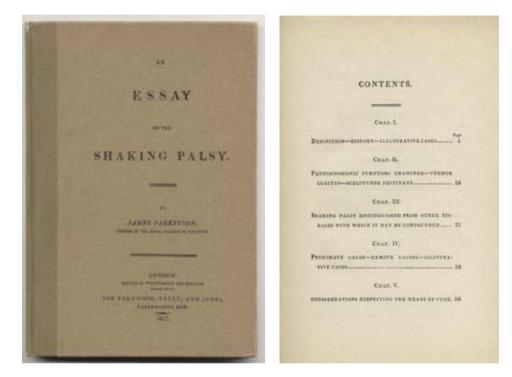
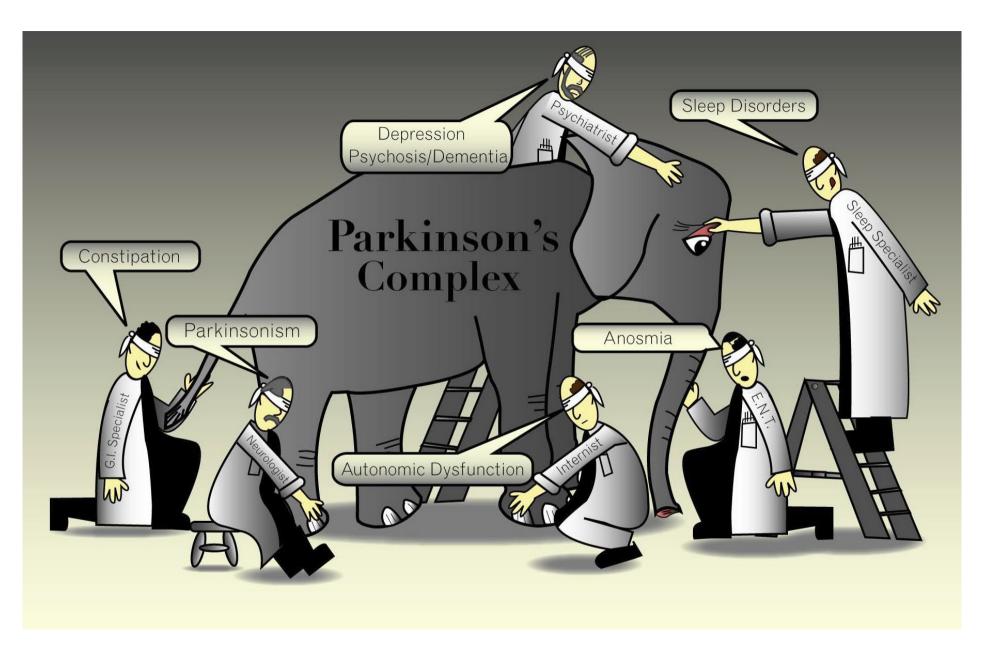
#### Essay on the Shaking Palsy: James Parkinson 1817



6 Cases: 3 in his clinic and 3 observed on the street Described all of the essential features of the illness 50 years later, Charcot: "Parkinson's Disease"





Langston 2006 Source: Anthony Lang slides

### From Canada:



#### It doesn't discriminate.

#### Hope Diamond, 51.

Drag queen. Corporate management. Comedian. Diagnosed with Parkinson's in 2013.



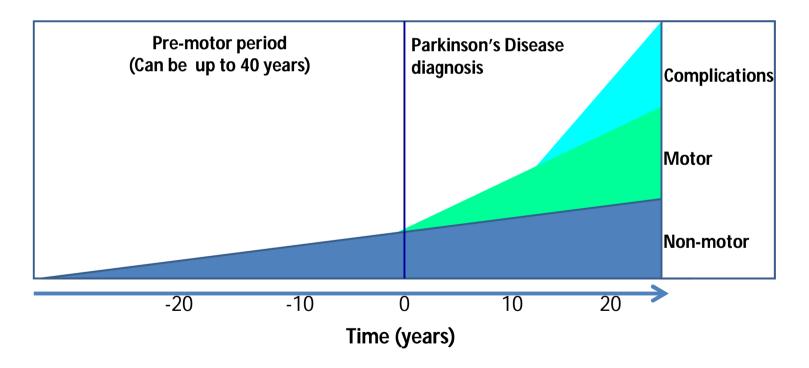


### Our first Perspective – Research



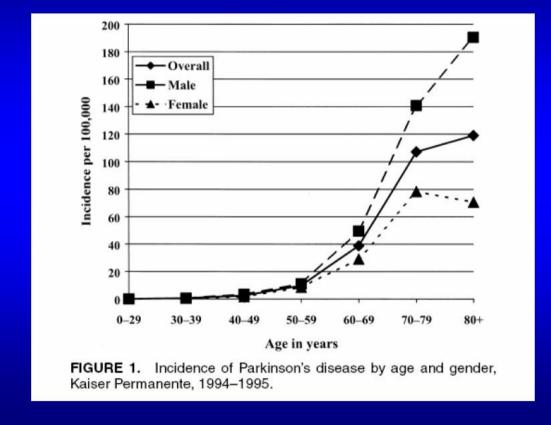
### Context:

#### PD as a multi-system, complex, whole-body condition



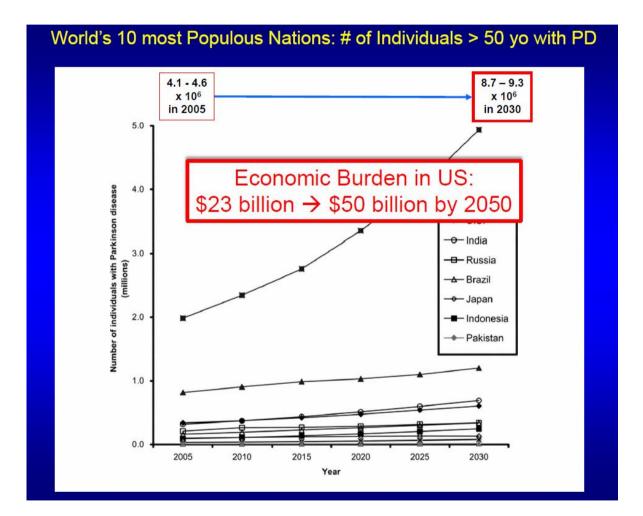
Source: Anthony Lang slides

### Incidence by Age and Gender

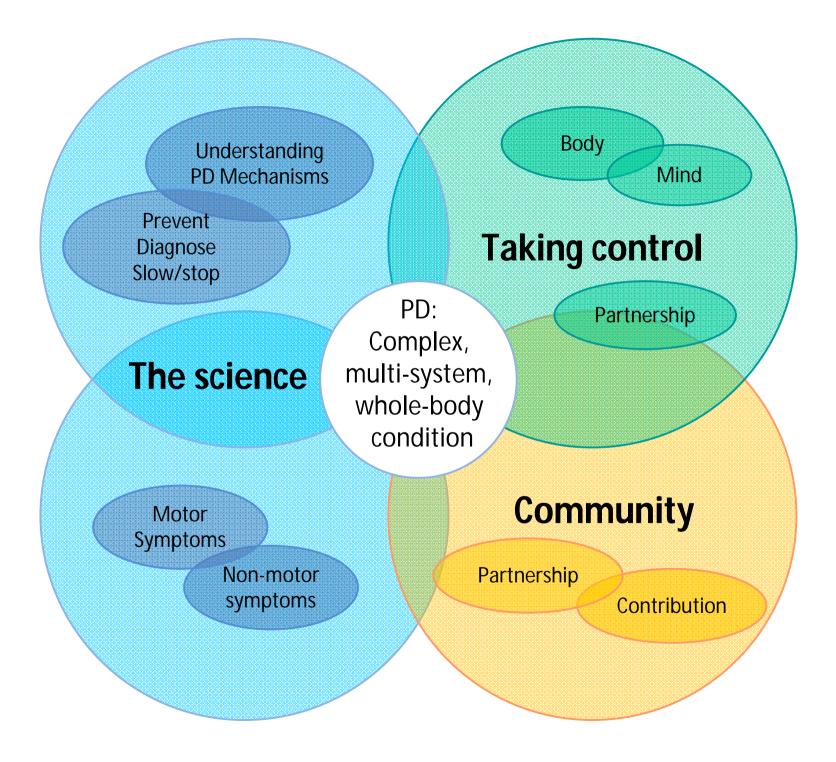


Anthony E Lang

# World incidence projected for PD



Anthony E Lang



# Our reviews:

- 1. Levodopa
- 2. (mention of DBS)
- 3. Mention of alpha-synuclein
- 4. Cell restoration?
- 5. Genetics
- 6. Disease modelling

### **1** - Prof. John Nutt

James Parkinson's Special Lecture

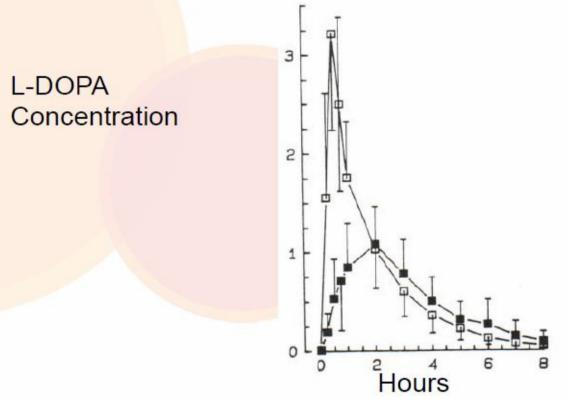
Levodopa: where we have been...and where we are going

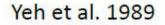
### Levodopa: Unique Features

- Short half-life: 1 2 hours.
- Absorbed from small bowel and not the stomach.
- Transported across cell membranes by a specific "transporter."
- Is a pro-drug: must be converted into active form, i.e. dopamine.



