

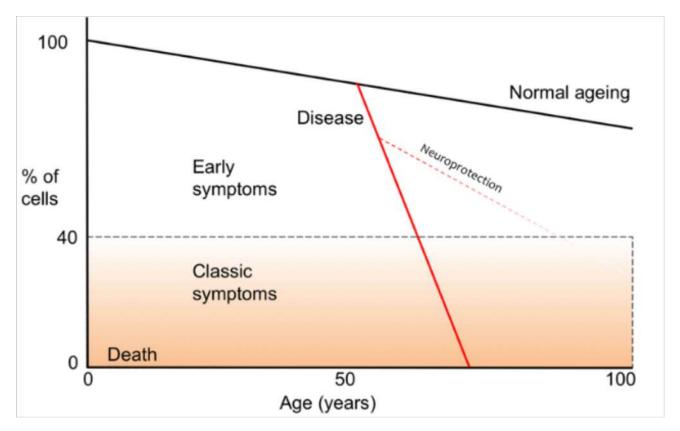
Emerging concepts for web-based assessment of risk cohorts for Parkinson's disease

Alastair Noyce
Clinical Senior Lecturer

Preventive Neurology Unit
Wolfson Institute of Preventive Medicine
Barts and the London School of Medicine & Dentistry
Queen Mary University of London







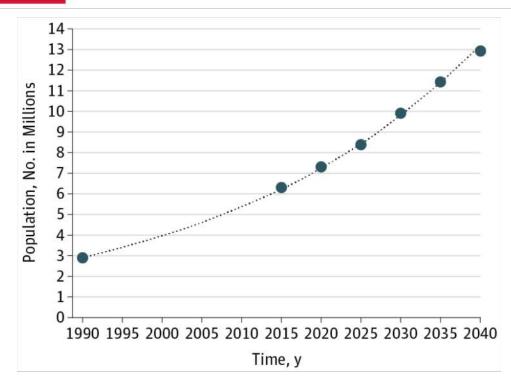
NO CURE & NO DRUGS THAT CHANGE THE UNDERLYING DISEASE COURSE





VIEWPOINT

The Parkinson Pandemic—A Call to Action





Meta-Analysis of Early Nonmotor Features and Risk Factors for Parkinson Disease

ANN NEUROL 2012

Alastair J. Noyce, BMedSci, MRCP, ^{1,2} Jonathan P. Bestwick, MSc, ³
Laura Silveira-Moriyama, PhD, MD, ^{1,4} Christopher H. Hawkes, MD, FRCP, ²
Gavin Giovannoni, PhD, FRCP, ² Andrew J. Lees, MD, FRCP, ¹ and Anette Schrag, PhD, FRCP¹



Factor	Number of studies			OR/RR (95% CI)
Family history				
Any relative Case-control studies	19		_	4.45 (3.39 to 5.83)
First degree relative Case-control studies	26			3.23 (2.65 to 3.93)
Family history of tremor	20			0.20 (2.00 to 0.00)
Case-control studies	10			2.74 (2.10 to 3.57)
Constipation Case-control studies	1			2.18 (1.32 to 3.61)
Cohort studies	1			2.70 (1.30 to 5.50)
All	2			2.34 (1.55 to 3.53)
Mood disorder Case-control studies	11			1.90 (1.62 to 2.22)
Cohort studies	2		•	1.79 (1.72 to 1.86)
All	13			1.86 (1.64 to 2.11)
Pesticides Case-control studies	36			1.77 (1.48 to 2.12)
Cohort studies	2			1.78 (1.30 to 2.42)
All	38			1.78 (1.50 to 2.10)
Head injury Case-control studies	19			1.58 (1.30 to 1.91)
	10			1.00 (1.00 to 1.01)
Rural living Case-control studies	18			1.43 (1.12 to 1.83)
Cohort studies	.1		-	1.37 (0.56 to 3.33)
All	19			1.43 (1.13 to 1.81)
Beta blockers Case-control studies	3			1.28 (1.19 to 1.39)
	3		~	1.26 (1.19 to 1.39)
Farming/agriculture Case-control studies	24			1.26 (1.10 to 1.45)
Cohort studies	1			1.24 (0.34 to 4.53)
All	25		∼	1.26 (1.10 to 1.44)
Well water	00			4.04 (4.04 to 4.40)
Case-control studies	28			1.21 (1.04 to 1.40)
	0.25	1 0.5	I I 1 2	8
	Decrease	d risk of PD	Increased risk of PD	



