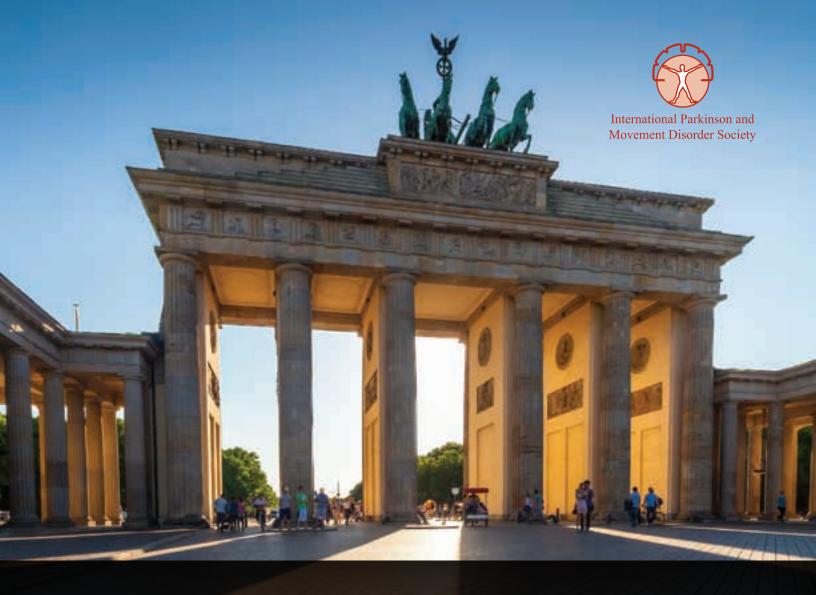


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20th International Congress of Parkinson's Disease and Movement Disorders

JUNE 19-23, 2016 • BERLIN, GERMANY

Save the Date www.mdscongress2016.org



IMPORTANT DATES

October 1, 2015 Abstract Submission Opens
December 1, 2015 Registration Opens
January 7, 2016 Abstract Submission Closes
April 15, 2016 Early Registration Deadline
May 18, 2016 Final Pre-Registration Deadline



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Dear Colleagues,

We would like to formally welcome you to San Diego, CA, USA, where blue skies line over 70 miles of picturesque coastline and beautiful weather and friendly locals create a welcoming vibe all its own. The International Parkinson and Movement Disorder Society is excited to be hosting the 19th International Congress of Parkinson's Disease and Movement Disorders in San Diego, June 14-18, 2015.

Bordered by the Pacific Ocean to the west, the Laguna Mountains to the east and Mexico to the south, the diverse neighborhoods of San Diego are spread out over 4,200 square miles, offering endless opportunities for exploration and activities. Enjoy a variety of cuisine and culture in San Diego, a vibrant metropolitan city with a laid-back, small town feel.

We are pleased to have you join us to share knowledge with each other and to actively participate in advancing the field of Movement Disorders all while enjoying one of the fastest growing cities in the United States.

We are pleased to welcome you to San Diego for the 19th International Congress and are glad you are taking part in this exceptional Scientific Program. We promise an unforgettable experience.

With kind regards,



Mark Botte-

Matthew Stern President, International Parkinson and Movement Disorder Society, 2013-2015



Viin turg

Victor Fung Chair, Congress Scientific Program Committee, 2013 - 2015



Kum hus

Irene Litvan Co-Chair, Congress Scientific Program Committee, 2015



About MDS

The International Parkinson and Movement Disorder Society (MDS) is a professional society of clinicians, scientists, and other healthcare professionals who are interested in Parkinson's disease, related neurodegenerative and neurodevelopmental disorders, hyperkinetic movement disorders, and abnormalities in muscle tone and motor control. The spectrum of clinical disorders represented by the Society includes, but is not limited to:

Ataxia
Chorea
Dystonia
Gait disorders
Huntington's disease
Myoclonus and startle
Parkinson's disease and parkinsonism
Restless legs syndrome
Stiff person syndrome
Tardive dyskinesia
Tics and Tourette syndrome

Tremor and essential tremor

In recent years, there has been tremendous growth in new diagnostic information, pharmacological and neurosurgical treatments for Movement Disorders, as well as a greater understanding of impaired motor control function. MDS offers you and your patients an essential link to this knowledge.

In 1985, The *Movement* Disorder Society was founded on the initiative of Professors Stanley Fahn and C. David Marsden, whose leadership and vision guided the expansion of clinical expertise and research in this field. This not-for-profit organization merged in 1992 with the International Medical Society for Motor Disturbances. Publication of the journal *Movement* Disorders began in 1986, and the first International Congress was held in 1990.

In 2013, The *Movement* Disorder Society officially changed its name to the International Parkinson and Movement Disorder Society, in order to recognize the growing importance of Parkinson's disease care and research within the field of Movement Disorders.

PURPOSE, MISSION AND GOALS

Purpose:

The objective and mission of the Society shall be to advance the neurological sciences pertaining to Movement Disorders; to improve the diagnosis and treatment of patients; to operate exclusively for scientific, scholarly and educational purposes; to encourage research; to provide forums, such as medical journals, scientific symposia and International Congresses, for sharing ideas and for advancing the related clinical and scientific disciplines; to encourage interest and participation in the activities of the Society among healthcare and allied professionals and scientists; and to collaborate with other related professional and lay organizations.

Mission and Goals:

To disseminate knowledge about Movement Disorders by:

- Providing educational programs for clinicians, scientists and the general public designed to advance scientific and clinical knowledge about Movement Disorders
- Sponsoring International Congresses and Symposia on Movement Disorders
- Collaborating with other international organizations and lay groups
- Publishing journals, video and other collateral materials committed to high scientific standards and peer review

To promote research into causes, prevention and treatment of Movement Disorders by:

- Using the Society's influence and resources to enhance support for research
- Facilitating the dissemination of information about research
- Encouraging the training of basic and clinical scientists in Movement Disorders and related disorders

For the purposes of favorably affecting the care of patients with Movement Disorders, the Society will provide expertise, advice and guidance to:

- Regulatory agencies to assist them in the approval process of safe and effective therapeutic interventions
- The public (media) and patient support groups by informing them of new research and therapeutic advances
- Governments to assist them in the development of policies that affect support of research and patient care
- Educational efforts to assist in developing standards of training in the specialty



About MDS

MDS OFFICERS (2013-2015)



PresidentMatthew Stern,
USA



President-ElectOscar Gershanik, *Argentina*



Secretary Francisco Cardoso, *Brazil*



Secretary-Elect Claudia Trenkwalder, *Germany*



TreasurerChristopher Goetz, *USA*



Treasurer-ElectDavid John Burn, *United Kingdom*



Past-President Günther Deuschl, *Germany*

MDS INTERNATIONAL EXECUTIVE COMMITTEE

Paolo Barone, Italy
Bastiaan Bloem, Netherlands
Murat Emre, Turkey
Susan Fox, Canada
Victor Fung, Australia
Etienne Hirsch, France
Beom Jeon, Korea
Michael Okun, USA
Anthony Schapira, United Kingdom
Mark Stacy, USA

INTERNATIONAL CONGRESS OVERSIGHT COMMITTEE

Chair: Philip Thompson, Australia Günther Deuschl, Germany Victor Fung, Australia Oscar Gershanik, Argentina Christopher Goetz, USA Anthony Lang, Canada Irene Litvan, USA Matthew Stern, USA

CONGRESS SCIENTIFIC PROGRAM COMMITTEE

Chair: Victor Fung, Australia
Co-Chair: Irene Litvan, USA
Tim Anderson, New Zealand
Daniela Berg, Germany
Erwan Bezard, France
K. Ray Chaudhuri, United Kingdom
Carlo Colosimo, Italy
Marina de Koning-Tijssen, Netherlands

Günther Deuschl, Germany Joaquim Ferreira, Portugal Oscar Gershanik, Argentina Glenda Halliday, Australia Hyder Jinnah, USA Paul Krack, France Olle Lindvall, Sweden Timothy Lynch, Ireland José Obeso, Spain Per Odin, Sweden Lynn Rochester, *United Kingdom* Robert Rodnitzky, USA Raymond Rosales, Philippines Klaus Seppi, *Austria* Matthew Stern, USA Antonio Strafella, Canada D. James Surmeier, USA Ryosuke Takahashi, Japan Eng-King Tan, Singapore Philip Thompson, Australia Claudia Trenkwalder, Germany

CONGRESS LOCAL ORGANIZING COMMITTEE

Chair: Irene Litvan
David Barba
Jennifer Friedman
Stephanie Lessig
Stuart Lipton
Fatta Nahab
Howard Poizner
Dee Silver
Mark Tuszynski

PAST-PRESIDENTS

2011-2013 Günther Deuschl, *Germany*2009-2011 Philip Thompson, *Australia*2007-2009 Anthony Lang, *Canada*2005-2006 Andrew Lees, *United Kingdom*2003-2004 C. Warren Olanow, *USA*2001-2002 Werner Poewe, *Austria*1999-2000 Mark Hallett, *USA*1997-1998 Eduardo Tolosa, *Spain*1995-1996 Joseph Jankovic, *USA*1991-1994 C. David Marsden, *United Kingdom*1988-1991 Stanley Fahn, *USA*

INTERNATIONAL MEDICAL SOCIETY FOR MOTOR DISTURBANCES PAST-PRESIDENTS

1993-1994 C. Warren Olanow, *USA* 1991-1992 Bastian Conrad, *Germany* 1989-1990 Mark Hallett, *USA* 1987-1988 Mario Manfredi, *Italy* 1985-1986 C. David Marsden, *United Kingdom*

MDS INTERNATIONAL SECRETARIAT

International Parkinson and Movement Disorder Society 555 East Wells Street, Suite 1100 Milwaukee, WI 53202-3823 USA Tel: +1 414-276-2145 Fax: +1 414-276-3349

E-mail: <u>info@movementdisorders.org</u> Website: <u>www.movementdisorders.org</u>



MDS Membership Information

JOIN OUR MEMBERSHIP COMMUNITY

The International Parkinson and Movement Disorder Society (MDS) warmly welcomes all individuals practicing, researching, or studying in the field of Movement Disorders to become members of the Society, its activities, and to contribute to the development of the specialty and field.

MDS aims to facilitate communication between Researchers, Clinicians, and other Health Professionals in working towards common goals of:

- Disseminating updated knowledge
- Promoting research; and
- Improving quality of life, independence, and care for individuals affected by movement disorders.

We welcome you to join 5,000 (+) of your colleagues already working together in the MDS Community.



MEMBERSHIP BENEFIT HIGHLIGHTS

Annual subscription to Society Journals:

Movement Disorders Available in Print and Online

Movement Disorders-Clinical Practice Available Online

Quarterly Newsletter entitled:

Moving Along Available in Print and Online

Members Only Access to the Society's online resources: Membership Directory, CME Activities, Streaming Content, Webcasts, and an in-depth Video Library

Member Discounts for Registration at MDS Activities

Voting Rights in Society Leadership elections

Visit **www.movementdisorders.org/MDS/membership.htm** for full details on benefits available to members.

Free 12-Month Trial Membership!

MDS ASSOCIATE MEMBERSHIP PROGRAM*

Non-members attending the International Congress have the opportunity to receive membership with the International Parkinson and Movement Disorder Society (MDS) absolutely free for one year's time! Eligible delegates will receive one year of membership including immediate access to online member benefits upon acceptance to the Society.

Eligible delegates will be contacted by e-mail one month following the International Congress. The International Secretariat will provide special instructions to apply online for the Associate Membership option.

Interested individuals are encouraged to apply online within 30 days of receiving the invitation via e-mail.

*Participants paying the Non-member registration fee are eligible to apply.

Contact us or visit our website to learn more:

International Parkinson and Movement Disorder Society www.movementdisorders.org

MDS International Secretariat 555 East Wells Street, Suite 1100 Milwaukee, WI 53202 USA

Tel: + 1 414-276-2145 Fax: + 1 414-276-3349

E-mail: info@movementdisorders.org



JOIN US IN 2015!



We expect this to be an exciting year for MDS and look forward to bringing you news, updates and other initiatives in the field through the Society's journals, newsletter, and the MDS website.



MDS Education Information

To better fulfill its global mission of advancing the neurological sciences as they relate to the field of Movement Disorders, MDS is continually expanding its educational portfolio. This growing portfolio offers an increasing variety of high caliber continuing medical education and continuing professional development opportunities in Movement Disorders. For more information about the opportunities listed in this section, please visit www.movementdisorders.or/MDS/Education.htm or e-mail education@movementdisorders.org.

