor clinical change after 52 weeks, improved 2ndary end points	NCT03100149
BIIB054/Cinpanemab	2	Biogen	Safe, further data pending	NCT03318523

CHALLENGES OF VACCINE

- Efficacy at later stages (does it need to be
 administered earlier)
 - Avoiding autoimmune reaction
 - Is alpha synuclein the only process to blame?
 - Very mixed results so far, with no benefit in large studies with smaller studies pending

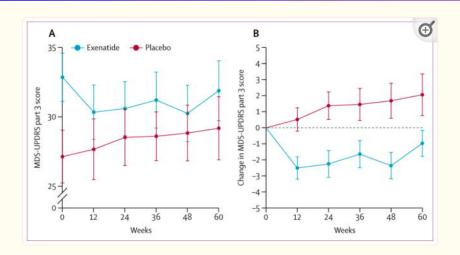


Figure 2

MDS-UPDRS part 3 scores (A) and changes in MDS-UPDRS part 3 scores (B), by study visit Data are means for the off-medication state. Error bars represent standard error of the mean

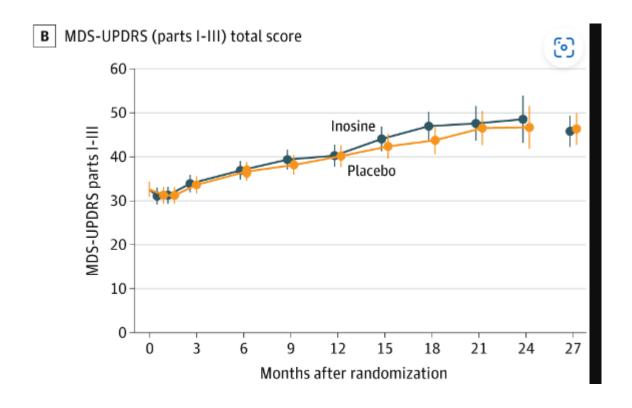


Oral Drugs

- Exenatide
 - Crosses Blood Brain Barrier
 - Treats diabetes type 2
 - Large Phase 3 study pending

Oral Drugs

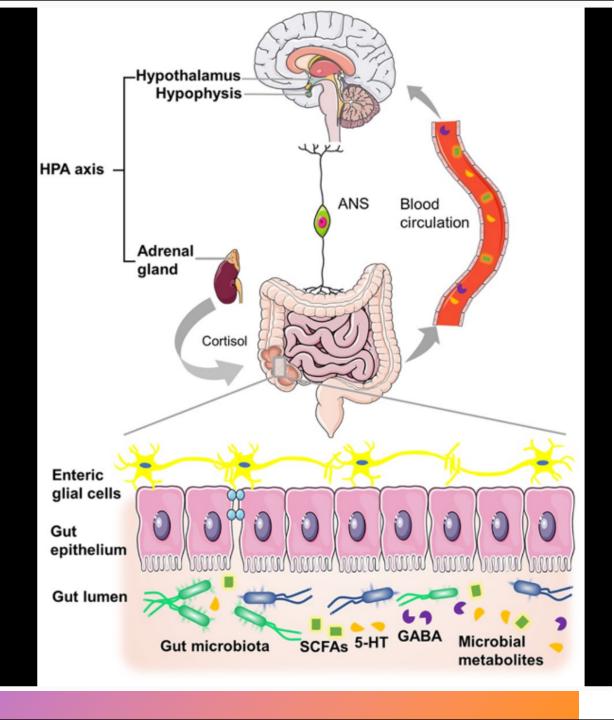
- Inosine
 - Reduces Urate levels and inflammation
 - Large Phase 3 study ended early, negative results



Oral Drugs

- Deferipone
 - Reduces iron levels
 - Large Phase 3 showed worsened symptoms on patients without medication (early PD)