Meta-Analysis of Early Nonmotor Features and Risk Factors for Parkinson Disease

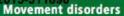
ANN NEUROL 2012

Alastair J. Noyce, BMedSci, MRCP, ^{1,2} Jonathan P. Bestwick, MSc, ³
Laura Silveira-Moriyama, PhD, MD, ^{1,4} Christopher H. Hawkes, MD, FRCP, ²
Gavin Giovannoni, PhD, FRCP, ² Andrew J. Lees, MD, FRCP, ¹ and Anette Schrag, PhD, FRCP¹



Factor	Number of studies			OR/RR (95% CI)
Smoking Current vs. never Case-control studies Cohort studies All	26 7 33			0.46 (0.41 to 0.50) 0.47 (0.40 to 0.56) 0.44 (0.39 to 0.50)
Ever vs. never Case-control studies Cohort studies All	61 6 67	*		0.64 (0.60 to 0.69) 0.63 (0.53 to 0.76) 0.64 (0.60 to 0.69)
Past vs. never Case-control studies Cohort studies All	26 5 31	→		0.80 (0.72 to 0.89) 0.75 (0.69 to 0.81) 0.78 (0.71 to 0.85)
Coffee Case-control studies Cohort studies All	13 6 19			0.68 (0.57 to 0.82) 0.66 (0.57 to 0.77) 0.67 (0.58 to 0.76)
Hypertension Case-control studies Cohort studies All	10 2 12			0.69 (0.55 to 0.87) 0.98 (0.82 to 1.17) 0.74 (0.61 to 0.90)
NSAID's Case-control studies Cohort studies All	5 4 9	-		0.86 (0.77 to 0.96) 0.86 (0.66 to 1.12) 0.83 (0.72 to 0.95)
CCB's Case-control studies Cohort studies All	4 1 5	→		0.89 (0.81 to 0.98) 1.18 (0.73 to 1.92) 0.90 (0.82 to 0.99)
Alcohol Case-control studies Cohort studies All	22 2 24	→		0.92 (0.85 to 0.99) 0.79 (0.65 to 0.95) 0.90 (0.84 to 0.96)
	0.25	I I 0.5 1	1 2	4 8
	Decreased r	risk of PD	Increased risk of PD	





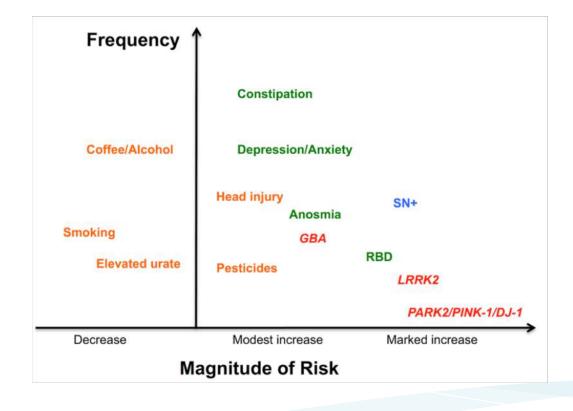


REVIEW

The prediagnostic phase of Parkinson's disease

Alastair John Noyce, Andrew John Lees, Anette-Eleonore Schrag²









Identification of risk and early features from published evidence



Online population-based screening for these factors

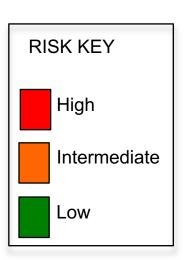


Prospective follow-up













Opened 11th April 2011 ~1500 individuals registered 1323 eligible and included





Age Gender Family history of PD Head injury

Medications Hypertension

Constipation Depression/anxiety Erectile dysfunction

Alcohol Coffee Smoking



REM-sleep Behaviour Disorder
Smell loss
Tapping speed
Genetic variation



Parkinson's disease





Movement disorders



RESEARCH PAPER

PREDICT-PD: Identifying risk of Parkinson's disease in the community: methods and baseline results