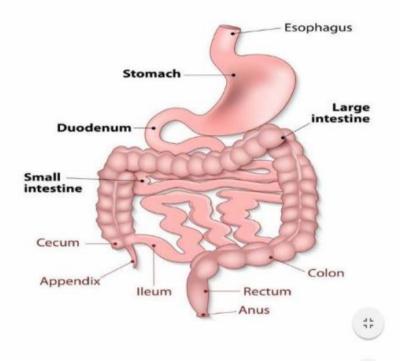






### Levodopa Absorption

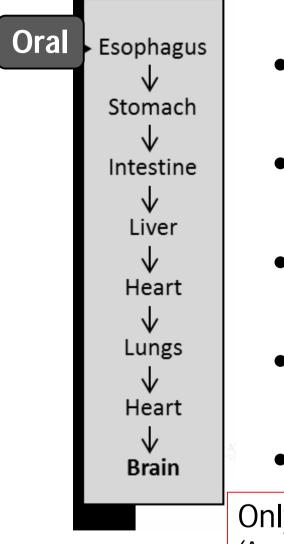
#### HUMAN GASTROINTESTINAL TRACT



- Transit Times
- Stomach: 3 hours
- Small Intestine: ½ to 3 hours
- Large Intestine: 30-40 hours

James Parkinson's Special Lecture: Prof John Nutt slides

### Improved delivery of levodopa:



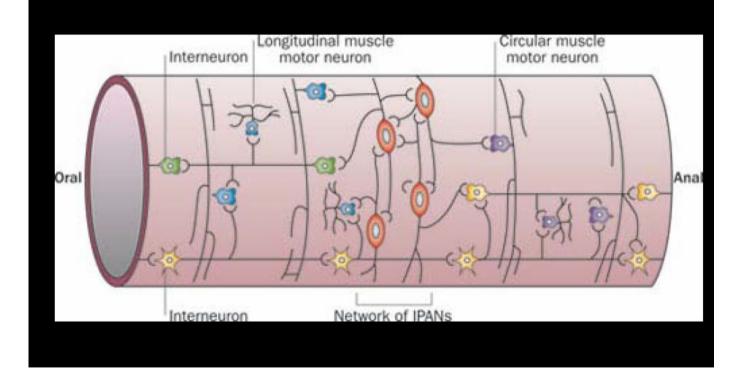
- Continuous infusion into upper small intestine (liquid gel)
- Gastric-retentive formulations (accordion pill)
- Subcutaneous infusion (belt or patch pump)
- Continuous intra-oral release (behind the teeth)
- Inhalation (emergency)

Only 2 – 3% of the Levadopa reaches the brain (Agonists are different)

Source: Peter A. LeWitt slides

# Gut intelligence?

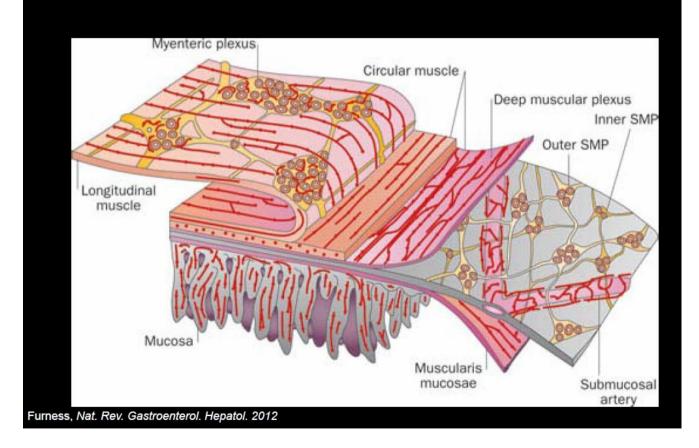
The gut has its own internal nervous system that can functions independently



Sarah Diamond slides

# Amazing detail

### PD affects the Enteric Nervous System



Sarah Diamond slides

### Levodopa: John Nutt's final thoughts

- Levodopa therapy will remain a priority in PD for many years, even if protective therapies emerge
- Research should focus on more than continuous delivery and consider variable delivery in relation to need
- New methods to measure motor function throughout the day will change our concepts about motor patterns and permit tailoring to patient's minute to minute needs

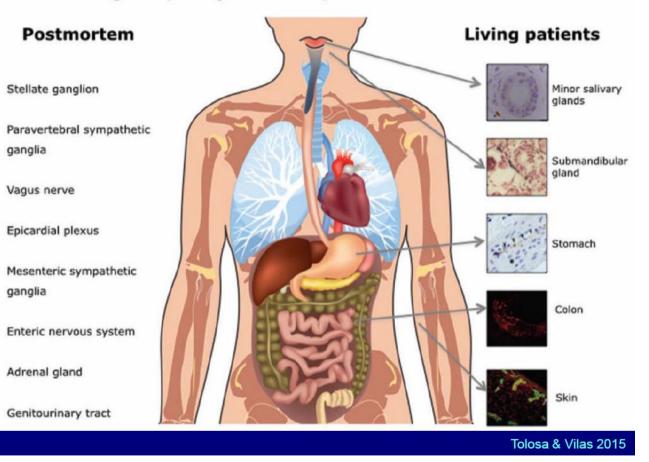
### **2 - Deep Brain Stimulation?**

- A very big area in the Congress
- Difficult choice not to attend sessions
- Met a lady with a hula-hoop..