OUTREACH EDUCATION PROGRAMS

The following outreach education programs are intended to support movement disorders conferences and meetings in underserved areas. Applications, which include a proposed program, a budget and an online form, are submitted through the MDS website. Corresponding MDS Regional Sections and the MDS Education Committee review outreach education applications throughout the year.

Developing World Education Program

Through the Developing World Education Program (DWEP), funds are administered in a flexible support program tailored to the needs of each region. The funds can be used to sponsor faculty travel and accommodation, logistics costs or other course expenses which are approved at the time of application.

Ambassador Program

The Ambassador Program supports the travel of one or two international experts, who are MDS Members, to an underserved area for the purposes of education and scientific exchange. Sponsored speakers should deliver a keynote lecture during the meeting.

Visiting Professor Program

The Visiting Professor Program supports the travel of one or two international experts, who are MDS Members, to an underserved area for the purposes of education and scientific exchange. During the visit, invited experts should conduct teaching seminars in local hospitals or institutions, participate in grand rounds and/or provide input to further the understanding of movement disorders in the host country.

Parkinson and Movement Disorders Curriculum

The Parkinson and Movement Disorders Curriculum provides an overview of movement disorders and a clinical approach to the evaluation and management of common movement disorders. This curriculum is specially developed for trainees, internists, general neurologists and other clinicians interested in acquiring a basic understanding of movement disorders.

ONLINE EDUCATION

Device-Aided Medical Therapies for Parkinson's Disease

Device-Aided Medical Therapies in Parkinson's Disease is a new online course series designed by a panel of worldwide specialists around the main practical issues involved in therapeutic treatments of Parkinson's disease. This course series, provided as 10 separate modules, addresses issues such as identifying patients who may or may not benefit from the treatment, understanding the titration and the monitoring of clinical response, recognizing the main complications and managing them, and comparing these treatments with conventional oral dopaminergic therapies, as well as against each other. Each module will take approximately one hour to complete.

MDS is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. MDS designates this educational activity for a maximum of 1.0 AMA PRA Category 1 Credits™ for each module. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Coffee Break CME

The Coffee Break CME program provides education critical to providing the best care possible. Scientific content is presented in a modular format where each module is focused on a single topic. Each module can be completed in a short period of time and provides the clinician with updated information relevant to their practice. Both standard approaches and new advances are highlighted.

MDS is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. MDS designates this educational activity for a maximum of 2.0 AMA PRA Category 1 Credits™ for each module. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Journal CME

Visit the Educational Resources page on the MDS website to view a list of *Movement* Disorders journal articles available for CME credit.

MDS is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. MDS designates this educational activity for a maximum of 1.0 *AMA PRA Category 1 Credit*s™ for each module. Physicians should only claim credit commensurate with the extent of their participation in the activity.

MDS Video Library

This Members Only library consists of video supplements from the *Movement* Disorders journal since 1986. You may search the Video Library by keyword, author, volume and issue or a combination of these fields.



MDS Education Information

LIVE COURSES

Through the MDS Regional Sections, MDS offers a robust list of live course learning opportunities. Below is a sample of upcoming courses offered through MDS. Please note that dates and locations are subject to change. For the most up-to-date list of live courses, please visit www.movementdisorders.org/MDS/Education.htm.

- 8th Annual European Section Summer School for Young Neurologists;
 Prague, Czech Republic; September 4-6, 2015
- Deep Brain Stimulation for Movement Disorders; Grenoble, France; September 10-11, 2015
- Multidisciplinary Allied Health Professionals Team Training;
 São Paulo, Brazil; September 10-12, 2015
- Bridges and Boundaries in Movement Disorders: The Role of Neuroimaging; Pisa, Italy; November 12-13, 2015
- 2nd Middle East Camp for Parkinson's, Movement Disorders and Neuromodulation: From Neurodegeneration to Neuroregeneration; Dubai, UAE; November 19-21, 2015

RATING SCALES AND TRAINING VIDEOS

Rating Scales

MDS provides rating scales and related resources published in the *Movement* Disorders journal to physicians, researchers and health professionals interested in Parkinson's disease and other movement disorders. By making these scales available, MDS works to improve the diagnosis of movement disorders and patient care, as well as increase the validity and reliability of research studies. You can access the rating scales below online by visiting: www.movementdisorders.org/MDS/Education/Rating-Scales.htm. Links to the MDS-UPDRS and UDysRS training programs and rating scales use permission forms are also available through the rating scales link. Licensing fees are free for individual use, but fees may apply for government, non-profit or industry-funded research.

The following rating scales are currently available:

Global Assessment Scale for Wilson's Disease

Global Dystonia Scale

Non-Motor Symptoms Scale (NMSS) + (Includes NMSQ)

Quality of Life Essential Tremor Questionnaire

Rating Scale for Psychogenic Movement Disorders

Rush Dyskinesia Rating Scale *

Rush Videobased Tic Rating Scale

UFMG Sydenham's Chorea Rating Scale (USCRS)

Unified Dyskinesia Rating Scale (UDysRS) + *

Unified Dystonia Rating Scale (UDRS)

Unified Multiple System Atrophy Rating Scale (UMSARS)

Unified Parkinson's Disease Rating Scale (MDS-UPDRS) + *

Asterisk (*) indicates scale was developed by MDS; Plus symbol (+) indicates translations of the scale are available.

Training Videos

MDS publishes several audiovisuals, which are available for sale from the MDS International Secretariat. All materials are available in DVD format. Special reduced rates are available to MDS Members. For more information or to place an order, visit www.movementdisorders.org/MDS/Education/Latest-E-Learning/MDS-E-Store.htm.

The titles that are currently available for purchase include:

Instructional Video for Motor Fluctuation Diaries in Parkinson's Disease

Authored by C.G. Goetz, M. Grobman, L. Blasucci, and G.T. Stebbins, this instructional video demonstrates the 3 states of Parkinson's disease, off, on, and on with dyskinesia, with the intent to assist patients in completion of their motor fluctuation diaries. This video is 15 minutes.

Toronto-Western Spasmodic Torticollis Rating Scale TWSTRS Training Video

Authored by C. Comella, S. Bressman, C.G. Goetz, and A. Lang, this instructional video demonstrates the 10 categories in the TWSTRS scale with verbal and visual examples of scoring in each category. This video is approximately 1 hour and 25 minutes.

Unified Dyskinesia Rating Scale Teaching Program (UDysRS)

Authored by C.G. Goetz, John G. Nutt and G.T. Stebbins. This teaching program provides guidelines and rating examples of the Unified Dyskinesia Rating Scale, a new scale used for evaluating Parkinson's disease. This video is approximately 52 minutes.

Utility of an Objective Dyskinesia Rating Scale for Parkinson's Disease: (Rush Dyskinesia Rating Scale)

Authored by Goetz, et al. *Movement* Disorders Volume 9, Video Supplement. 2. This video provides guidelines and rating examples of the Rush Dyskinesia Rating Scale, a scale widely used for evaluating dyskinesias in Parkinson's disease. This video is approximately 17 minutes.

Unified Parkinson's Disease Rating Scale Training Video

(1995) Authored by C. G. Goetz, G.T. Stebbins, T. Chmura, S. Fahn, H. Klawans, and C. D. Marsden, this video demonstrates the different categories of the motor section of the UPDRS, with verbal and visual examples of scoring in each category. This video is approximately 1 hour.

Standardized Training Tools for the UPDRS Activities of Daily Living Scale (UPDRS Part II)

(2003) Authored by C.G. Goetz, P.A. Lewitt, and M. Weidenman. Movement Disorders Volume 18, Video Supplement. 2. This video provides suggestions on the application and interview techniques for Part II of



MDS Education Information

the UPDRS with patient examples and guidelines for raters. This video is approximately 1 hour and 15 minutes.

The International Parkinson and Movement Disorder Society's Unified Parkinson's Disease Rating Scale (MDS-UPDRS) Training Video (2010)

The International Parkinson and Movement Disorder Society (MDS)-sponsored new version of the UPDRS is founded on the critique that was formulated by the Task Force for Rating Scales in Parkinson's disease (Mov Disord 2003;18:738-750). The MDS-UPDRS has four parts: Part I (non-motor experiences of daily living), Part II (motor experiences of daily living), Part III (motor examination) and Part IV (motor complications). This video is approximately 2 hours and 5 minutes.

MDS REGIONAL SECTIONS

European Section

The International Parkinson and Movement Disorder Society-European Section (MDS-ES) serves MDS Members who live in Europe as well as select countries in Northern Africa. The MDS-ES Executive Committee is chaired by Prof. Olivier Rascol of Toulouse University Hospital in Toulouse, France. The MDS-ES Education Committee is chaired by Prof. Angelo Antonini of the Institute of Neurology, IRCCS San Camillo in Venice, Italy. During the past year, MDS-ES educational activities have been held in Italy, Spain, Hungary, Portugal, Greece, Germany, Slovenia, Italy, Austria, Israel, Russia, Udmurtia, Moldova, Bulgaria, South Africa and Morocco. The official MDS-ES website includes a wealth of programming and Section information, including section leadership and mission and details about MDS Regional Development initiatives. One can also find information on fellowships, links to scholarly papers and keynote publications and a calendar of events.

For more information about the MDS-ES, please visit www.movementdisorders.org/MDS/Regional-Sections/European-Section. htm.

Asian and Oceanian Section

The International Parkinson and Movement Disorder Society-Asian and Oceanian Section (MDS-AOS) serves MDS members from the majority of the Asian continent, as well as Australia, New Zealand and Oceania. The MDS-AOS Executive Committee is chaired by Dr. Louis Tan of the National Neuroscience Institute in Singapore. The MDS-AOS Education Committee is co-chaired by Prof. Madhuri Behari of the All India Institute of Medical Sciences in New Delhi, India and Prof. Shen-Yang Lim of the University of Malaya in Kuala Lumpur, Malaysia. The Asian and Oceanian Section was formed in 2006 at the 10th International Congress of Parkinson's Disease and Movement Disorders in Kyoto, Japan. Since its foundation, MDS-AOS

has developed educational programs in India, Sri Lanka, China, Malaysia, the Philippines, Vietnam, Myanmar, Taiwan, Korea, Thailand and the United Arab Emirates among other locations. The official MDS-AOS website includes programming and Section information, including details about AOS Regional Partners, leadership, the MDS-AOS Visiting Trainee Grant and a calendar of events.

In 2016, the MDS-AOS is holding the *5th Asian and Oceanian Parkinson's Disease and Movement Disorders Congress (AOPMC)* in Manila, Philippines March 11-13, 2016. Please visit www.movementdisorders.org/aopmc2016 for more information.

For further information on MDS-AOS or its educational opportunities, please visit www.movementdisorders.org/MDS/Regional-Sections/Asian Oceanian-Section.htm.

Pan American Section

The International Parkinson and Movement Disorder Society-Pan American Section (MDS-PAS) is composed of MDS Members who live in the countries of the Western Hemisphere. The MDS-PAS Executive Committee is chaired by Dr. Jorge Juncos of Emory University in Atlanta, GA, USA. The MDS-PAS Education Committee is chaired by Dr. Irene Litvan of the University of California San Diego in San Diego, CA, USA. The MDS-PAS supports educational programming throughout the entire region and has recently held courses in the United States, Argentina, and Brazil. The official MDS-PAS website includes a variety of programming and section information including details about the Regional Needs Assessment Survey, MDS-PAS Visiting Trainee Grant and MDS-PAS calendar of events.

For additional information on the MDS-PAS or its educational programming, please visit www.movementdisorders.org/MDS/Regional-Sections/Pan-America-Section.htm.



Continuing Medical Education (CME) Information

PURPOSE

The purpose of the 19th International Congress of Parkinson's Disease and Movement Disorders is to offer a forum for clinical and basic discussion on a variety of movement disorder topics, including presentations of current research and available treatments.

LEARNING OBJECTIVES

Through state-of-the-art lectures, hot topic reviews, controversy debates, teaching courses, skills workshops and video sessions, participants will be better able to:

- Describe the pathophysiology and neurobiology of Parkinson's disease and other movement disorders;
- Discuss the diagnostic approaches and tools available for Parkinson's disease and other movement disorders;
- Discuss the pharmacological and non-pharmacological treatment options available for Parkinson's disease and other movement disorders.

TARGET AUDIENCE

The target audience of the 19th International Congress of Parkinson's Disease and Movement Disorders includes clinicians, researchers, post-doctoral fellows, medical residents, medical students and other healthcare professionals with an interest in the current research and approaches for the diagnosis and treatment of movement disorders.