Alastair J Noyce, ^{1,2} Jonathan P Bestwick, ³ Laura Silveira-Moriyama, ^{1,4} Christopher H Hawkes, ² Charles H Knowles, ² John Hardy, ¹ Gavin Giovannoni, ² Saiji Nageshwaran, ⁵ Curtis Osborne, ² Andrew J Lees, ¹ Anette Schrag⁵

RESEARCH ARTICLE

PREDICT-PD: An Online Approach to Prospectively Identify Risk Indicators of Parkinson's Disease

Alastair J. Noyce, MRCP, PhD, ^{1,2} Lea R'Bibo, MSc, MRes, ¹ Luisa Peress, BSc, ² Jonathan P. Bestwick, MSc, ³ Kerala L. Adams-Carr, MB, BS, BA, ^{1,4} Niccolo E. Mencacci, MD, ¹ Christopher H. Hawkes, FRCP, MD, ² Joseph M. Masters, BSc, ² Nicholas Wood, FRCP, PhD, ¹ John Hardy, PhD, ¹ Gavin Giovannoni, FRCP, PhD, ⁶ Andrew J. Lees, FRCP, MD, ¹ and Anotte Schrag, FRCP, PhD, ¹*

TABLE 2. Longitudinal associations of baseline risk scores with UPSIT, RBDSQ, and tapping speed at year 3

	Higher risk	Lower risk	P value ⁸
UPSIT score			
n	130	132	
Median (IQR)	30 (26-33)	33 (30-35)	<.001
<27 (%)	40 (31)	15 (11)	<.001
RBDSQ score			
n	140	139	
Median (IQR)	2 (1-4)	1 (0-3)	<.001
>5 (%)	33 (24)	10 (7)	<.001
KS score	CESC MC MA		
n	135	130	
Mean (95% CI)	51.3 (49.5-53.2)	55.5 (53.6-57.4)	.001
<44 (%)	40 (30)	17 (13)	.002

Every year participants asked for new diagnosis of PD or movement disorder (drug lists too).

Independent specialist diagnoses.

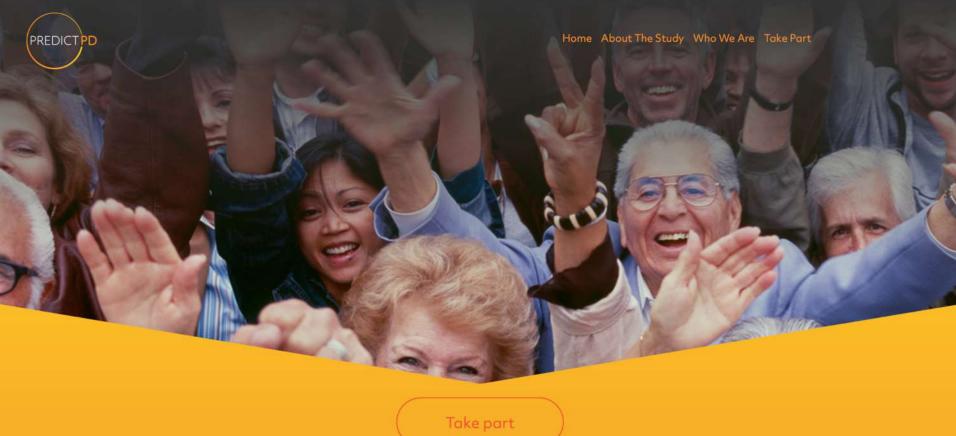
Positive answers followed up by telephone and inperson visit.

