ABSTRACT E-BOOK





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P 082 Assessment of pain syndrome in Parkinson's disease in Uzbekistan

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Background: Pain syndrome, one of the leading non-motor manifestations of PD, may be associated with Parkinson's disease itself, or be the result of anti-Parkinsonian therapy.

Methods: 35 patients with Parkinson's disease were examined. The main group included 25 patients with PD with pain, the comparison group consisted of 10 patients with PD without pain. Pain syndrome was assessed on the basis of modern classification of pain syndrome.

Results: The results of the study showed the dependence of the severity of pain syndrome, depression, the degree of movement disorders, and daily activity on the nature of the pain syndrome in myofascial and central algia. Direct dependence of the nature of the pain syndrome on the duration of PD was revealed. At the stage of confirming the diagnosis of PD and in the first 3 years of the disease, humeroscapular periarthropathies and spondyloarthrosis predominated in patients with algia in the humeroscapular region and lower back.

The longer patients suffered from Parkinson's disease, the more likely they were to have central algia. The pain syndrome in PD at any of its stages was affected by therapy with antiparkinsonian drugs. Antiparkinsonian drugs not only improved the motor activity of patients but also reduced the severity of pain. After the start or correction of antiparkinsonian therapy in the group of PD patients with pain syndrome, both the general symptoms of the disease and the pain syndrome decreased. Pain syndrome according to VAS decreased by 3 points.

Conclusions: The nature of the pain syndrome depends on the rate of progression, the severity of the disease, and the duration of the disease: in the initial stages of PD, myofascial pains are more common, as the disease progresses, they give way to central algias, mainly on the side of greater motor deficit. Adequate antiparkinsonian therapy reduces the severity of pain.

P 083 Real-world, digital sleep biomarkers capture of Parkinson's disease impact

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Background: Parkinson's disease (PD) is commonly associated with sleep dysfunction that links to clinically validated disease severity. Advents in real-world sleep monitoring with wrist-worn actigraphy show promise for developing remote, digital health biomarkers of PD patient sleep dysfunction. Relationship between sleep dysfunction measured by actigraphy and disease severity has not been fully explored.