ACCREDITATION STATEMENT

The International Parkinson and Movement Disorder Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

CREDIT DESIGNATION

The International Parkinson and Movement Disorder Society designates this educational activity for a maximum of 35 AMA PRA Category 1 Credits™. Physicians should claim only credit commensurate with the extent of their participation in the activity.

FACULTY FINANCIAL DISCLOSURE INFORMATION

It is the policy of the International Parkinson and Movement Disorder Society (MDS) to ensure balance, independence, objectivity and scientific rigor in all sponsored educational activities. All faculty participating in any MDS sponsored activities are required to disclose to the activity audience any real or apparent conflict(s) of interest that may have a direct bearing

on the subject matter of the continuing medical education (CME) activity. This pertains to relationships with pharmaceutical companies, biomedical device manufacturers, or other corporations whose products or services are related to the subject matter of the presentation topic. The intent of this policy is not to prevent a speaker with a potential conflict of interest from making a presentation. It is merely intended that any potential conflict should be identified openly so that the listeners may form their own judgments about the presentation with the full disclosure of the facts. It remains for the audience to determine whether the speaker's outside interest may reflect a possible bias in either the exposition or the conclusions presented.

Faculty financial disclosure information will be provided to participants in San Diego.

CLAIMING CME CREDIT

To claim CME credit for participation in the 19th International Congress of Parkinson's Disease and Movement Disorders, participants must complete and submit an online CME Request Form.

Instructions for claiming credit:

After June 16, 2015, please visit: www.mdscongress2015.org/registration/cme.

- Log in after reading the instructions on the page. You will need your International Congress Registration ID which is located on your name badge, registration confirmation or e-mail education@movementdisorders.org.
- Follow the on-screen instructions to claim CME credit for the sessions you attended.
- You may print your certificate from your home or office, or save it as a PDF for your records.

The UEMS-EACCME® and the AMA recognize each other's CME credits since 2000. In 2002 the UEMS-EACCME® and the AMA signed an agreement of mutual recognition of CME credits between Europe and the USA whereby European physicians attending an event in the USA have their credits recognized in Europe and American physicians attending an event in Europe have their credits recognized in the USA.

If you have any questions or need help claiming credit contact the MDS International Secretariat at education@movementdisorders.org.



International Congress Information A-Z

ABSTRACTS

All accepted abstracts (including Late-Breaking and MDS Study Group Abstracts) are presented as a poster at the 2015 International Congress. All regular accepted abstracts are published as a supplement to the MDS Journal online edition. Additionally, select abstracts are presented in a Guided Poster Tour. All published abstracts are available on the MDS abstracts website, where you can download a PDF of accepted abstracts or search by author, keyword or abstract title. Please visit www.mdscongress2015.org for further publication information.

All registered Congress delegates will also receive the published abstracts on a USB, available for pickup in the registration area during regular Congress hours.

For further information regarding abstracts, poster presentation schedules and abstract publication, please see pages 15–18.

LATE-BREAKING ABSTRACTS AND MDS STUDY GROUP ABSTRACTS

All accepted Late-Breaking Abstract and MDS Study Group posters are displayed in the Harbor Foyer, 2nd Level, Monday — Thursday throughout the duration of the International Congress. These poster presentations will take place on Wednesday, June 16 from 12:00 — 13:30. An online

publication supplement of the Late-Breaking Abstracts and MDS Study Group Abstracts is available as of June 14, 2015 on the 2015 International Congress website, www.mdscongress2015.org.

For further information regarding Late-Breaking and MDS Study Group Abstracts, poster presentation schedules and publication, please see page 15.

BADGES

All International Congress attendees will receive a name badge with their registration materials. Badges should be worn at all times as they are used to gain access into all International Congress sessions and activities. Badge colors will be identified as follows:

Blue = Delegate Yellow = Exhibitor
Purple = Press Black = Staff

CAMERA POLICY

Cameras are not permitted in any 19th International Congress educational sessions or in the poster areas.

CERTIFICATE OF ATTENDANCE

A certificate of attendance is available in the back of the 2015 Final Program.

Connect to the Movement Disorder Community Through the MDS Website







International Congress Information A-Z

COFFEE BREAKS

Coffee and tea will be available at the following times/locations:

Sunday, June 14, 10:00 — 11:00 — Seaport Foyer, 2nd Level Monday, June 15, 10:00 — 10:30 — Grand Hall, Lobby Level Tuesday, June 16, 10:00 — 11:00 — Grand Hall, Lobby Level Wednesday, June 17, 10:00 — 10:30 — Grand Hall, Lobby Level Thursday, June 18, 9:30 — 10:00 — Grand Hall, Lobby Level

CONGRESS INFORMATION DESK

Location: Palm Foyer, 2nd Level (in the Registration area)

CONTINUING MEDICAL EDUCATION (CME)

Please refer to page 9 for Continuing Medical Education information.

CURRENCY

The official currency of the 19th International Congress is US Dollars; no other currency will be accepted.

EVALUATIONS

Please take time to complete the evaluation form provided at each session you attend. Your input and comments are essential in planning future educational programs for MDS.

Upon completion, evaluations may be returned to the session room attendants, or to the MDS Booth (located in the Grand Hall, Lobby Level).

EVENTS

Welcome Ceremony

Sunday, June 14

Location: Seaport Ballroom A—E, 2nd Level, Seaport Tower

19:30 - 21:30

All International Congress attendees are warmly invited to attend the International Congress Welcome Ceremony at the Manchester Grand Hyatt. This event is open to all registered delegates.

MDS Video Challenge Pre-Event Gathering

Wednesday, June 17

Location: Harbor and Seaport Foyers, 2nd Level 19:00 — 20:00

MDS Video Challenge

Wednesday, June 17

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower 20:00 — 22:00

Please join Masters of Ceremony Anthony Lang and Kapil Sethi as they host a world-renowned panel of Movement Disorders experts in guiding

participants through unique Movement Disorder cases. The cases will be presented by representatives from Movement Disorder Centers around the world and discussed by the Panel of Experts. Awards will be given for the most interesting and challenging cases. Country pride will add an enjoyable spirit of competition to this event. The goal of this session is for attendees to learn from a series of unusual and interesting patients and see how senior experts approach these types of challenging cases.

The 2015 Panel of Experts are:

Susan Fox, *Canada*Shen-Yang Lim, *Malaysia*Tim Lynch, *Ireland*Susanne Schneider, *Germany*Maria Stamelou, *Greece*

This event is open to all registered delegates.

EXHIBIT HALL

Location: Grand Hall, Lobby Level

For more information, please refer to pages 132-140.

Monday, June 15: 9:00 – 18:00
Tuesday, June 16: 9:00 – 18:00
Wednesday, June 17: 9:00 – 18:00
Thursday, June 18: 9:00 – 16:00

FLOOR PLANS OF THE MANCHESTER GRAND HYATT

Please refer to page 14.

GUIDED POSTER TOURS

Guided Poster Tours will give small groups of delegates an opportunity to hear discussion by abstract authors on a select group of abstracts in several sub-categories. They will take place in various session rooms, and will be led by members of the MDS faculty and leadership. There will be 16 total Guided Poster Tours with four simultaneous tours per day from Monday, June 15 through Thursday, June 18. Each tour will feature abstracts on a specific topic.

Please refer to pages 15–18 for further Guided Poster Tour information and schedules.

INTERNET

Complimentary Wi-Fi will be available throughout the Manchester Grand Hyatt for all attendees. To access:

- 1. View available Wireless Networks
- 2. Connect to MDS Wi-Fi Network
- 3. Enter Password: sandiego



International Congress Information A-Z

MDS BOOTH

Location: Grand Hall, Lobby Level

The MDS Booth hours are as follows:

Monday, June 15: 9:00 – 18:00
Tuesday, June 16: 9:00 – 18:00
Wednesday, June 17: 9:00 – 18:00
Thursday, June 18: 9:00 – 16:00

OFFICIAL LANGUAGE

The official language of the International Congress is English.

PRESS INFORMATION

Members of the working media receive waived registration for the 19th International Congress. Journalists and writers should report to the Congress Information Desk on the 2nd Level with their credentials to register for the International Congress. All press must wear their name badge for admittance into MDS sessions.

Please visit www.mdscongress2015.org/Congress-2015/Press.htm for further information and requirements.

REGISTRATION DESK

Location: Palm Foyer, 2nd Level

Name badges, scientific session tickets, abstract USB's, Final Programs and International Congress bags can be collected at the International Congress Registration Desk.

Registration Desk hours are as follows:

 Saturday, June 13:
 16:00 – 20:00

 Sunday, June 14:
 7:00 – 20:00

 Monday, June 15:
 7:00 – 18:00

 Tuesday, June 16:
 7:00 – 18:00

 Wednesday, June 17:
 7:00 – 16:00

 Thursday, June 18:
 7:00 – 16:00

SCIENTIFIC SESSIONS

The 2015 Scientific Program will incorporate Therapeutic Plenary Sessions, Plenary and Parallel Sessions, Teaching Courses, Video Sessions, Skills Workshops, Guided Poster Tours and Blue Ribbon Highlights.

Sessions will focus on the latest developments in:

- Multi-system proteinopathies
- Movement Disorder topics, including, but not limited to, ataxia, chorea, dystonia, myoclonus, Parkinson's disease, restless legs syndrome, spasticity, stereotypies, tics and tremors

- Basic Science issues, including, but not limited to, genetics, neuroimaging, neuropharmacology, surgical therapy and transplantation
- Other less common clinical conditions

SPECIAL ACCESSIBILITY NEEDS

To ensure any special needs can be properly met, requests should have been addressed in advance with the MDS International Secretariat. Delegates requiring special arrangements in order to fully participate in the International Congress should provide a written description of such needs to the MDS Information Desk upon arrival.

SPEAKER READY ROOM

Location: Balboa A-B, 2nd Level, Seaport Tower

All speakers and Guided Poster Tour presenters must check in at the Speaker Ready Room with their presentation materials the day prior to their scheduled presentation. Equipment is available to allow faculty and presenters to review their presentations. Audio/Visual personnel will be available for assistance.

The Speaker Ready Room hours are as follows:

 Saturday, June 13:
 16:00 – 20:00

 Sunday, June 14:
 7:00 – 18:00

 Monday, June 15:
 7:00 – 18:00

 Tuesday, June 16:
 7:00 – 18:00

 Wednesday, June 17:
 7:00 – 16:00

 Thursday, June 18:
 7:00 – 16:00

TICKETED SESSIONS

Tickets are required for admission into all Parallel Sessions, Teaching Courses, Video Sessions, and Skills Workshops. There is no additional fee for tickets to these sessions. Please check the Registration Desk for ticket availability.

Therapeutic Plenary Sessions, Plenary Sessions and poster sessions do not require a ticket to attend.

VENUE

The Manchester Grand Hyatt One Market Place San Diego, CA 92101 USA

WEATHER

The average daytime temperature in San Diego in June is approximately 67° F (19° C).







Important Dates:

Abstract Submission Opens: July 1, 2015

Registration and Housing Opens: September 25, 2015

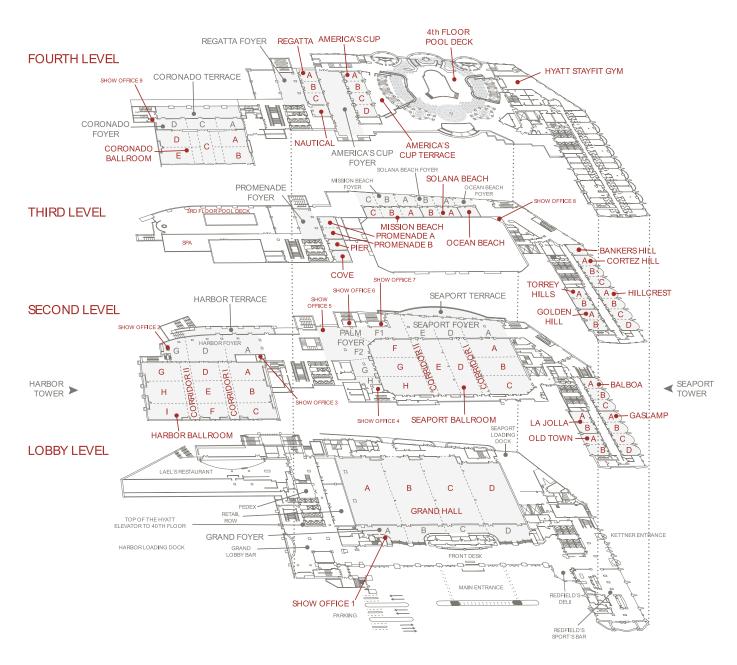
Abstract Submission Closes: September 30, 2015



www.movementdisorders.org/AOPMC2016



Manchester Grand Hyatt Floor Plan



FOURTH LEVEL:

Posters

Science and Technology Pavilion

THIRD LEVEL:

Faculty/Leadership Lounge

SECOND LEVEL:

Registration Speaker Ready Room Plenary Sessions Breakout Sessions

Late-Breaking and Study Group Posters

Guided Poster Tours Regional Assemblies MDS Business Meeting Welcome Ceremony

MDS Video Challenge Corporate Therapeutic Symposia

LOBBY LEVEL:

Exhibits Posters



Abstract Information and Schedules

ABSTRACT PUBLICATION

All regular accepted abstracts are published as a supplement to the MDS Journal and are available utilizing a searchable feature on the Congress website, www.mdscongress2015.org/Congress-2015/Abstracts, as of June 14, 2015. Please also visit www.movementdisorders.org to access The *Movement Disorders* Journal, where you can download a PDF of accepted abstracts.