3 at year 1 1 at year 2 3 at year 3 7 in total

Baseline risk score and incident PD over 3 years Hazard Ratio = 4.39 (95% CI 1.03-18.68; p=0.045)







Parkinson's is on the rise

We need healthy people aged 60-80 years to help us PREDICT-PD and get closer to a cure.

FIND OUT MORE



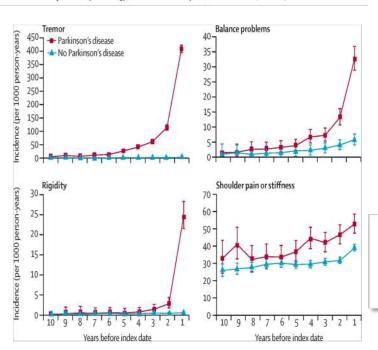


Pre-Metor Parkinson's disease?

When Did Ray Kennedy's Parkinson's Disease Begin?

A. J. Lees

Department of Neurology, The Middlesex Hospital, Mortimer Street, London, U.K.



How does parkinsonism start? Prodromal parkinsonism motor changes in idiopathic REM sleep behaviour disorder

R. B. Postuma, 1,2 A. E. Lang, J. F. Gagnon, A. Pelletier 1,5 and J. Y. Montplaisir 2,6

Prediagnostic presentations of Parkinson's disease in primary care: a case-control study



Anette Schrag, Laura Horsfall, Kate Walters, Alastair Noyce, Irene Petersen

oa

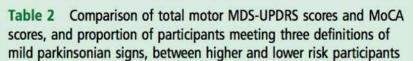




RESEARCH PAPER

Subtle motor disturbances in PREDICT-PD participants

Alastair J Noyce, ^{1,2} Anette Schrag, ³ Joseph M Masters, ² Jonathan P Bestwick, ⁴ Gavin Giovannoni, ² Andrew J Lees ¹

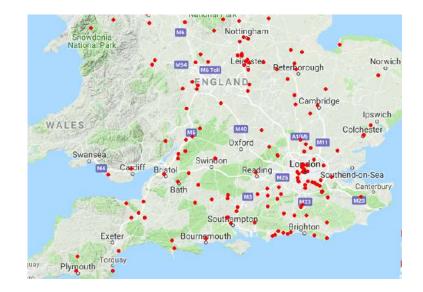


_	Higher risk	Lower risk	n Valua
n	74	111	p Value
Median MDS-UPDRS (IQR)	3 (1.0-5.5)	1 (0.0-3.0)	<0.001
Mild parkinsonism Berg definition n (%)	13 (17.6%)	7 (6.3%)	0.027
Mild parkinsonism Louis definition n (%)	23 (31.1%)	12 (10.8%)	0.001
Global impression n (%)			
0-1.0	55 (74.3%)	103 (92.8%)	
1.5–2.5	17 (23.0%)	7 (6.3%)	0.001
3+	2 (2.7%)	1 (0.9%)	
Median MoCA (IQR)	27 (26-28)	28 (26-29)	0.049

MDS-UPDRS, Movements Disorders Society Unified Parkinson's Disease Rating Scale; MoCA, Montreal Cognitive Assessment.







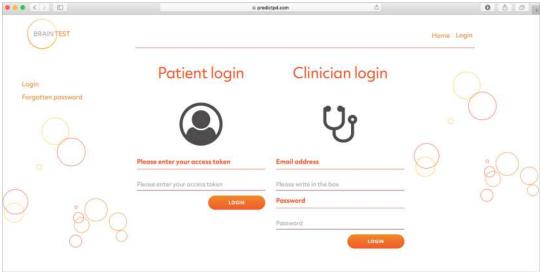
Motor prodrome:

- Follow up of participants seen in person
- Progression on BRAIN tapping test
- Wearable devices PKG