# 3 - Alpha-synuclein

- A protein that folds abnormally inside cells and spreads to other cells to cause PD
- Major studies are taking place:
  - What causes abnormal folding?
  - How does it get past cell defences?
  - How could it be stopped?

# It can be in many parts of the body



Multiorgan alpha-synuclein deposits in Parkinson's disease

### 4 - Restoration?

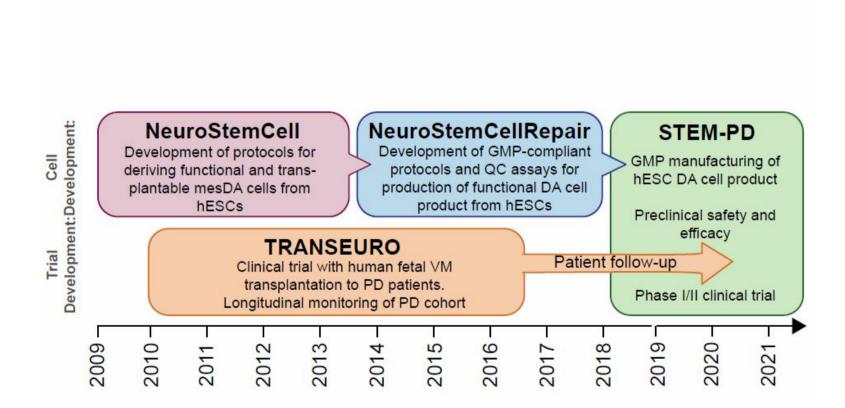
Can defective dopamine cells be replaced with effective ones?

After many trials, the current focus is on

### Embryonic Stemcells - ES and Induced Pluripotent Stemcells - iPS

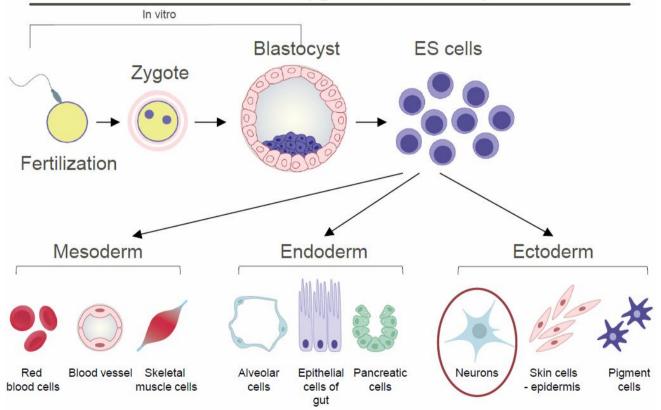
## Overview

Where do we stand today?



# ES Cells

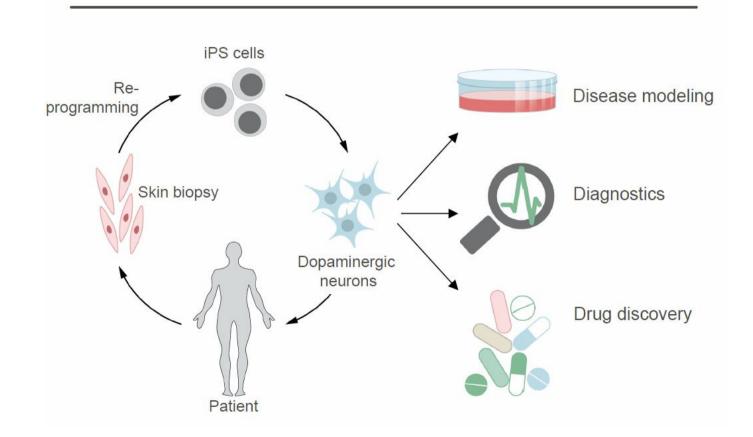
Embryonic stem cells are pluripotent and can make all mature cell types of the body



Malin Parmar slides

# iPS Cells

Research applications of induced pluripotent stem cells

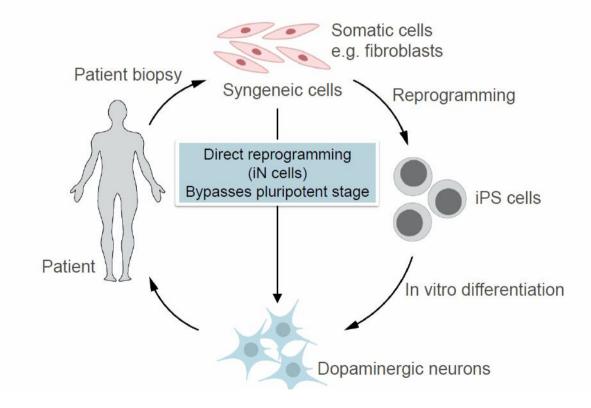


Malin Parmar slides

## Patient-specific iN cells

Cellular reprogramming - opens up for patient specific treatment

New possibilities to treat and model neurological disorders using patient-specific cells