All registered Congress delegates will also receive the published abstracts on a USB, available for pickup in the registration area during regular Congress hours.

Late-Breaking Abstracts and MDS Study Group Abstracts are published as an online supplement on the 2015 International Congress website, www.mdscongress2015.org/Congress-2015/Abstracts. These abstracts are available for download as of June 14, 2015.

GUIDED POSTER TOURS

Guided Poster Tours give groups of delegates an opportunity to hear discussion on a select group of abstracts in several sub-categories. Attendance is limited, and admission will be granted on a first-come, first-served basis. Guided Poster Tours do not require a ticket to attend.

A list of Guided Poster Tour abstracts and authors can be found on pages 54-61. Abstracts selected for a Guided Poster Tour presentation are published in a supplement to the MDS Journal, and can be found on the searchable abstract website.

LATE-BREAKING ABSTRACTS

All accepted Late-Breaking Abstract posters are displayed in the Harbor Foyer, 2nd Level, Harbor Tower, Monday — Thursday throughout the duration of the Congress. Late-Breaking Abstract poster presentations will take place Wednesday, June 17 from 12:00 — 13:30 in the Harbor Foyer, 2nd Level, Harbor Tower.

MDS STUDY GROUP ABSTRACTS

All accepted MDS Study Group Abstract posters are displayed in the Harbor Foyer, 2nd Level, Harbor Tower, Monday — Thursday throughout the duration of the Congress. MDS Study Group Abstract poster presentations will take place Wednesday, June 17 from 12:00 — 13:30 in the Harbor Foyer, 2nd Level, Harbor Tower.

POSTER SESSIONS

Poster sessions give each delegate an opportunity to view their colleagues' posters on the most current research in the field of Movement Disorders. Authors will be present for 1.5 hours each day to explain their work and answer questions. All accepted abstracts are presented as a poster at the 2015 International Congress.

Poster sessions are held Monday – Thursday during the Congress. Posters are available for viewing in the Grand Hall, Lobby Level, and the Coronado Ballroom, 4th Level, Harbor Tower, from 9:00-18:00, Monday through Wednesday, and 9:00-16:00 on Thursday. Poster session topics and schedules vary by date; please see the complete listing of scheduled poster presentation dates, times and locations on pages 16-18.



Abstract Information

POSTER SESSION SCHEDULE (LISTED BY ABSTRACT NUMBER)

All poster sessions will take place at the Congress venue; the Manchester Grand Hyatt, in the specific room locations as listed below.

Monday, June 15 • Presentation Time: 12:30 - 14:00

Abstract Numbers:	Category Name:	Location:
1-66	Parkinson's disease: Neuroimaging and neurophysiology	Grand Hall (Lobby Level)
67-136	Parkinson's disease: Pathophysiology	Grand Hall (Lobby Level)
137-167	Parkinson's disease: Psychiatric manifestations	Grand Hall (Lobby Level)
168-350	Parkinson's disease: Clinical trials, pharmacology and treatment	Coronado Ballroom (4th Level, Harbor Tower)
351-364	Choreas (non-Huntington's disease)	Coronado Ballroom (4th Level, Harbor Tower)
365-374	Myoclonus	Coronado Ballroom (4th Level, Harbor Tower)

Tuesday, June 16 • Presentation Time: 12:30 - 14:00

Abstract Numbers:	Category Name:	Location:
375-489	Parkinson's disease: Non-motor symptoms	Grand Hall (Lobby Level)
490-514	Neurophysiology	Grand Hall (Lobby Level)
515-524	Therapy in movement disorders: Neurotoxin	Grand Hall (Lobby Level)
525-531	Pediatric movement disorders	Grand Hall (Lobby Level)
532-535	History	Grand Hall (Lobby Level)
536-633	Surgical Therapy: Parkinson's disease	Coronado Ballroom (4th Level, Harbor Tower)
634-667	Surgical Therapy: Other movement disorders	Coronado Ballroom (4th Level, Harbor Tower)
668-740	Other (non-category specific)	Coronado Ballroom (4th Level, Harbor Tower)

Wednesday, June 17 • Presentation Time: 12:00 - 13:30

Abstract Numbers:	Category Name:	Location:
741-754	Drug-induced movement disorders	Grand Hall (Lobby Level)
755-770	Neuropharmacology	Grand Hall (Lobby Level)
771-846	Parkinsonism (secondary and parkinsonism-plus)	Grand Hall (Lobby Level)
845-903	Parkinson's disease: Cognition	Grand Hall (Lobby Level)
904-907	Pathophysiology (other movement disorders)	Grand Hall (Lobby Level)
908-957	Ataxia	Coronado Ballroom (4th Level, Harbor Tower)
958-965	Education in movement disorders	Coronado Ballroom (4th Level, Harbor Tower)
966-1016	Neuroimaging	Coronado Ballroom (4th Level, Harbor Tower)
1017-1066	Parkinson's disease: Genetics	Coronado Ballroom (4th Level, Harbor Tower)
1067-1089	Rating scales	Coronado Ballroom (4th Level, Harbor Tower)
1090-1111	Therapy in movement disorders: Medical	Coronado Ballroom (4th Level, Harbor Tower)
	Late-Breaking and MDS Study Group Abstracts	Harbor Foyer (2nd Level, Harbor Tower)

Thursday, June 18 • Presentation Time: 12:00 - 13:30

Abstract Numbers:	Category Name:	Location:
1112-1148	Epidemiology	Grand Hall (Lobby Level)
1149-1182	Genetics	Grand Hall (Lobby Level)
1183-1218	Phenomenology and clinical assessment of movement disorders	Grand Hall (Lobby Level)
1219-1237	Rare genetic and metabolic diseases	Grand Hall (Lobby Level)
1238-1253	Restless legs syndrome and other sleep disorders	Grand Hall (Lobby Level)
1254-1263	Tics/Stereotypies	Grand Hall (Lobby Level)
1264-1266	Therapy in movement disorders: Gene and cell-based therapies	Grand Hall (Lobby Level)
1267-1278	Cognitive disorders	Coronado Ballroom (4th Level, Harbor Tower)
1279-1362	Dystonia	Coronado Ballroom (4th Level, Harbor Tower)
1363-1395	Huntington's disease	Coronado Ballroom (4th Level, Harbor Tower)
1396-1426	Quality of life/caregiver burden in movement disorders	Coronado Ballroom (4th Level, Harbor Tower)
1427-1439	Spasticity	Coronado Ballroom (4th Level, Harbor Tower)
1440-1473	Tremor	Coronado Ballroom (4th Level, Harbor Tower)



Abstract Information

POSTER SESSION SCHEDULE (LISTED ALPHABETICALLY BY ABSTRACT CATEGORY)

OSTER SESSION SCHEDULE (LISTED ALPHABETICALLY BY ABSTRACT CATEGORY)				
	Presentation Date:		Location	
908-957	Wednesday, June 17		Coronado Ballroom (4th Level, Harbor Tower)	
	· · · · · · · · · · · · · · · · · · ·		Coronado Ballroom (4th Level, Harbor Tower)	
	· · · · · · · · · · · · · · · · · · ·	 	Coronado Ballroom (4th Level, Harbor Tower)	
_			Grand Hall (Lobby Level)	
			Coronado Ballroom (4th Level, Harbor Tower)	
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			Grand Hall (Lobby Level)	
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			Grand Hall (Lobby Level)	
	-		Coronado Ballroom (4th Level, Harbor Tower)	
_	•		Coronado Ballroom (4th Level, Harbor Tower)	
	•		Coronado Ballroom (4th Level, Harbor Tower)	
			Grand Hall (Lobby Level)	
490-514			Grand Hall (Lobby Level)	
668-740			Coronado Ballroom (4th Level, Harbor Tower)	
			Grand Hall (Lobby Level)	
_	· · · · · · · · · · · · · · · · · · ·		Coronado Ballroom (4th Level, Harbor Tower)	
	,		, , ,	
845-903	Wednesday, June 17	12:00 - 13:30	Grand Hall (Lobby Level)	
			Coronado Ballroom (4th Level, Harbor Tower)	
			Grand Hall (Lobby Level)	
375-489	Tuesday, June 16	12:30 - 14:00	Grand Hall (Lobby Level)	
	· · · · · · · · · · · · · · · · · · ·		Grand Hall (Lobby Level)	
			Grand Hall (Lobby Level)	
	· · · · · · · · · · · · · · · · · · ·		Grand Hall (Lobby Level)	
			Grand Hall (Lobby Level)	
			Grand Hall (Lobby Level)	
1396-1426	Thursday, June 18	12:00 - 13:30	Coronado Ballroom (4th Level, Harbor Tower)	
	,		, , ,	
1219-1237	Thursday, June 18	12:00 - 13:30	Grand Hall (Lobby Level)	
1067-1089			Coronado Ballroom (4th Level, Harbor Tower)	
			Grand Hall (Lobby Level)	
	· · · · · · · · · · · · · · · · · · ·		Coronado Ballroom (4th Level, Harbor Tower)	
	<i>''</i>		Coronado Ballroom (4th Level, Harbor Tower)	
	· ·	12:30 - 14:00	Coronado Ballroom (4th Level, Harbor Tower)	
1264-1266	· · · · · · · · · · · · · · · · · · ·			
	Thursday, June 18	12:00 - 13:30	Grand Hall (Lobby Level)	
1264-1266	Thursday, June 18	12:00 - 13:30	Grand Hall (Lobby Level)	
1264-1266 1090-1111	Thursday, June 18 Wednesday, June 17	12:00 - 13:30 12:00 - 13:30	Grand Hall (Lobby Level) Coronado Ballroom (4th Level, Harbor Tower)	
1264-1266	Thursday, June 18	12:00 - 13:30	Grand Hall (Lobby Level)	
	908-957 351-364 1267-1278 741-754 1279-1362 958-965 1112-1148 1149-1182 532-535 1363-1395 365-374 966-1016 755-770 490-514 668-740 771-846 168-350 845-903 1017-1066 1-66 375-489 67-136 137-167 904-907 525-531 1183-1218 1396-1426 1219-1237 1067-1089 1238-1253 1427-1439 634-667	Presentation Date: 908-957 Wednesday, June 17 351-364 Monday, June 18 741-754 Wednesday, June 18 958-965 Wednesday, June 18 1149-1182 Thursday, June 18 1149-1182 Thursday, June 18 1363-1395 Tuesday, June 15 966-1016 Wednesday, June 17 755-770 Wednesday, June 17 490-514 Tuesday, June 16 668-740 Tuesday, June 16 771-846 Wednesday, June 17 168-350 Monday, June 15 845-903 Wednesday, June 17 1017-1066 Wednesday, June 17 1-66 Monday, June 15 375-489 Tuesday, June 15 375-489 Tuesday, June 15 137-167 Monday, June 15 1396-1426 Thursday, June 18 1396-1426 Thursday, June 18 1219-1237 Thursday, June 18 1427-1439 Thursday, June 18 1427-1439 Thursday, June 18	Presentation Date: Presentation Time: 908-957 Wednesday, June 17 12:00 - 13:30 351-364 Monday, June 15 12:30 - 14:00 1267-1278 Thursday, June 18 12:00 - 13:30 741-754 Wednesday, June 18 12:00 - 13:30 1279-1362 Thursday, June 18 12:00 - 13:30 958-965 Wednesday, June 18 12:00 - 13:30 1112-1148 Thursday, June 18 12:00 - 13:30 1363-355 Tuesday, June 18 12:00 - 13:30 365-374 Monday, June 18 12:00 - 13:30 966-1016 Wednesday, June 17 12:00 - 13:30 755-770 Wednesday, June 17 12:00 - 13:30 490-514 Tuesday, June 16 12:30 - 14:00 771-846 Wednesday, June 16 12:30 - 14:00 771-846 Wednesday, June 17 12:00 - 13:30 1017-1066 Wednesday, June 17 12:00 - 13:30 1068-350 Monday, June 15 12:30 - 14:00 845-903 Wednesday, June 17 12:00 - 13:30 1067-136 Monday, June 15	



Abstract Schedules

GUIDED POSTER TOUR SCHEDULE

* No Guided Poster Tours on Sunday

Guided Poster Tours give groups of delegates an opportunity to hear discussion on a select group of abstracts in several sub-categories. Attendance is limited, and admission will be granted on a first-come, first-served basis. Guided Poster Tours do not require a ticket to attend.

