Book of Abstracts

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Conclusions: Patients on LDP/CDP reported good ON after awakening, greater stability of good ON time throughout the day, and fewermotor fluctuations compared to LD/CD patients.

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Use of glutathione in Parkinson's disease at earlier stages of the disease and the prognosis of delaying its progression

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Background: Parkinson's disease, the second most common chronic neurodegenerative disease, which is characterized by the loss of dopaminergic neurons in the substantia nigra with the presence of corpuscles Levi in the form of intraneuronal inclusions. Redox dysfunction and neurooxidative stress play an important role in the pathophysiology and progression of Parkinson's disease.Glutathione is an endogenously synthesized tripeptide whose depletion occurs in the early stages of Parkinson's disease, and an increase in glutathione has been proposed as a therapeutic strategy.
Methods: We conducted a double-blind, placebo-controlled study in 45 patients with Parkinson's Disease of Hoehn and Yahr stages 1-3. The placebo group was a control group of 20 patients who received placebo (saline) and levodopa and the main group of 25 patients who received levodopa and glutathione 600mg (intravenous drip) per day for 60 days.
Results: Improvement was seen in the UPDRS (-4,6(4,7),P=0,0025) and UPDRS motor subscale (-2,2(3,8),P=0,00485) scores. Depending on the severity of the disease the statistical analysis showed that despite the overall positive effect of the drug the best effect was observed in the group of patients with initial stages of the disease (1 - 2 stage according to the Hoehn and Yahr scale), statistical analysis performed on the UPDRS scale showed a 16.3% decrease in the total score (P<0.05).
Conclusions: In our study,there was improvement of general and motor scores of PD (UPDRS) in both control and main groups.Use of glutathione preparations as additional therapy in patients with Parkinson's disease in the main group showed more appreciable improvement in the earlier period of the disease compared to the control group. This study shows that the long-term use of glutathione over 2 months should be studied.

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Impact of physical activity to expand serum a klotho levels amidst people with Parkinson disease

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Background: Parkinson disease is a progressive neurodegenerative that affects movement. The pathogenesis of Parkinson’s disease is mediated by different inflammatory mediators such as TNfa, IL-1β, and IL-6. In addition, the brain and kidneys are produced transmembrane mole-ecules called Klotho. Several lines of evidence revealed that loss of Klotho may negatively impact the aging process, neural degeneration, and cognitive impairment in people with Parkinson’s disease. Indeed, Klotho molecules are playing an important role as anti-inflammation and provide a protective effect against age- related diseases such as Parkinson disease. Different lines of evidence suggests that physical activity may exert cura-tive effects in Parkinson’s disease, slowing the underlying neu-rodegeneration and improving related disability symptoms.
Methods: A comprehensive computer-based literature search was performed through MEDLINE database.
Results: The regular physical activity plays a key role in the secreted form of the a Klotho gene (S-Klotho) in animal models as well as in healthy humans. However, the current literature lacks clinical studies in investing the impact of physical activity on serum a-Klotho levels in people with Parkinson’s disease. Despite that, previous clinical studies in healthy people and animal models showed a promising result in favour of physical activity.
Conclusions: Physical activity is a highly effective way of treating and preventing the main causes of morbidity and mortality. Most of which are associated with aging. The absence of effective treatments for Parkinson’s disease highlights the need for preventive strategies such as physical activity. Future clinical studies are required to investigate the impact of physical activity on serum a-Klotho levels in people with Parkinson’s disease.

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The Phase 2, randomized, placebo-controlled PRECEDENT trial of SAGE-718 in patients with