### Current cell therapies

#### CONCLUSIONS CELL THERAPIES FOR PARKINSON'S DISEASE

• CELL BASED THERAPIES IN PD HAVE PRODUCED MIXED RESULTS BECAUSE OF ISSUES TO DO WITH PATIENT SELECTION; CHOICE OF CELL; TRIAL DESIGN; FOLLOW UP; IMMUNOSUPPRESSION ETC

• WHEN IT WORKS WELL IT WORKS VERY WELL WITH FETAL DOPAMINE CELLS, BUT IT DOES NOT ALWAYS WORK WELL

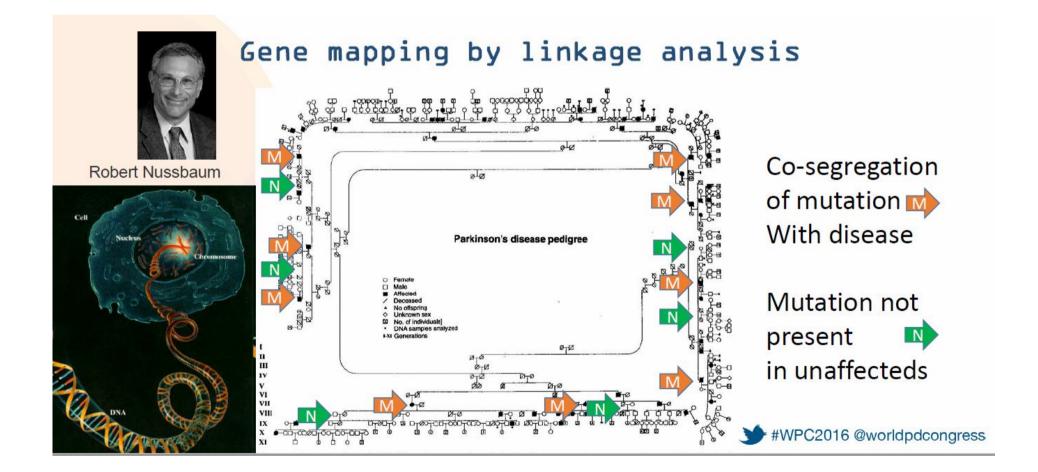
• ATTEMPTS ARE ONGOING TO DESIGN BETTER TRIALS THAT WILL GIVE CLEARER RESULTS FOR CELL BASED THERAPIES- STARTING WITH FETAL DOPAMINE CELLS AND THEN MOVING TO STEM CELLS

•BUT BEWARE of any new ADVERTISED stem cell trials especially if YOU ARE BEING ASKED TO PAY TO JOIN IT- because if these go wrong the whole field goes wrong!

## 5 - Genetics and Risk?

Can we discover genetic risk factors and head off potential PD?