A list of Guided Poster Tour abstracts and authors can be found on page 54 – 61. Abstracts selected for a Guided Poster Tour presentation are published in a supplement to the MDS Journal, and can be found on the searchable abstract website.

MONDAY, JUNE 15 • 12:30 - 14:00

GPT 1	Parkinson's disease:	Seaport F, 2nd Level, Seaport Tower
	Phenomenology	
GPT 2	Sleep disorders and RLS	Harbor A, 2nd Level, Harbor Tower
GPT 3	Tremor	Harbor B-C, 2nd Level, Harbor Tower
GPT 4	Parkinson's disease: Non-	Harbor G, 2nd Level, Harbor Tower
	motor features	

TUESDAY, JUNE 16 • 12:30 - 14:00

GPT 5	Lewy body dementia and	Seaport F, 2nd Level, Seaport Tower
	Dementias	
GPT 6	Huntington's disease and	Harbor A, 2nd Level, Harbor Tower
	other choreiform disorders	
GPT 7	Rating scales	Harbor B-C, 2nd Level, Harbor Tower
GPT 8	Genetics	Harbor G, 2nd Level, Harbor Tower

WEDNESDAY, JUNE 17 • 12:00 - 13:30

GPT 9	Parkinson's disease:	Seaport F, 2nd Level, Seaport Tower
	Clinical trials	
GPT 10	Dystonia	Harbor A, 2nd Level, Harbor Tower
GPT 11	Surgical therapy of	Harbor B-C, 2nd Level, Harbor Tower
	Movement Disorders	
GPT 12	Basic Science	Harbor G, 2nd Level, Harbor Tower

THURSDAY, JUNE 18 • 12:00 - 13:30

GPT 13	Atypical Parkinsonism	Seaport F, 2nd Level, Seaport Tower
GPT 14	Surgical therapy of	Harbor A, 2nd Level, Harbor Tower
	Parkinson's disease	
GPT 15	Parkinson's disease:	Harbor B-C, 2nd Level, Harbor Tower
	Cognitive and behavioral	
	aspects	
GPT 16	Parkinson's disease:	Harbor G, 2nd Level, Harbor Tower
	Neuropharmacology	

2015 MDS Education Calendar





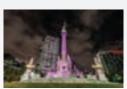
Young Neurologists
September 4-6, 2015
Prague, Czech Republic



2nd Middle East Camp for Parkinson's, Movement Disorders and Neuromodulation November 19-21, 2015 Dubai, UAE



Deep Brain Stimulation for Movement Disorders September 10-11, 2015 Grenoble, France



MDS-PAS School for Young Neurologists November 26-28, 2015 Mexico City, Mexico



Allied Health Team Training for Parkinson's Disease September 10-12, 2015 São Paulo, Brazil



Bridges and Boundaries in Movement Disorders: The Role of Neuroimaging November 12-13, 2015 Pisa, Italy

Dates and Locations are subject to change. For a complete up-to-date list of courses, visit

www.movementdisorders.org/ MDS/education.htm



JOIN MORE
THAN 6000 COLLEAGUES
AT THE SECOND CONGRESS OF THE

EUROPEAN ACADEMY OF NEUROLOGY!



Map of Downtown San Diego



Downtown/Balboa Park/Hillcrest/North Park Accommodations

Map Location	Hotel	Guest Rooms	Map Location
America's 8	est Value Inn – Convention Cen	der 42	B by Hotel
The Bristol S	an Diego	102	Mancheste
O Courtywrd b	y Marriott San Diego Downtov	m 245	(B) Omni San
Embassy Suit	es Hotel San Diego Bay – Downt	own 337	Radisson H
O Hard Rock P	lotel San Diego	420	San Diego
O Hilton San D	liego Convention Center	1,190	(II) San Diego
Hilton San D	lego Gaslamp Quarter	282	Sheraton 5
O Holiday Inn	Express - Downtown San Dieg	o 136	The Sofia is
Holiday Inn	on the Bay	600	The US Gr
(I) Horson Gran	nd Hotel	132	The Westing
(I) Hotel Solam	ar San Diego	235	The Westing
(I) Hostelling to	ternational	33	W San Die

Map Location	Hotel	Guest Rooms
by Hotel		142
Manchester	Grand Hyatt San Diego	1,625
(B) Omni San D	liego Hotel	511
(I) Radisson Ho	tel Harbor View	333
San Diego N	Marriott Gaslamp Quarter	306
D San Diego h	darriott Hotel & Marina	1,362
Sheraton Su	ites San Diego at Symphony Hall	264
The Sofia Ho	otel	212
1 The US Gran	nt	270
The Westin	Horton Plaza San Diego	450
(B) The Westin	San Diego	436
W San Dieg	0	258



HONORARY MEMBERSHIP AWARDS

The Honorary Membership Awards recognize individuals who have made extraordinary contributions to the field of Movement Disorders or otherwise to the Society.

Sunday, June 14, as part of the Welcome Ceremony 19:30 – 21:30







Anne Young, MD, PhD Boston, MA, USA

PRESIDENT'S DISTINGUISHED SERVICE AWARD

The President's Distinguished Service Award is given in recognition of long and distinguished service to the International Parkinson and Movement Disorder Society.

Sunday, June 14, as part of the Welcome Ceremony 19:30 – 21:30

STANLEY FAHN LECTURE

Monday, June 15 as part of Plenary Session 2101: Presidential Lectures 8:00 – 8:30

The Stanley Fahn Award Lecture was created to recognize an outstanding scholar and role-model clinician in the field of Movement Disorders. The selected lecturer must show evidence of exceptional contributions which have resulted in better understanding of the cause, diagnosis, or treatment of Movement Disorders, and have translated into meaningful improvements in the standard of clinical practice. The selected lecturer must demonstrate evidence of consistent dedication to Movement Disorders education and research.

The enigma of action tremor in the elderlyStanley Fahn Lecturer — Günther Deuschl, MD



Günther Deuschl received his MD at the University of Munich and started his training with Albrecht Struppler at the Department of Neurology in Munich and subsequently worked in Freiburg with C.H. Lücking and E. Schenk where he was promoted to assistant professor in 1988 and associate professor in 1993. In 1991 he spent a sabbatical at the National Institutes of Health, Bethesda/USA with Mark Hallett. In 1995 he was elected as full Professor of Neurology at the Christian-Albrechts-University in Kiel, Germany, and chairman of the Department of Neurology and is still in this position. He has built a visible deep brain surgery program in Kiel. Together with his team he focused on the pathophysiology and clinical studies for deep brain stimulation for Parkinson's disease and dystonia. He created a national research group for deep brain stimulation which has contributed to the development of the field. His other main interest has been the study of tremor particularly clinical analysis, epidemiology, genetics, computational analysis, pathophysiology and neurophysiology of tremors. He led the writing group for the MDS consensus statement on tremor. Further scientific interests are dystonia, amnestic syndromes and clinical neurophysiology. Publications see: www.researcherid.com/ rid/A-7986-201.

Prof. Deuschl received many high ranking awards and honors like Max Nonne and H. Berger awards. He is currently a visiting Professor at the Shanghai Jiao Tong University and is an honorary member of several neurological Societies. He was the Editor of *Movement* Disorders from 2004-2010 and is an Editorial Board member of several international journals. He has served as the president of the German Society of Neurology (2006-2008), as the President of the International Parkinson and Movement Disorder Society (2011-2013) and is currently president of the European Academy of Neurology. He is glad to have many fellows and friends in the movement disorder community around the world.



C. DAVID MARSDEN LECTURE

Monday, June 15 *as part of Plenary Session 2101: Presidential Lectures* 9:30 – 10:00

The C. David Marsden Lecture was created to recognize an outstanding scholar and inspiring neuroscientist in the field of Movement Disorders. The selected lecturer must show evidence of exceptional contributions which have resulted in better understanding of the neurobiology of Movement Disorders, and have translated into tangible improvements in clinical therapy and/or providing insight into normal brain function in the control of movement. The selected lecturer must demonstrate evidence of consistent dedication to Movement Disorder education and research.

Basil Ganglia and Pathophysiology: Puzzles, paradoxes and clues C. David Marsden Lecturer – José Obeso, MD, PhD



José A. Obeso graduated from the University of Navarra in 1976 and specialized in neurology and neurophysiology in San Sebastian and Pamplona, Spain. From 1980 to 1982 he worked as a researcher in movement disorders under the supervision of Professor C. David Marsden in London. These two years made a decisive impact in his career. Prof. Obeso is currently director of the CINAC at the Hospital Puerta del Sur in Mostoles, Madrid, Spain and full Professor of Neurology in the CEU-San Pablo University in Madrid. He has directed a highly productive clinical and experimental group for many years, with significant contributions in areas such as dystonia and myoclonus, continuous dopaminergic for Parkinson's disease, pathophysiology of the basal ganglia and surgical treatment of Parkinson's disease. Prof. Obeso and his team have concentrated on defining compensatory mechanism in early phase of PD and in determining the most relevant therapeutic challenges in PD. Currently he is focused on defining the origin of cell vulnerability in Parkinson's disease and the need to stop the neurodegeneration process rather than concentrating on restoring striatal dopamine levels only. He is the Chief Editor of the *Movement* Disorders Journal, the leading publication in the field of Parkinson's disease and movement disorders.

Prof. Obeso has published more than 325 peer-reviewed papers on movement disorders and the pathophysiology of the basal ganglia, the mechanisms of surgery and more recently in a new more progressive model of inducing dopamine depletion in the rat and monkey. He has a high number of relevant publications in top general journals of medicine like *The Lancet* and *New England Journal of Medicine, Lancet Neurology, Nature*

Medicine, and particularly in neurology/neuroscience journals like, Annals of Neurology, Brain, Trends in Neuroscience. etc. His current H-index is 68. He has also contributed to teaching and academics with over one hundred book chapters including one recently in the Harrison's Textbook of Medicine (with Drs. Olanow and Schapira), editorial pieces and several hundred communications and lectures at scientific meetings. Prof. Obeso has also served on the editorial boards of prestigious journals, including Annals of Neurology, and Movement Disorders and has reviewed routinely for Lancet, Lancet Neurology, Journal of Neuroscience, Brain, Neurobiology of Disease, etc. and served on the scientific grants review committees of the Parkinson's Disease Foundation, Michael J. Fox Foundation, Anne Obretch Parkinson Foundation or Dystonia Foundation. He is an honorary member and Invited Professor of several organizations and institutions such as the Colombian Neurological Association, French Neurological Society, Bolivian Neurological Association and Professor of the Universidad de La Habana (Cuba).

JUNIOR AWARDS

Three Junior Awards recipients have been selected based on their significant contribution to research in the field of Movement Disorders.

Monday, June 15

8:30 - 9:30

2101: Plenary Session: Presidential Lectureships Chairs: Matthew Stern, Oscar Gershanik

Md. Mashiar Rahman, PhD

Jeonju-si, Jeollabuk-Do, Korea

The mitochondrial serine protease HtrA2 degrades diseaseassociated prion protein

Md. Mashiar Rahman, PhD¹, Shahina Akhter, PhD² and Seong-Tshool Hong, PhD². ¹Department of Genetic Engineering and Biotechnology, Jessore University of Science & Technology, Jessore, Khulna, Bangladesh, 7408 and ²Department of Medicine, Chonbuk National University, Jeonju, Jeollabukdo, Republic of Korea, 561756.