Table 2. Primary, Secondary, and Exploratory Clinical Outcomes (Intention-to-Treat Population).*					
Outcome	Deferiprone (N=186)	Placebo (N=186)	Mean Adjusted Difference (95% CI)†		
Score on MDS-UPDRS part III					
Value at wk 36	31.8±14.0	25.9±11.7			
Change from baseline (95% CI)	9.8 (8.2 to 11.3)†	4.0 (2.7 to 5.3)†	5.8 (3.8 to 7.7)		
Score on MDS-UPDRS part II					
Value at wk 36	10.2±7.7	7.1±5.4			
Change from baseline (95% CI)	4.2 (3.4 to 5.1)†	1.8 (1.0 to 2.6)†	2.5 (1.3 to 3.6)		
Sum of scores on MDS-UPDRS parts II and III					
Value at wk 36	42.2±18.8	33.1±15.0			
Change from baseline (95% CI)	14.2 (12.2 to 16.1)†	5.9 (4.1 to 7.6)†	8.3 (5.7 to 10.8)		
Exploratory clinical outcome§					
Score on MDS-UPDRS part I					
Value at wk 36	8.2±5.9	6.2±4.6			
Change from baseline (95% CI)	2.0 (1.3 to 2.7)†	0.2 (-0.4 to 0.9)†	1.8 (0.8 to 2.8)		



Gut Microbiome

Changes in microbes associated with Parkinson's disease

More Longitudinal study is needed!

Microbiota Intervention to Change the Response of Parkinson's Disease

Status at UCSF

accepting new patients

Start Date

July 2019

Completion Date

December 2023 (estimated)

Sponsor

University of California, San Francisco

ID

NCT03575195

Phase

Phase 1/2 Parkinson's Disease Research Study

Study Type

Interventional

Participants

Expecting 86 study participants

-Analysis of the microbiome in PD

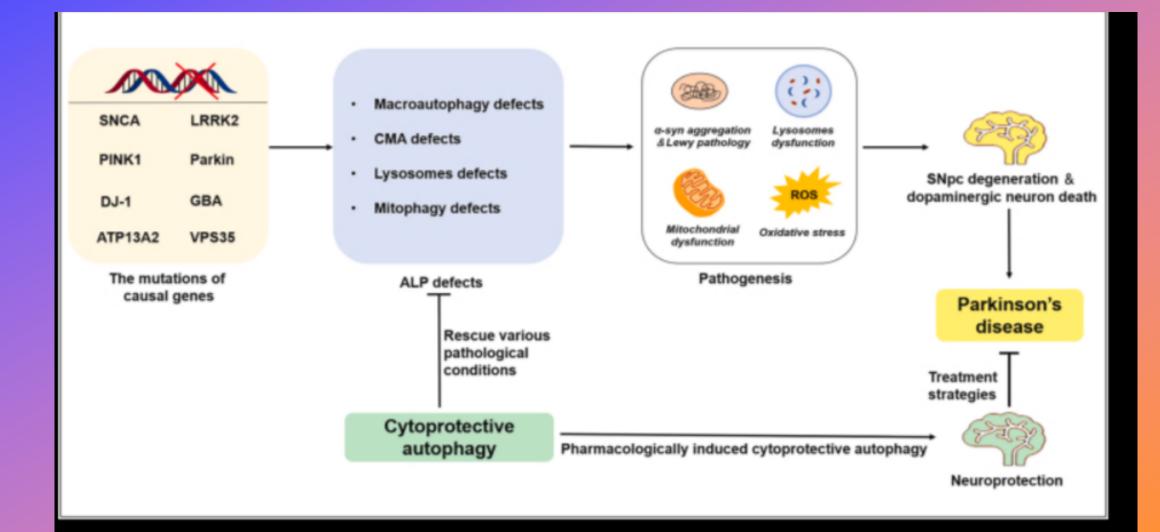
-does treatment with an antibiotic allow levodopa to work better?





Oral Probiotics

- Class I evidence for probiotics as a treatment for constipation in PD.
- PD aspects, such as motor disability and cognitive function, and its long-term efficacy (including effects on PD drug absorption in the gut) have not been investigated adequately.