### Genetics: subtle and complex!



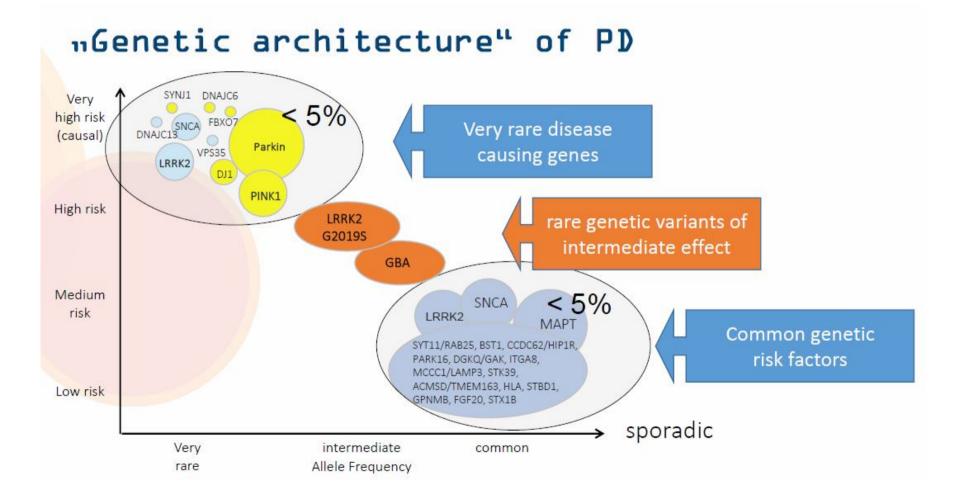
**Robert Nussbaum slides** 

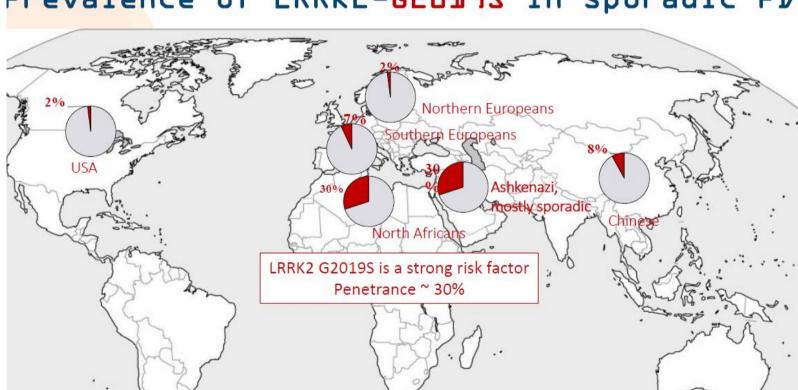
### Genetic Testing Empowerment or Risk for People with Parkinson's?

Thursday, September 22<sup>nd</sup> 10:45 am

Alice Lazzarini, Ph.D.

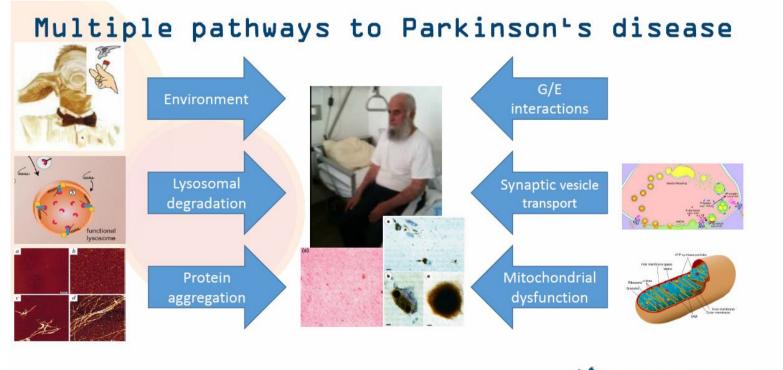
# LRRK2 & GBA - emerging opportunity?





#### Prevalence of LRRK2-G2019S in sporadic PD

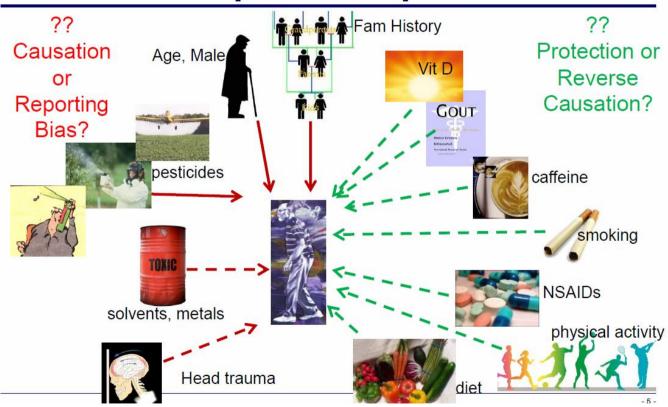
# It's tricky...



#WPC2016 @worldpdcongress

### So is this..

### Environment and Parkinson's Disease: Self-Reported Exposures?

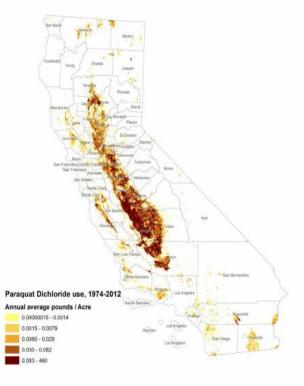


### Pesticides

California is the ideal place to study pesticide health effects : California Agricultural Pesticide Use Reporting (PUR) exists since 1974

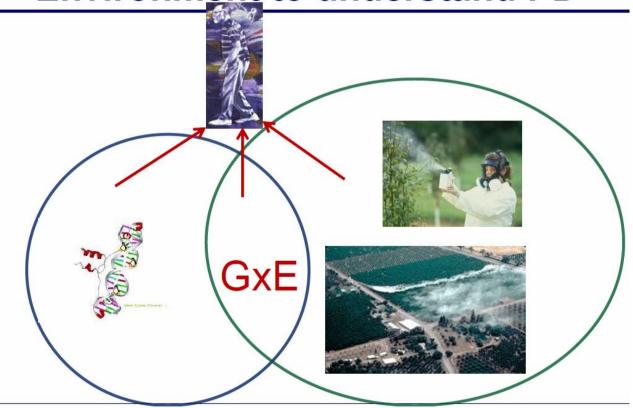
Data provided per 1 square mile land section

- County: Kern
- Location: 15M28S27E19
- Application date: 2/23/1989
- · Commodity: 2503 (Grapes)
- Method: Ground
- Treated: 424 acres
- · Product applied: 155 gallons
- Chemical: 00459 (Parathion)
- Percentage: 80%
- Active Ingredient Pounds: 1,241