Objective: The goal of this study was to elucidate the neuroprotective role of HtrA2 in prion disease (PrD)

Background: The clearance of disease-associated prion protein in brain is the most challenging and important task in current biomedical research. Until now, there are no evidences available for intraneuronal PrP detoxification. Bacterial HtrA/DegP is part of a large family of related serine proteases, members of which are found in most organisms, including humans and Drosophila. One of the four human serine proteases, HtrA2 has extensive homology with bacterial heat-shock protein DegP, which protects bacterial cells from stress-induced toxicity due to misfolded proteins.



Methods: We took advantages of Drosophila genetics to direct the panneuronal expression of wild-type mouse prion protein (mPrP) or HtrA2 or co-expression of mPrP with HtrA2 to examine the functional role of HtrA2 in prion disease by linking directly HtrA2 with the prion protein. It has been performed in vitro enzymatic assay between disease-associated mPrP and HtrA2 followed by inhibition assay by using HtrA2-specific inhibitor to shed light on HtrA2 ability to protect PrP-induced Prion disease (PrD).

Results: The ectopic expression of mPrP showed accumulation of mPrP in the brain of Drosophila with a much more punctuate pattern of immunoreactivity particularly at older ages with prominent intracellular inclusion, reduced lifespan, locomotor dysfunction and rough eyes phenotype, which indicates a toxic dominant mechanism of mPrP for the etiopathogenesis of PrD. The ectopic expression of HtrA2 alone markedly improved the locomotion and longevity of the fly. However, upon coexpression; HtrA2 completely degraded accumulated mPrP in the fly brain resulted the rescue of the mPrP-induced phenotype of premature loss of climbing ability, longevity and developmental defects in the Drosophila eye. In vitro enzymatic assay also showed that HtrA2 has the capability to degrade disease-associated prion protein from PrD Drosophila brain.

Conclusions: Our results demonstrated the new insight into the detoxification pathway of intraneuronal disease-associated PrP suggesting the neuroprotective role of HtrA2 in PrD, which recapitulates the possible neuroprotective function of HtrA2 in AD and PD because amyloidbeta, alpha-synuclein and prion protein have a common structure and mechanism of toxicity in their pathological state.

Carine Maurer, MD, PhD

Bethesda, MD, USA

Mechanisms underlying impaired self-agency in functional movement disorders: a resting state fMRI study

Carine W Maurer, MD/PhD¹, Silvina Horovitz, PhD¹, Kathrin LaFaver, MD¹ and Mark Hallett, MD¹.¹Human Motor Control Section, NINDS, National Institutes of Health, Bethesda, MD, United States, 20892.

Objective: To assess the neural mechanisms underlying lack of selfagency in patients with functional movement disorders (FMD).

Background: The abnormal movements produced by patients with FMD are generated by normal voluntary motor pathways, but are perceived by patients as being involuntary. This lack of self-agency is one of the key features of FMD. The right temporo-parietal junction (TPJ) has been proposed to play an important role in self-agency by comparing internal predictions of movement with actual external events, acting as a

"mismatch detector". Although task-based fMRI studies have previously demonstrated hypoactivity of the right TPJ in FMD patients, this region has not been examined in the resting state.

Methods: Resting state multi-echo BOLD fMRI and MP-RAGE images were obtained in 35 patients with clinically definite FMD and 35 age-and sex-matched healthy controls using a 3T Skyra Siemens scanner. Pre-processing was performed using the AFNI tool meica.py. Group-wise comparison between FMD patients and healthy controls was performed using AFNI GroupInstaCorr with the right TPJ as seed region-of-interest. Age, sex, BDI depression scores and childhood trauma scores were included as potential covariates.

Results: As compared to controls, FMD patients demonstrated decreased functional connectivity (p<0.05 corrected) between the right TPJ and the bilateral precentral gyri, left declive, bilateral insula, left middle cingulate, bilateral middle temporal gyri, right posterior cingulate, and left superior frontal gyrus. There was no effect of age, sex, or BDI score. Patients exhibited increased functional connectivity between the right TPJ and the left inferior parietal region with increasing levels of childhood emotional trauma.

Conclusions: We propose that the diminished functional connectivity between the right TPJ and the above-mentioned motor regions reflects impaired feedforward with the brain's "mismatch detector". Furthermore, diminished functional connectivity between the right TPJ and the bilateral insula may reflect impaired intentional binding. We suggest that these mechanisms may contribute to the reduced sense of agency in FMD patients.

Bettina Balint, MD

London, United Kingdom

Antibody spectrum in Stiff Person Syndrome and related disorders Bettina Balint, MD^{1,2}, Inga M Blöcker, PhD³, Mandy Unger, PhD³, Winfried Stöcker, MD³, Christian Probst, PhD³, Lars Komorowski, PhD³ and Hans-Michael Meinck, MD². ¹Sobell Department of Motor Neuroscience, UCL Institute of Neurology, London, United Kingdom; ²Department of Neurology, University Hospital Heidelberg, Heidelberg, Germany and ³Institute of Experimental Immunology, EUROIMMUN AG, Luebeck, Germany.

Objective: To determine the spectrum and prevalence of antibodies associated with Stiff Person Syndrome and related disorders (SPSD) in a large cohort.

Background: New antibodies targeting the glycine receptor (GlyR), GABA A receptor (GABAAR), and dipeptidyl-peptidase-like protein-6



(DPPX) have been recently described in SPSD. Such neuronal surface antibodies are deemed pathogenic and to be associated with a better response to immunotherapy compared to the hitherto known antibodies against intracellular antigens like glutamic acid decarboxylase (GAD), amphiphysin, and gephyrin.

Methods: We included 73 SPSD patients (SPS=44; SLS=6; PERM=23) and 5 patients with acquired hyperekplexia, 3 of them with brainstem encephalitis. Previous positive antibody results (laboratories Prof Vincent, Oxford, and University Hospital Heidelberg) were included in the evaluation. For antibody detection we used indirect immunofluorescence applying frozen tissue sections (rat: hippocampus, cerebellum; monkey: cerebellum) and recombinant cell substrates, each expressing a different neuronal antigen [GABABR, GABAAR (A1+B3), GlyR, GAD65, amphiphysin, gephyrin, DPPX, SLC6A5/GlyT2].

Results: 54 SPSD sera contained GAD-ab (SPS=31; PERM=19; SLS=4). 7 of the GAD-ab positive sera harboured also GlyR-ab (n=1, SPS), GlyT2-ab (n=2, PERM), or amphiphysin-ab (low titre n=3, 1 SPS, 1 PERM; high titre

n=1, paraneoplastic SPS). 3 SPS patients had high titres of amphiphysinab; in 2 cases a paraneoplastic aetiology was established, for 1 patient data were incomplete. GlyR-ab were present in 9 sera (SPS=7, PERM=2); in 3 of these, other antibodies were also present (low titre DPPX-ab, n=2 (SPS), GAD-ab in 1 SPS patient). DPPX-ab at high titres were present in 2 sera of previously reported PERM patients. 1 patient with brainstem encephalitis with hyperekplexia had GlyR-ab and gephyrin-ab. No antibodies were detected in the remaining hyperekplexia patients and in 6 SPSD patients. No patient had GABAAR-ab.

Conclusions: We found antibodies against the presynaptic surface-expressed GlyT2 for the first time and report the second case with gephyrin-ab. Altogether, GAD-ab were the most prevalent (74%) followed by GlyR-ab (17%). Amphiphysin-ab were most frequently associated with paraneoplastic disease. DPPX-ab and GABAAR-ab seem not to be frequent in SPSD. Multiple antibodies occurred overall in 13%. We did not observe any phenotype-serotype correlation which might guide antibody testing.





Awards Information — 2015 Travel Grants

Muneer Abu Snineh	Anand Diwan	Katsuo Kimura	Robert Nickl
Israel	<i>India</i>	Japan	Germany
Robert Adam	Ahmad Elkouzi	Florian Krismer	Roberto Ortega
Australia	<i>United States</i>	Austria	United States
Emmanuel Akano	Richard Erasmi	Marium Kulsum	Jin Sung Park
United States	Germany	<i>India</i>	<i>Australia</i>
Ayca Altinkaya	Benedikt Fabry	Sheng-Han Kuo	Sachin Patil
<i>Turkey</i>	<i>Germany</i>	<i>United States</i>	<i>India</i>
Julius Anang	Seyed-Mohammad Fereshtehnejad	Ling Liu	Matthew Petrucci United States
Canada	Sweden	Peoples Republic of China	
Jan Bardon	Michelle Fullard	Karlo Lizarraga	Marina Picillo
Czech Republic	<i>United States</i>	<i>United States</i>	<i>Canada</i>
Rui Duarte Barreto	Carmen Gasca-Salas	Matthias Lohle	Ahmed Qavi
Portugal	Canada	Germany	<i>Pakistan</i>
Michael Bonello	Matthew Georgiades	Jose Lopez-Castellanos	Md. Mashiar Rahman
<i>United Kingdom</i>	Australia	El Salvador	Bangladesh
Linda Borellini	Gimena Gomez	Marianne Luinstra	Gesine Respondek
<i>Italy</i>	Argentina	Netherlands	Germany
Lauren Broom	Jessica Gonzalez Mujica	Lingyan Ma	Daphne Robakis
United States	Peru	Peoples Republic of China	United States
Florian Brugger	Jennifer Han	Graziella Madeo	Priscila Rocha
<i>United Kingdom</i>	<i>United States</i>	<i>Italy</i>	Australia
Abderrahmane Chahidi	Sebastian Heinzel	Abhimanyu Mahajan	Flavio Augusto Sallem
<i>Morocco</i>	Germany	<i>United States</i>	<i>Brazil</i>
Payel Chatterjee	Andreas Horn	Stephanie Mangesius	Armando Sanchez-Jordan
<i>India</i>	<i>Germany</i>	Austria	<i>Mexico</i>
Han-Lin Chiang	Katja Huckelheim	Nargiza Mansurova	Sara Sanz-Blasco
<i>Taiwan</i>	<i>Germany</i>	<i>Uzbekistan</i>	<i>Argentina</i>
Hyun Joo Sophie Cho	Edwin Jabbari	Raul Martinez	Anna Sauerbier
<i>United States</i>	<i>United Kingdom</i>	Spain	<i>United Kingdom</i>
Christine Cooper	Angela Jochim	Eavan Mc Govern	Ruth Schneider
United States	<i>Germany</i>	<i>Ireland</i>	United States
Florence Cormier-Dequaire	Vincent Jourdain	Niccolo Mencacci	Laetitia Schwab
France	United States	<i>United Kingdom</i>	<i>United Kingdom</i>
Aman Deep	Rukmini Mridula Kandadai	Shahnaz Miri	Laura Scorr
United States	<i>India</i>	<i>United States</i>	United States
Soaham Desai	Eleanna Kara	Wael Mohamed	Shital Shah
<i>India</i>	United States	<i>Egypt</i>	United States



Awards Information — 2015 Travel Grants

Leili Shahgholi United States

Vibhash Sharma United States

Kara Smith *United States*

Jirada Sringean *Thailand*

Meera Sritharan *United Kingdom*

Morten Stokholm

Denmark

Samuel Stuart United Kingdom

Irene Taravini Argentina

Baris Topcular Turkey Yevgen Trufanov

Ukraine

Zeynep Tufekcioglu

Turkey

Lauren Turner Australia

Neeraj Upadhyay

Italy

Michael Vesia Canada

Padmaja Vittal United States Doris Wang United States

Daryl Wile Canada

Laura Williams Ireland Ho Geol Woo

Korea

Yue Xing *United Kingdom*

Gilad Yahalom

Israel

Tritia Yamasaki *United States*

Jing Yang

Peoples Republic of China

Heidemarie Zach

Austria



MDS 19th International Congress Session Definitions

Blue Ribbon Highlights

This session will provide a critical review of the best poster presentations by a panel of experts, highlighting the relevance, novelty and quality of both clinical and basic research presented by the delegates.

Controversies

This Plenary Session is designed to involve all International Congress attendees. Content is prepared to stimulate interest and debate among a panel of experts. Views from several angles will be addressed as discussion of pre-selected "hot" topics will be open for debate among the panelists.

Corporate Therapeutic Sessions

These company-based informational sessions will provide attendees with non-CME educational opportunities to learn the latest in therapeutics.

Guided Poster Tours

Guided Poster Tours will give small groups of delegates an opportunity to hear discussion on a select group of abstracts in several sub-categories.