PD GENEration: Mapping the Future of Parkinson's Disease

Parkinsons.org research project (currently wait list)

National initiative that offers genetic testing for clinically relevant Parkinson's-related genes and genetic counseling at no cost for people with Parkinson's disease (PD).

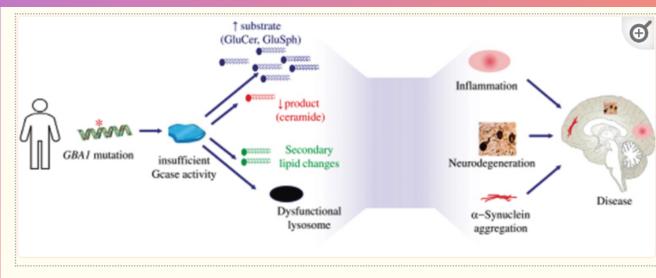
GBA1

• Among the lysosomal genes involved, *GBA1* has the largest impact on Parkinson's disease risk. Deficiency in the *GBA1* encoded enzyme ultimately results in toxicity and inflammation and negatively affect many clinical aspects of Parkinson's disease, including disease risk, the severity of presentation, age of onset, and likelihood of progression to dementia



• Phase 1 study







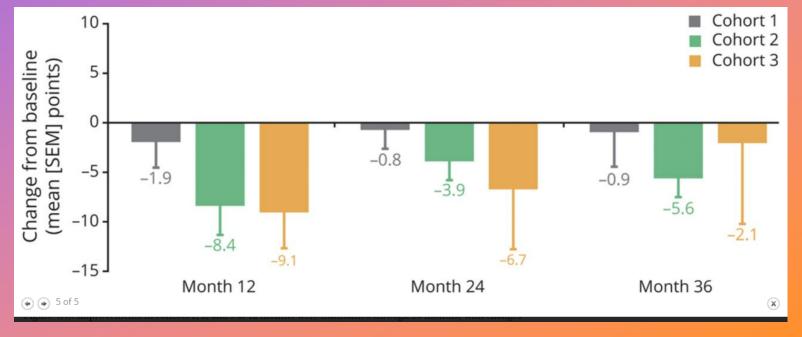
LRRK2

- One of the most common monogenic forms of Parkinson disease (PD) is caused by mutations in the LRRK2 gene that encodes leucine-rich repeat kinase 2 (LRRK2).
- LRRK2 mutations, and particularly the most common mutation Gly2019Ser, are observed in patients with autosomal dominant PD and in
- LRRK2 kinase inhibitors can be neuroprotective in preclinical models of PD
- BIIB122
- Phase 3 study UCSF and nationally: ClinicalTrials.gov Identifier: NCT05418673

VY-AADC01

- VY-AADC01, an experimental AAV2 gene therapy encoding the human aromatic L-amino acid decarboxylase (AADC) enzyme designed to increase dopamine production from medication
- VY-AADC01 was delivered via bilateral, intraoperative MRI-guided putaminal infusions
- Phase 3 study UCSF and nationally
 - ClinicalTrials.gov Identifier: NCT05418673





INFUSIONS

Subcutaneous infusions of levodopa

ND0612

Continuous subcutaneous

levodopa/carbidopa pump

Phase 2 trials (n = 68)

showed a reduction of

approximately 2 h of OFF

time per day. Mild infusion

site reactions (ISRs) were

frequently reported

treatment-emergent adverse

effects

Phase 3 trial comparing

ND0612 with oral levodopa -

ongoing

ABBV-951

Subcutaneous delivery of

levodopa/carbidopa

phosphate prodrug

Phase 1 study (n = 28)

demonstrated steady-state

levels and degree of

fluctuation similar to LCIG



GAIT TREATMENTS

Transmagnetic Stimulation (TMS) For Freezing of Gait (FOG)

 TMS over supplementary motor cortex confers the beneficial effect by normalizing the abnormal brain functional connectivity pattern

 May serve as an add-on therapy for alleviating FOG in PD patients.