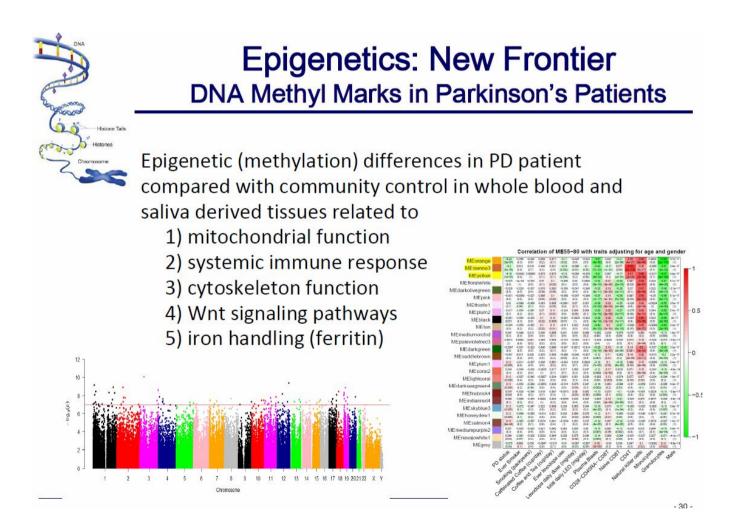


### Putting things together

### Next Step: Combine Genes and the Environment to understand PD

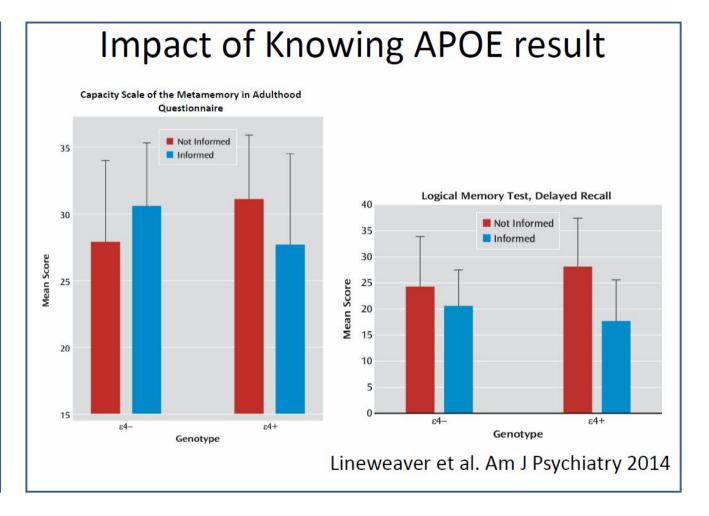


## More potential



### Adverse effects of information?

People informed about their test result do worse in tests than people not informed



Taking genetics personally..the conundrum *What can you do & what it'll do to you* 

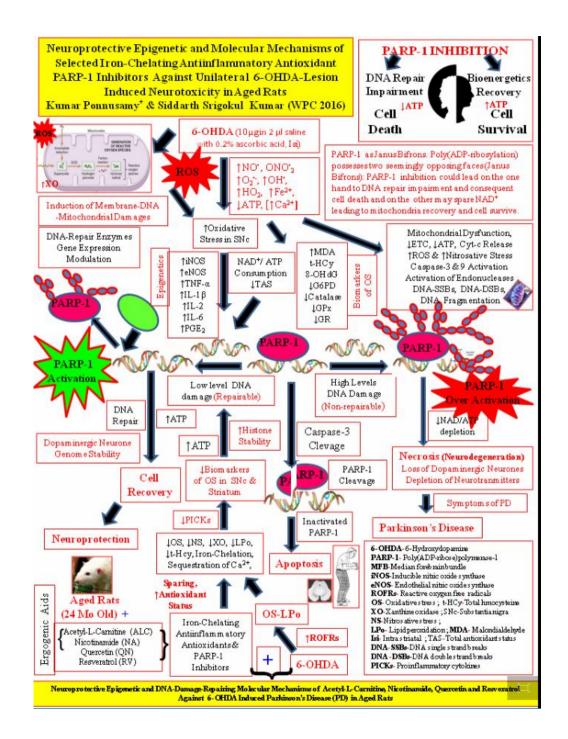
The study of the impact of learning about having PD genes and biomarkers should examine:

- Psychological well-being such as anxiety and depression
- Sense of self
  - Who do you tell: family, friends, employers?
  - What do you tell them? How do they treat you?
- Perceptions of cognitive & physical health
- Perceptions of time

# 5a – Preventing PD?

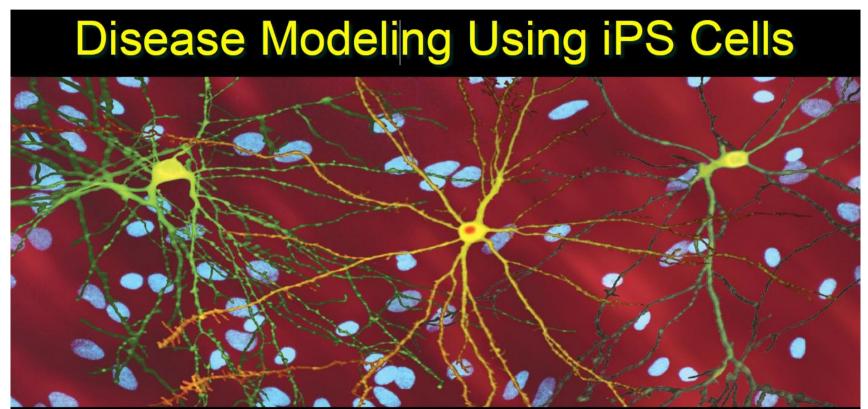
Vaccines? Can there be protection?