Parallel Sessions

These concurrent sessions provide an in-depth report of the latest research findings, state-of-the-art treatment options, as well as a discussion of future strategies. Parallel sessions will have evidence-based components and incorporate the "hot" issues in Parkinson's disease and other movement disorders.

Plenary Sessions

These sessions provide a broad overview of the latest clinical and basic science research findings and state-of-the-art information.

Poster Sessions

Poster sessions give each delegate an opportunity to view their colleagues' posters on the most current research in the field of Movement Disorders. Authors will be present for 1.5 hours each day to explain their work and answer questions.

Skills Workshops:

These clinic-based training sessions provide an educational illustration of clinical techniques and treatment procedures through demonstrations utilizing patient video and proper equipment to further develop practitioners' skills and knowledge within the field of treatment of movement disorders.

Teaching Courses

These educational sessions provide up-to-date information focused on a single topic. The sessions highlight both the clinical and basic science of topics of relevance to Movement Disorder specialists. The sessions are unique in providing a syllabus that includes a review of the topic and the presentation slides. In addition, these programs provide ample time for questions and a discussion period at the conclusion of the presentations.

Therapeutic Plenary Sessions

These sessions provide the latest information regarding the scientific and clinical evidence supporting treatment options for Parkinson's disease and other movement disorders.

Video Sessions

Designed to provide a broad overview of related movement disorders, the video sessions will focus on the phenomenology covering the many different kinds of movement disorders affecting the population today.

SPECIAL MEETING THEME:

MULTI-SYSTEM PROTEINOPATHIES: FROM PARADIGM SHIFT TO THERAPY

At each annual International Congress, the Congress Scientific Program Committee selects a theme that is highlighted throughout the meeting. This year's theme, "Multi-system proteinopathies: From paradigm shift to therapy" will be showcased in two Plenary Sessions, six Parallel Sessions, one Skills Workshop, one Video Session, and one Teaching Course. International experts will serve as faculty, and the meeting participants can elect to attend any or all of these sessions. Themed sessions are designated in the program with a ...



Schedule-At-A-Glance

	Sunday, Jur	ne 14, 2015	Mono	Monday, June 15, 2015 Tuesday, June 16, 2015		ne 16, 2015	Wednesday, June 17, 2015		Thursday, June 18, 2015
7:00 7:30		e Meetings - 8:00	Committee Meetings 7:00 - 8:00		Committee Meetings 7:00 - 8:00		Committee Meetings 7:00 - 8:00		Committee Meetings 7:00 - 8:00
8:00	_	_	7.00 0.00						
8:30	30 Therapeutic Plenary Session 8:00 - 10:00		Plenary Session (Presidential Lectures) 8:00 - 10:00		Plenary Session 8:00 - 10:00		Plenary Session 8:00 - 10:00		Plenary Session
9:00									8:00´ - 9:30
9:30									Break 9:30 - 10:00
10:00				Break	MDS Business		Break		
10:30		Regional Assemblies 10:00 - 11:00		10:00 - 10:30	Break 10:00 - 11:00	Meeting 10:00 - 11:00		10:00 - 10:30	Controversies 10:00 - 11:00
11:00				Plenary Session 10:30 - 12:30				Plenary Session 10:30 - 12:00	Blue Ribbon Highlights
11:30	Therapeut				Plenary Session 11:00 - 12:30			10.50 12.00	11:00- 12:00
12:00		sion - 13:00						Break/Guided Poster	
12:30			Pavilion	Break/Guided Poster	ours/ Poster Sessions Sessions 12:30 - 14:00		Science and Technology Pavilion 10:00 - 17:00	Tours/ Poster Sessions 12:00 - 13:30	Break/Guided Poster Tours/ Poster Sessions 12:00 - 13:30
13:00	Corporate		nology 17:00	Tours/ Poster Sessions					
13:30	Therapeutic Symposium	Therapeutic Break Symposium 13:00 - 14:30	Science and Technology Pavilion 10:00 - 17:00	12:30 - 14:00				Corporate Therapeutic Symposia 13:30 - 14:30	Corporate Therapeutic Symposia
14:00	13:15 - 14:15		Science	Corporate Therapeutic Symposia	Corporate Therapeutic Symposia 13:45-15:00 Break 15:00 - 15:30				13:30 - 14:30
14:30				14:00 - 15:00				Break 14:30 - 15:00	Break 14:30 - 15:00
15:00		tic Plenary sion		Break 15:00 - 15:30				Parallel Sessions/ Teaching Courses	Parallel Sessions/ Teaching Courses
15:30		- 16:30							
16:00				Parallel Sessions/ Teaching Courses	Parallel Sessions/ Teaching Courses 15:30 - 17:30			15:00 - 17:00	15:00 - 17:00
16:30		Break 16:30 - 17:00		15:30 - 17:30					
17:00								Break 17:00 - 17:30	End
17:30				Break 17:30 - 18:00	Break 17:30 - 18:00		Skills Workshops/ Video Sessions 17:30 – 19:00		
18:00				Skills Workshops/	Skills Workshops /				
18:30			Video Sessions 18:00 - 19:30	Video Sessions 18:00 - 19:30				回船等回	
19:00		eak - 19:30							33,223
19:30									直接等
20:00	Welcome Ceremony 0:30 19:30 - 21:30			Corporate Therapeutic Symposia 19:45- 20:45		MDS Video Challenge 19:00 - 22:00		Scan to learn	
20:30								more on our	
21:00								website!	
21:30									
22:00									



Sunday, June 14, 2015

1101 Therapeutic Plenary Session

Managing Parkinson's disease: Past, present and future

8:00 - 10:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Olivier Rascol Toulouse, France

Lynn Rochester

Newcastle upon Tyne, United Kingdom

8:00 Treatment approach to Parkinson's disease: A 25-year

historical perspective Werner Poewe

Innsbruck, Austria
8:40 Medical and surgical t

:40 Medical and surgical treatment of Parkinson's disease

Alexander Storch Dresden, Germany

9:20 Rehabilitation therapies for

Parkinson's disease Lynn Rochester

Newcastle upon Tyne, United Kingdom

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe the most important steps in the historical development towards the therapy of today
- Discuss medical and surgical therapy for Parkinson's disease for motor symptoms; focus on present and possible future developments
- 3) Discuss rehabilitation and exercise therapy

AOS Regional Assembly

10:00 - 11:00

Location: Harbor A, 2nd Level,

Harbor Tower

All delegates from Asia and Oceania are encouraged to attend.

ES Regional Assembly

10:00 - 11:00

Location: Harbor B, 2nd Level,

Harbor Tower

All delegates from Europe and North Africa are encouraged to attend.

PAS Regional Assembly

10:00 - 11:00

Location: Harbor C, 2nd Level, Harbor Tower

All delegates from Pan America are encouraged to attend.

1102 Therapeutic Plenary Session

Treatment of dystonia 11:00 - 13:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Cynthia Comella

Chicago, IL, USA Victor Fung

VICTOR LANG

Sydney, NSW, Australia

11:00 The spectrum of isolated and

combined dystonia syndromes

Victor Fung

Sydney, NSW, Australia

11:40 Update on medical and surgical

treatment of the dystonias

Marie Vidailhet

Paris, France

12:20 New and emerging therapies for dystonia

Susan Fox

Toronto, ON, Canada

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Recognize the full spectrum of isolated and combined dystonia syndromes
- 2) Recognize state-of-the-art in the medical and surgical treatment of the dystonias
- 3) Recognize novel and experimental treatments for dystonia under development

1103 Therapeutic Plenary Session

Therapeutic options for mood, cognition and psychosis in Parkinson's disease

14:30 - 16:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Jaime Kulisevsky

Barcelona, Spain Daniel Weintraub Ardmore, PA, USA

14:30 How to treat anxiety, depression

and apathy Daniel Weintraub Ardmore, PA, USA

15:10 How to treat the Parkinson's disease patient with cognitive

impairment Jaime Kulisevsky Barcelona, Spain

15:50 How to treat the Parkinson's disease patient with psychosis

Mateusz Zurowski
Toronto, ON, Canada

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Understand the issues involved in selecting the best options for treating mood disorders and apathy in Parkinson's disease
- 2) Review treatment of cognitive impairment in Parkinson's disease
- 3) Evaluate treatment of psychosis in Parkinson's disease



Sunday, June 14, 2015

1104 Therapeutic Plenary Session

Update on treatment of hyperkinetic movement disorders

17:00 - 19:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Alfredo Berardelli

Rome, Italy
Philip Thompson
Adelaide, SA, Australia

17:00 Huntington's disease: From

natural history studies to experimental therapeutics

Ira Shoulson Washington DC, USA

17:40 Myoclonus: Etiology,

pathophysiology and treatment

Robert Chen Toronto, ON, Canada

18:20 Update on Gilles de la Tourette

syndrome and other tic disorders

Davide Martino Orpington, United Kingdom

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand the natural history and emerging therapies for Huntington's disease
- 2) Understand the pathophysiological basis and treatment of myoclonus
- Understand the pathophysiological basis and treatment of Gilles de la Tourette syndrome and other tic disorders

Welcome Ceremony

19:30 - 21:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower





2101 **Plenary Session Presidential Lectures** 8:00 - 10:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower Chairs: Matthew Stern Philadelphia, PA, USA Oscar Gershanik Buenos Aires, Argentina 8:00 Stanley Fahn Lecture Günther Deuschl Kiel, Germany Junior Award Lectures Md. Mashiar Rahman Jeonju-si, Jeollabuk-Do, Korea Carine Maurer Bethesda, MD, USA Bettina Balint London, United Kingdom 9:30 C. David Marsden Lecture José Obeso Madrid, Spain

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

2102 **Plenary Session**

25 years of Movement **Disorders - Movement Disorders Grand Rounds** 10:30 - 12:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

In this interactive session, our expert MDS founders will examine interesting common and complex patients. During this session, vou will learn how they formulate diaanoses and manage these interesting and challenging patients.

Jennifer Friedman Chairs:

Del Mar. CA. USA Irene Litvan

San Diego, CA, USA

MDS Experts:

Stanley Fahn New York, NY, USA Joseph Jankovic Houston, TX, USA Andrew Lees London, United Kingdom Eduardo Tolosa

Barcelona, Spain

2102 Plenary Session, cont.

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand how our founder experts use clinical history and signs to formulate their diagnosis in complex movement disorder cases
- 2) Understand how our founders use paraclinical methods to diagnose complex movement disorders
- 3) Understand how our founders formulate therapies for complex movement disorder patients

Guided Poster Tours

GPT 1: Parkinson's disease: Phenomenology

12:30 - 14:00

Location: Seaport F, 2nd Level, **Seaport Tower**

GPT 2: Sleep disorders and **RLS**

12:30 - 14:00

Location: Harbor A, 2nd Level, **Harbor Tower**

GPT 3: Tremor 12:30 - 14:00

Location: Harbor B-C, 2nd Level, Harbor Tower

GPT 4: Parkinson's disease: Non-motor features

12:30 - 14:00

Location: Harbor G, 2nd Level, **Harbor Tower**

Poster Session

12:30 - 14:00

Abstract nubers: 1-374 See page 16 for category locations. Poster viewing: 9:00 - 18:00

Corporate Therapeutic Symposia

14:00 - 15:00

See pages 126 - 127 for more information.