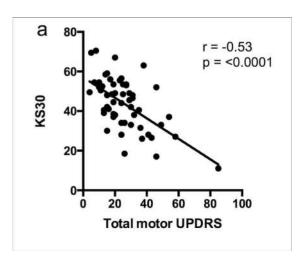




BRAIN test











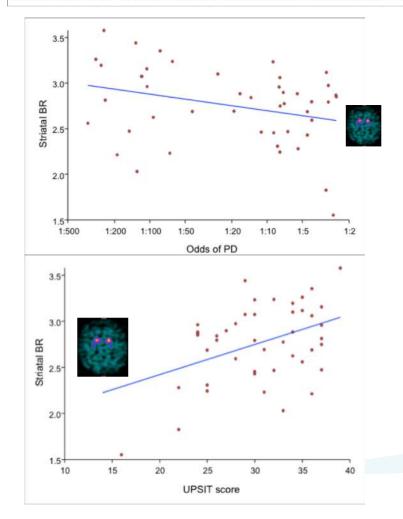
Brief Report Open Access @ (*)







Alastair J. Noyce MRCP, PhD, John Dickson PhD, Richard N. Rees MRCP, Jonathan P. Bestwick MSc, Ioannis U. Isaias MD, PhD, Marios Politis MD, PhD, Gavin Giovannoni FRCP, PhD, ... See all authors 🗸





Factor	Higher risk	Lower risk	P value
n	23	23	
Median age in years (IQR)	74.5 (69.7-78.9)	68.3 (66.7-71.1)	.003*
Males (%)	23 (100)	16 (70)	.009**
Median risk (odds 1/x and IQR)	5.5 (3.1-7.9)	105 (43-189)	<.001*
Mean worst SBR (95% CI)	2.6 (2.5-2.8)	2.9 (2.7-3.0)	.071***
Mean SN-max (95% CI)	0.22 (0.19-0.26)	0.14 (0.12-0.17)*	<.001***





Other prediction strategies are available...



MDS Research Criteria for Prodromal Parkinson's Disease

Daniela Berg, MD, 1 Ronald B. Postuma, MD, MSc, 2 Charles H. Adler, MD, PhD, 3 Bastiaan R. Bloem, MD, PhD, 4



RESEARCH ARTICLE

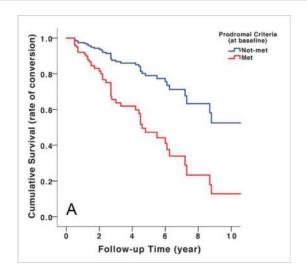
CME

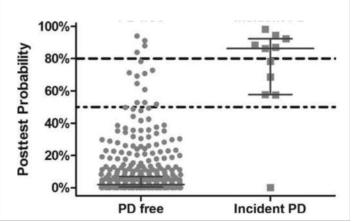
Validation of the MDS Research Criteria for Prodromal Parkinson's Disease: Longitudinal Assessment in a REM Sleep Behavior Disorder (RBD) Cohort

Seyed-Mohammad Fereshtehnejad, MD, MPH, PhD, ^{1,2} Jacques Y. Montplaisir, MD, PhD, ^{3,4} Amelie Pelletier, PhD, ⁵ Jean-François Gagnon, PhD, ^{3,6} Daniela Berg, MD, ^{7,8} and Ronald B. Postuma, MD, MSc^{1,3}*

Prodromal Parkinson's Disease as Defined per MDS Research Criteria in the General Elderly Community

Philipp Mahiknecht, MD, PhD, ^{1,2} Arno Gasperi, MD, ³ Peter Willeit, MD, PhD, ^{1,4,5} Stefan Kiechi, MD, ¹ Helike Stockner, MD, ¹ Johann Willeit, MD, ¹ Gregorio Rungger, MD, ³ Martin Sawires, MD, ¹ Michael Nocker, MD, ¹ Verena Rastner, MD, ¹ Katherina J. Mair, MD, ¹ Anna Hotter, MD, ¹ Werner Poewe, MD, ^{1*} and Klaus Seppi, MD, ^{1*}