It's *very* complicated...



Helene Doucet-Beaupre slides

# 6 - Accelerating research into PD



Steven Finkbeiner, M.D., Ph.D. Professor, UCSF & Senior Investigator and Associate Director, Gladstone 4<sup>th</sup> World Parkinson Congress Portland, OR September 23<sup>rd</sup>, 2016

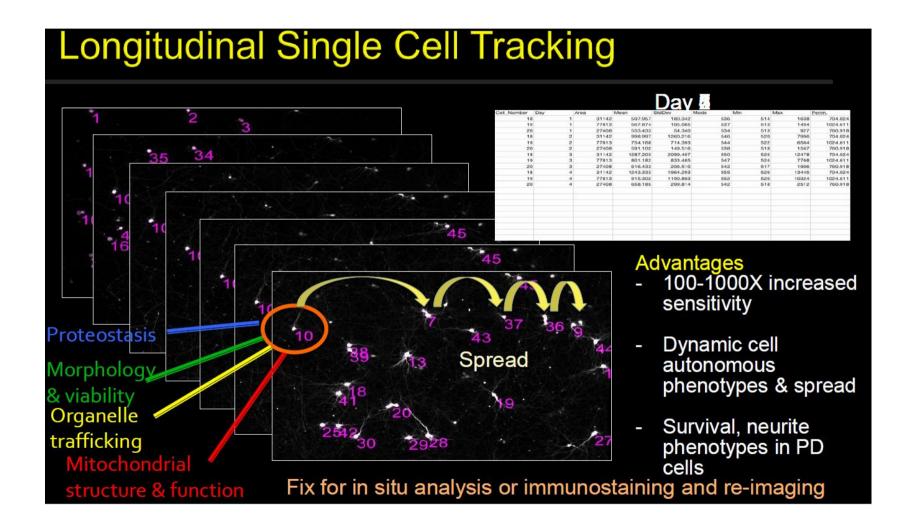
Steven Finkbeiner slides

### Induced Pluripotent Cell Generation (iPS)

#### Overview

- The unmet need for more predictive PD models
- Challenges and opportunities of patient-derived iPSCs as an experimental model system
- Applications of PD patient-derived iPSCs
  - To model PD pathobiology
  - To explore mechanisms of PD pathophysiology
  - To substantiate potential targets from PD genetics
  - To develop potentialsmall molecule therapeutics
- Future directions

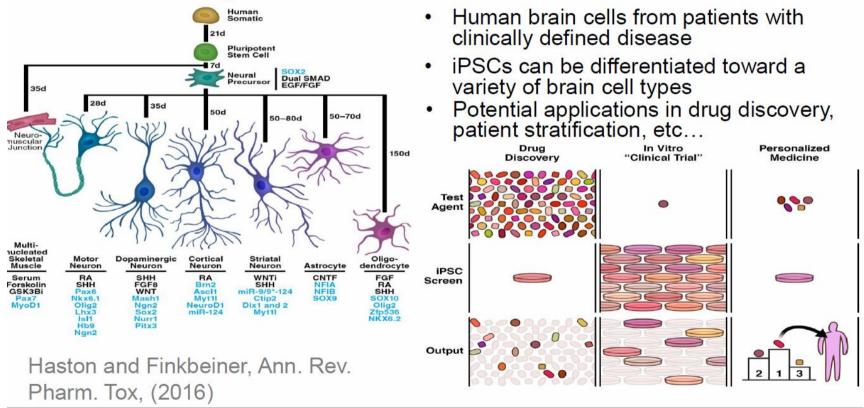
# Automated Cell Tracking



Steven Finkbeiner slides

# Potential from PD Modelling

Can iPSC-based Disease Models Make Translation More Reliable and Help Deliver on the Promise of Precision Medicine?



Steven Finkbeiner slides

# A pathway to prediction?

#### Takeaway Messages

- Patient-derived iPSCs offer exciting new opportunities to create models of PD that may be more predictive
- Human brain cells from PD patients exhibit significant changes in survival and other endpoints that are reminiscent of disease
- Using iPSCs now to understand PD, to find therapeutic targets and therapies
- Success depends on teamwork between patients, donors, funding agencies and companies

# The End! (of this bit...)

### • S-t-r-e-t-c-h exercises!

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