THE VIBRATING GLOVE

Figure 1

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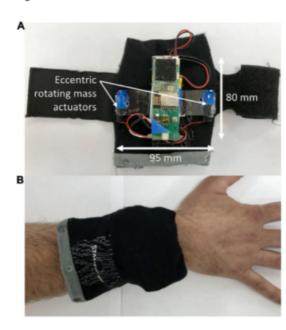


FIGURE 1. The wearable vibrotactile stimulation device. Each vibration unit powered two eccentric rotating mass actuators from which the vibrotactile stimulation was delivered (A). The vibration units were housed in cloth pouches that were attached to the subject's wrists and ankles using a Velcro strap (B).

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The device used in the recent Putrino study.



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Good vibrations

Can Parkinson's symptoms be stopped?

By Holly Alyssa MacCormick

Illustration by Harry Campbell

Artist's conception of a vibrating glove used to help relieve symptoms of Parkinson's.

October 14, 2021

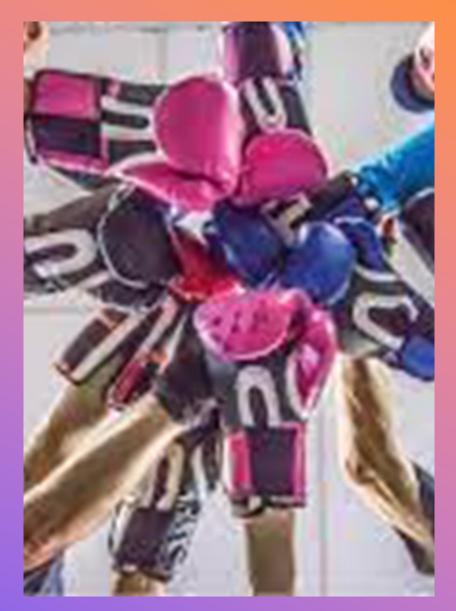
- Very little data made public, as far as we know no longer placebo control studies have been done
- We need more information



EXERCISE

- Release of neurotrophic factors and greater cerebral oxygenation
- Stimulates dopamine synthesis for symptom improvement
- Evidence that it improves physical functioning, health-related quality of life, strength, balance and gait speed for people with PD

- Rock Steady Boxing
- Qi Gong
- Feldenkrais
- Cycling
- Dance
- Yoga
- Mindfulness
- Tai Chi
- Stand up paddle boarding



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KAISER PERMANENTE MISSION

https://parkinsonscare.kaiserpermanente.org/

Multidisciplinary approach

A judicious drug formulary

High standards of care

A Growing Interest in Integrative Medicine

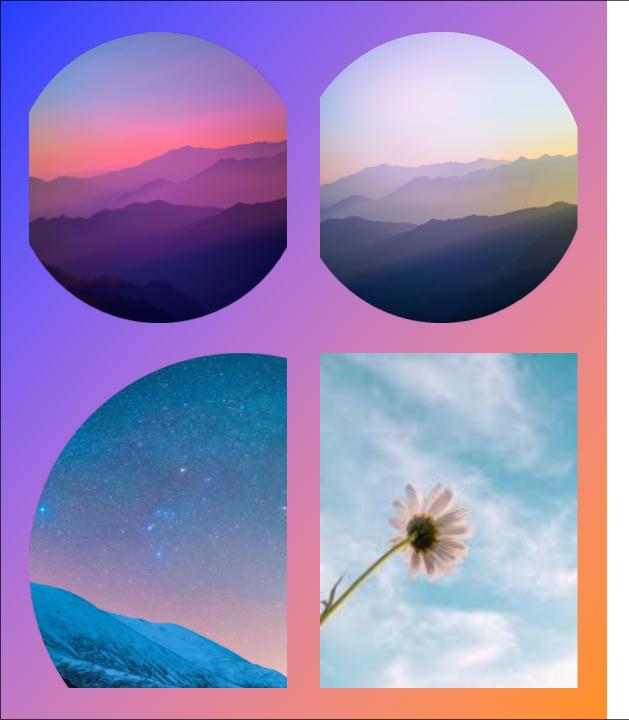
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THANK YOU