Other web-based initiatives



















https://vision-in-parkinsons.co.uk/

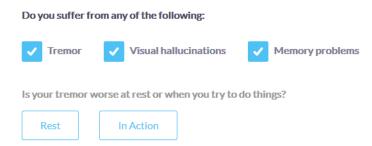






Assessments

Clinical questionnaire



Online visual acuity



Tapping test



Local group

Web-based group

Total





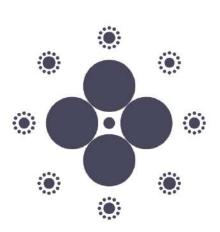
Cats & Dogs



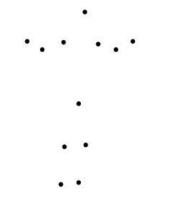
Find the horses



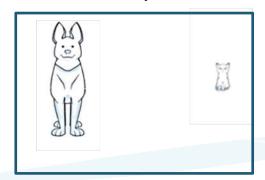
Circles illusion



Biological motion



Snap



Match the grid



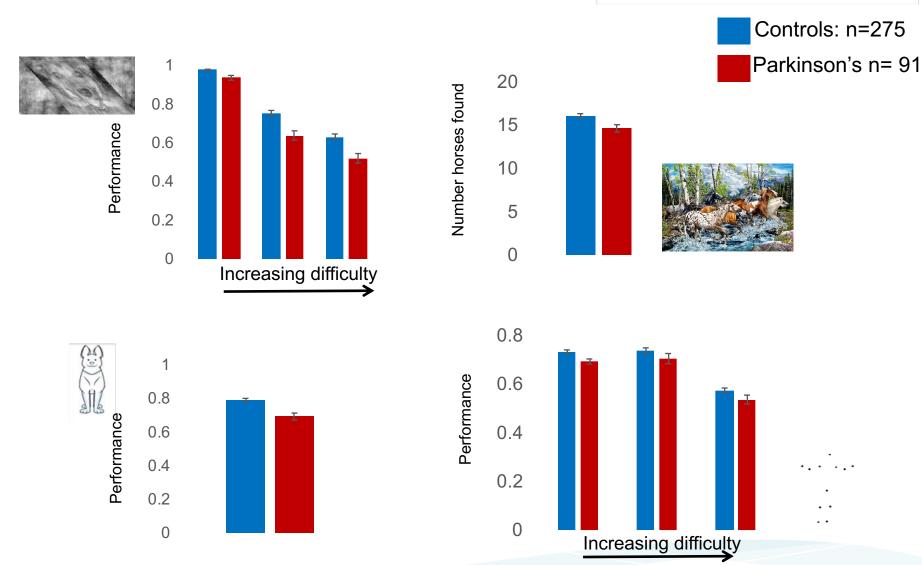
















Longitudinal study of visuo-perception in large numbers with genetic and clinical modifiers

- ~30 sites collecting data
- 224 participants taken part around the UK
- Target: 900 by December 2019



https://vision-in-parkinsons.co.uk









Remote assessment of Parkinsonism supporting ongoing development of intervention (Rapsodi)

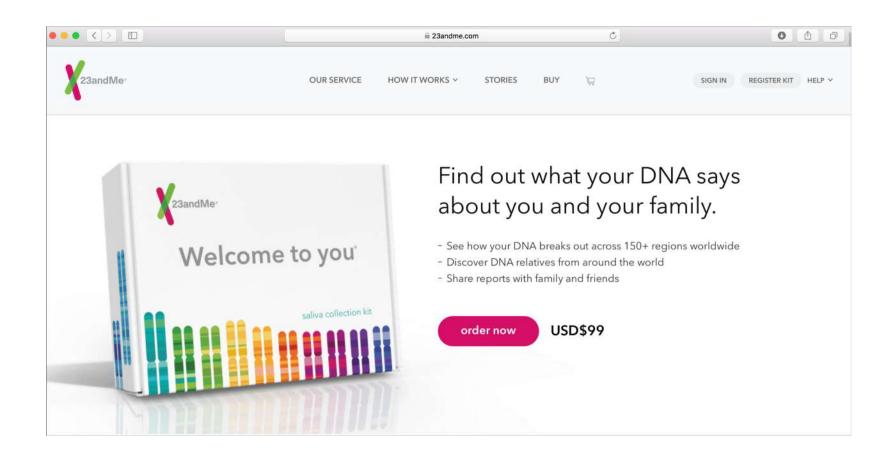
- Longitudinal cohort study of glucocerebrosidase mutations (GBA) carriers without Parkinson disease
- GBA carriers drawn primarily from the pedigree of GBA PD cases and those with Gaucher disease (homozygous GBA carriers)
- Yearly assessment of anxiety, mood, motor symptoms, smell, cognition with DNA collection
- All assessments online or by post

