ABSTRACT E-BOOK





WORLD CONGRESS ON PARKINSON'S DISEASE AND RELATED DISORDERS

A COMPREHENSIVE EDUCATIONAL PROGRAM

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Results: Among all patients, extrapyramidal symptoms were described by doctors in 187 patients. At the same time, PD was found in 15 patients: 11 in patients with CI, 2 in patients with intracerebral hemorrhage, 1 in a patient with TIA.

Damage to the middle cerebral artery was detected in 7 patients with MI (5 on the left, 2 on the right) and 1 patient with TIA (on the left); anterior cerebral artery - in 3; posterior cerebral artery - in 1 patient with infarction of the left cerebellar hemisphere. PD was diagnosed for the first time in 3 patients who were treated for cerebral infarction.

The trembling form of PD was detected in 2 patients out of 15, the hypokinetic-rigid form was found in 5 patients, and the mixed form was found in 8 patients with an established diagnosis of PD. Non-motor symptoms of PD proceeded in the form of constipation, cognitive impairments and emotional-volitional disorders of varying severity (100%), psychotic disorders (4 - 26.6%) mainly in the form of illusions and hallucinations, insomnia (8 - 53.3%), orthostatic hypotension (2-13.3%).

Conclusions: In the acute stage of stroke, extrapyramidal disorders are detected in every fifth patient, while PD occurs in 2.35%.

P 088

Clinical correlations of Parkinson's disease and vascular parkinsonism: a retrospective review from Uzbekistan

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Background: We aimed to study evidence for or against the role of narrowing lesions of the main brain arteries in progressing of parkinsonism, and to identify clinical signs that suggest a vascular origin.

Methods: We provide a Retrospective review in history materials of 231 patients with Parkinson's disease (PD) and Vascular Parkinsonism (VP), 46 and 185 respectively; for the period from 2010 to 2016y. We divided the patients into 2 groups (VP and PD) and compared the clinical features.

Results: Both groups were differentiated in terms of evidence of cerebrovascular disease (P<.001 to P<.00001). Patients with VP were older, more likely to present with gait difficulty rather than tremor, and less likely to respond to the use of levodopa compared with patients with PD (P<.00001). Patients with VP were also significantly more likely to have predominant lower-body involvement, postural instability, a history of falling, dementia, corticospinal findings, incontinence (P<.00001), and pseudobulbar affect (P<.05).

Conclusions: These differences in clinical features suggest different pathogenesis of parkinsonism in these 2 patient groups. The strong evidence of cerebrovascular disease in the VP group and the differences in clinical features support the concept of VP as a distinct clinical entity.

We conclude that compared with PD, patients with parkinsonism associated with vascular disease are more likely to present with gait difficulty and postural instability rather than tremor, have a history of stroke and risk factors for stroke, and fail to respond to levodopa therapy.

P 089 (GPT)

Correlation between age and positive and negative affect in Parkinson's disease

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Background: Assess the age of diagnosis with the positive and negative effects in a cohort with PD in Mexico. Develop a model that can be used to predict the PANAS scores.

Methods: An observational, cross-sectional study was performed to identify factors associated with the positive and negative affect in a cohort with PD (n = 77) in Mexico. The Positive and Negative Affect Schedule (PANAS) were utilized to evaluate well-being. A univariate analysis was performed to identify any significant correlations between the variables. A multiple linear regression analysis was conducted to identify the predictors of the outcome scales.

Results: The negative affect scores were significantly correlated to age of diagnosis, disease duration, and residency. The univariate analysis showed that the Positive Affect Schedule (PAS) score was not significantly associated with the age at diagnosis.

In contrast, the analysis revealed a strong correlation between the age at diagnosis and Negative Affect Schedule (NAS) score.

Conclusions: We need to better understand the state of positive and negative emotions in young patients with PD so we can offer a more complete approach in their management.

P 091

Validation of patient administered psychosis questionnaire for screening Parkinson's disease patients for psychosis.

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Background: Psychosis is a common feature in Parkinson's disease (PD) and is a major cause of caregiver burden, nursing home placement, and mortality. Psychosis symptoms are often not volunteered during the clinic visit due to embarrassment or lack of insight. There is no widely accepted screening scale. We conducted a study to compare a self-administered psychosis screening questionnaire with the "gold standard" PD psychosis scale.