www.rapsodistudy.com

Slide provided by Stephen Mullin













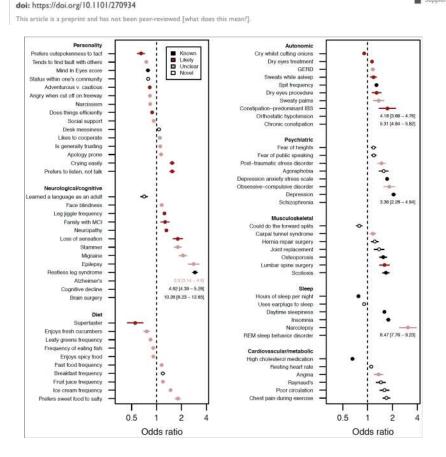
Cross-sectional data

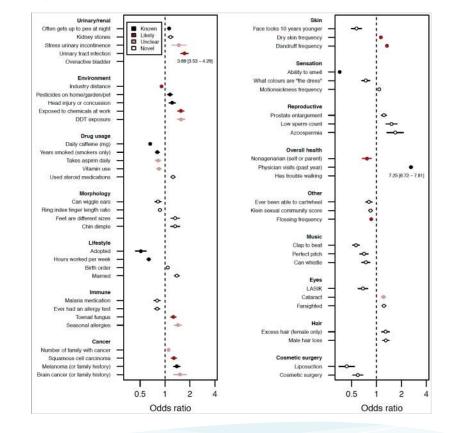
- ~13,500 cases
- >3 million controls
- 840 available phenotypes (via questionnaire)
- DNA on all



CSH Spring Harbor	bioRxiv	HOME ABOUT SUBMIT ALERTS		
Laboratory	THE PREPRINT SERVER FOR BIOLOGY	oh		
New Results			3 Previous	
	's Phenome: Traits Associated with Parkinson's Disease in a La enotyped Cohort	rge F	Posted February 28, 2018.	
	Alastair Noyce, © Pierre Fontanillas, © Babak Alipanahi, The 23andMe Research Tea	m,	Download PDF Email	













To obtain comprehensive longitudinal data on over 100,000 individuals with PD in North America









Assessments:

- Motor symptoms
- Non motor symptoms
- Physical function
- Mental health
- Medications
- Quality of life
- Unmet needs
- Health care preferences

>10,000 in November 2017

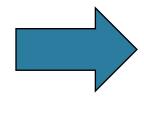


>25,000 in October 2018











Genetic testing at no cost

Other remote sample collection





PARKINSON'S UK CHANGE ATTITUDES. FIND A CURE. JOIN US.





QMUL / BL SMD

Jack Cuzick
Gavin Giovannoni
Jonathan Bestwick
Ruth Dobson
Mark Jitlal
Polly Rawlinson
Stephen Auger
Josh Kahan
Charles Marshall

University of East Anglia

Carl Philpott

Guy's Hospital

Guy Leschziner

NIH

Sara Bandres-Ciga Mike Nalls Andy Singleton



UCL / NHNN / UCLH

Anette Schrag Andrew Lees John Hardy

Tom Warner Sofia Eriksson Anthony Schapira Stephen Mullin Maggie Burrows

John Dickson Anna Nagy Richard Rees

Richard Rees

Theresita Joseph

Demis Kia

Kerala Adams-Carr

Nick Wood

Kemi Cracknell

Sebastian Schreglmann

Rimona Weil

23andMe

Karl Heilbron