2203 Parallel Session TICKET



Chronic traumatic encephalopathy and movement disorders

15:30 - 17:30

Location: Harbor A, 2nd Level, **Harbor Tower**

Chairs: **Andrew Lees**

London, United Kingdom

Tamas Revesz

London, United Kingdom

Movement disorders as a 15:30 presentation of chronic traumatic

encephalopathy Helen Lina

London, United Kingdom

16:10 Boxing and parkinsonism

Charles Bernick Las Vegas, NV, USA

Chronic traumatic 16:50

encephalopathy: The spectrum of neuropathological changes Tamas Revesz

London, United Kingdom

Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/ Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand movement disorders as a presentation of chronic traumatic encephalopathy
- 2) Learn about the association between repetitive traumatic brain injury and Parkinson's disease
- 3) Discuss the spectrum of neuropathological changes in chronic traumatic encephalopathy

Parallel Session TICKET 2204





Designing a clinical trial for atypical parkinsonian disorders

15:30 - 17:30

Location: Seaport F, 2nd Level, **Seaport Tower**

Chairs: **Christopher Goetz** Chicago, IL, USA **Gregor Wenning** Innsbruck, Austria

15:30 Outcome of clinical trials in MSA

> **Gregor Wenning** Innsbruck, Austria



2204	Parallel Session (TICKET) (7), cont
16:10	Outcome of clinical trials in PSP and CBD Adam Boxer Palo Alto, CA, USA
16:50	Overcoming challenges in clinical trial design in atypical parkinsonian disorders Christopher Goetz Chicago, IL, USA

Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand what we have learned from prior clinical trials in MSA
- Understand what we have learned from prior clinical trials in progressive supranuclear palsy and other uncommon tauopathies (corticobasal degeneration)
- 3) Understand the unique challenges of clinical trial design for atypical parkinsonian disorders and learn novel clinical trial paradigms to address limitations in identifying efficacious therapies

2205 Parallel Session TICKET

What's new in essential and non-essential tremor? 15:30 – 17:30

Location: Harbor D-F, 2nd Level, Harbor Tower

Chairs: Mark Hallett

Bethesda, MD, USA Hyder Jinnah Atlanta, GA, USA

15:30 Parkinson's disease tremor

Rick Helmich

Nijmegen, Netherlands

16:10 Essential tremor

Fatta Nahab San Diego, CA, USA

16:50 Dystonic tremor

Hyder Jinnah Atlanta, GA, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

2205 Parallel Session (TICKET), cont.

At the conclusion of this session, participants should be better able to:

- Understand the most recent advances in the pathophysiology and diagnosis of Parkinson's disease tremor
- 2) Understand the most recent advances in the pathophysiology and diagnosis of essential tremor
- 3) Understand the most recent advances in the pathophysiology and diagnosis of dystonic tremor

2206 Parallel Session TICKET

Gastrointestinal dysfunction in Parkinson's disease 15:30 – 17:30

Location: Seaport G-H, 2nd Level, Seaport Tower

Chairs: Ronald Pfeiffer Memphis, TN, USA Barbara Sonies Potomac, MD, USA

15:30 Pathophysiology of gastrointestinal dysfunction in

parkinsonism Ronald Pfeiffer Memphis, TN, USA

16:10 Management of dysphagia and upper gastrointestinoal dysfunction
Barbara Sonies
Potomac, MD, USA

16:50 Management of bowel dysfunction in parkinsonism
Sarah Marrinan
Newcastle upon Tyne, United Kingdom

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Be aware of the pathophysiological basis for gastrointestinal dysfunction in Parkinson's disease at all levels of the gastrointestinal tract
- Identify the most important management strategies for dysphagia and upper gastrointestinal tract in Parkinson's disease
- 3) Identify the most important management strategies for bowel dysfunction in parkinsonism

2207 Parallel Session TICKET

Environmental risk factors in Parkinson's disease

15:30 – 17:30

Location: Harbor G, 2nd Level, Harbor Tower

Chairs: Caroline Tanner

San Francisco, CA, USA Ruey-Meei Wu Taipei, Taiwan

15:30 Epidemiological evidence linking environmental and lifestyle risk factors in Parkinson's disease

Caroline Tanner

Caroline Tanner
San Francisco, CA, USA

16:10 Military service and neurodegenerative diseases

John Duda

Philadelphia, PA, USA

16:50 Gene environmental interactions in neurodegenerative diseases:

Clinical association and mechanisms
Ruey-Meei Wu
Taipei, Taiwan

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Understand the epidemiological evidence linking environmental and lifestyle risk factors and neurodegenerative diseases
- 2) Evaluate the potential for military service to act as a risk factor for neurodegenerative disease
- Comprehend the pathophysiologic mechanisms underlying gene environmental interactions and neurodegenerative diseases

2208 Parallel Session TICKET

New technologies in evaluation of treatment of movement disorder patients 15:30 – 17:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Bastiaan Bloem
Nijmegen, Netherlands
Alberto Espay
Cincinnati, OH, USA



2208	Parallel Session (TICKET), cont.
15:30	Instrumental analysis of tremor Rodger Elble Springfield, IL, USA
16:10	Instrumental analysis of parkinsonian symptoms Walter Maetzler Tübingen, Germany
16:50	Instrumental analysis of gait and postural reflexes Alice Nieuwboer <i>Heverlee, Belgium</i>
_	

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand the methods for the measurement and diagnosis of tremor
- Understand the new methods to measure motor fluctuations in Parkinson's disease from the clinic to the home
- 3) Understand instrumental analysis of gait from the clinic to the home

Non-motor complications of Parkinson's disease 15:30 – 17:30

Location: Harbor H-I, 2nd Level, Harbor Tower

Chairs: Wolfgang Oertel *Marburg, Germany*Anthony Schapira *London, United Kingdom*

15:30 Prevalence and tools to assess non-motor features of early and advanced Parkinson's disease K. Ray Chaudhuri

London, United Kingdom

Autonomic and sleep disor

16:10 Autonomic and sleep disorders: Diagnosis and treatment Claudia Trenkwalder Kassel, Germany

16:50 Cognitive and neuropsychiatric issues

Caroline Williams-Gray
Cambridge, United Kingdom

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

2309 Teaching Course TICKET, cont.

At the conclusion of this session, participants should be better able to:

- Describe the frequency of occurrence of nonmotor disorders in early and advanced Parkinson's disease as well as best tools to assess these disorders
- 2) Discuss the autonomic and sleep issues in Parkinson's disease, how to assess and treat
- Understand how to assess and manage cognitive decline, depression, anxiety, and impulse control symptoms in Parkinson's disease

2310 Teaching Course TICKET

Tips and tricks in movement disorders examination 15:30 – 17:30

Location: Harbor B-C, 2nd Level, Harbor Tower

Chairs: Paul Greene
New York, NY, USA
Ryosuke Takahashi
Kyoto, Japan

15:30 Examination pearls in parkinsonism
Sean O'Sullivan
Cork, Ireland

16:10 Examination tips in tremor Nin Bajaj Nottingham, United Kingdom

16:50 Examination highlights in hyperkinetic movement disorders Paul Greene
New York, NY, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Identify key characteristics of different parkinsonian conditions through the clinical examination
- 2) Utilize a range of semiologic maneuvers to examine, characterize and differentiate tremors
- Use strategic examination techniques to assist in the differential diagnosis of hyperkinetic movement disorders

2411 Skills Workshop TICKET

Conquest of Wilson's disease 18:00 - 19:30

Location: Harbor A, 2nd Level, Harbor Tower

This interactive session will have didactic and video-interactive components that deal with Wilson's disease diagnosis and therapeutic advances.

Annu Aggarwal *Mumbai, India* Egberto Barbosa *São Paulo, Brazil*

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Clinically recognize and diagnose Wilson's disease
- 2) Understand how to apply therapy in Wilson's disease in order to reduce morbidity and mortality
- Understand how recent advances in the pathophysiology of Wilson's disease guide therapy

2412 Skills Workshop TICKET

DBS for non-parkinsonian movement disorders

18:00 - 19:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

This interactive session will have didactic and video-interactive components that deal with optimization of the postoperative management of non-parkinsonian movement disorders.

Patricia Limousin London, United Kingdom Michele Tagliati Los Angeles, CA, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Resolve postoperative problems occurring in DBS for non-Parkinson's disease movement disorders
- 2) Recognize limitations of DBS in non-Parkinson's disease movement disorders
- 3) Optimize the management of DBS patients after surgery



2413 Skills Workshop TICKET

Pain in Parkinson's disease 18:00 – 19:30

Location: Harbor D-F, 2nd Level, Harbor Tower

This interactive session will focus on learning about the latest advances related to the issue of pain in Parkinson's disease, including how to classify the various types of pain in Parkinson's disease, what is Parkinson's disease related and what is not, the description of scales that may be appropriate to use in Parkinson's disease studies including Parkinson's disease specific pain scales, the prevalence of pain in Parkinson's disease and treatment advances and relevant pain focused clinical trials.

Santiago Perez Lloret Buenos Aires, Argentina Michele Tinazzi Verona, Italy

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Recognize the different types of chronic pain suffered by Parkinson's disease patients and not consider "pain" as a non-heterogeneous concept in Parkinson's disease
- Recognize what may be the base bedside and other instruments to lend clarity to the concept of pain in Parkinson's disease and describe role of validated instruments for pain in Parkinson's disease if any
- 3) Identify a rational and classification based management strategy for pain in Parkinson's disease and address treatment based on origin of pain and also learn regarding emerging clinical trials addressing pain in Parkinson's disease

2414 Skills Workshop TICKET

Moving at night: RLS, RBD and other movement disorders in sleep 18:00 – 19:30

Location: Seaport G-H, 2nd Level, Seaport Tower

This interactive session is designed to introduce attendees to the main motor sleep disorders in the setting of patients with movement disorders (e.g., Parkinson's disease, multiple system atrophy, dementia with Lewy bodies, restless legs syndrome). The aim is to provide an overview of sleep in REM Sleep Behavior Disorder and restless legs syndrome including periodic limb movements, which overlap with many neurodegenerative disorders. Participants will learn about these phenomenons and syndromes by video presentations and practical examples given by sleep and movement specialists.

William Ondo Houston, TX, USA Federica Provini Bolana, Italy

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Identify signs and symptoms of restless legs syndrome, periodic limb movements and their nighttime appearance
- Distinguish REM Sleep Behavior Disorder from other sleep disorders and explain its importance for neurodegeneration
- 3) Further understand movement disorders in sleep such as REM and non-REM parasomnias

2415 Skills Workshop TICKET

Mirror and motor overflow movements

18:00 – 19:30 Location: Seaport F, 2nd Level, Seaport Tower

In this interactive session, participants will be able to recognize mirror and other motor overflow movements, understand their basis and mechanism, and learn the genetic, congenital and acquired causes.

Massimo Cincotta Florence, Italy Emmanuel Roze Paris, France

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Identify the phenomenology of physiological and pathological mirror and other motor overflow movements
- 2) Understand the neurobiology and pathophysiology of mirror and other motor overflow movements
- Have a knowledge of the genetic, congenital, and range of acquired causes, including movement disorders, of mirror and other motor overflow movements



Monday, June 15, 2015

2516 Video Session TICKET

What if it's not Huntington's disease?

18:00 - 19:30

Location: Harbor H-I, 2nd Level, Harbor Tower

In this interactive video session, participants will improve their skills to recognize the phenomenology of chorea and outline appropriate investigations for the differential diagnosis. The session will focus on the most frequent forms of genetic and acquired chorea.

Anne-Catherine Bachoud-Levi Creteil, France

Joaquim Ferreira Lisbon, Portugal

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Recognize the phenomenology of Huntington's disease and other disorders in which chorea is the main clinical feature
- 2) Recognize the phenomenology of Huntington's disease-like (HDL) syndromes
- 3) Outline appropriate approach and diagnostic work-up for patients with chorea

2517 Video Session TICKET

Pediatric movement disorders

18:00 - 19:30

Location: Harbor G, 2nd Level, Harbor Tower

This interactive session will use an interactive approach with both video and didactic presentations that address the spectrum of movement disorders in the pediatric population.

Jennifer Friedman Del Mar, CA, USA Terence Sanger Los Angeles, CA, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Recognize the spectrum of common movement disorders in children and adolescents
- Recognize the spectrum of uncommon or unusual movement disorders in children and adolescents
- 3) Recognize the diagnostic workup of movement disorders in children and adolescents

2518 Video Session TICKET

Facial movement disorders 18:00 – 19:30

Location: Harbor B-C, 2nd Level, Harbor Tower

In this interactive session, participants will be able to recognize common and rare facial involuntary movements and understand their causes and learn about their underlying pathophysiologic mechanisms.

Carlo Colosimo Rome, Italy Eng-King Tan Singapore

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Understand the phenomenology of different facial movement disorders
- 2) Recognize the association of various movement disorders with neurological diseases
- Understand the pathophysiology and management of the etiology and racial differences in hemifacial spasm





3101 Plenary Session Understanding and treating proteinopathies 8:00 - 10:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower Chairs: Ted Dawson Baltimore, MD, USA Eliezer Masliah La Jolla, CA, USA 8:00 What does genetics tell us about treating proteinopathies?

Ted Dawson Baltimore, MD, USA RNAi and antibody-based 8:40 therapeutic approaches Eliezer Masliah La Jolla, CA, USA

Therapies targeting autophagy in 9:20 movement disorders David Sulzer New York, NY, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe insights from genetic causes into the pathogenesis of sporadic proteinopathies
- 2) Discuss the potential of antibody therapy to slow the progression of tauopathies and synucleinopathies
- 3) Describe the potential of therapies targeting autophagy in movement disorders

MDS Business Meeting

10:00 - 11:00

Location: Seaport F, 2nd Level, **Seaport Tower**

Open to all delegates

Plenary Session 3102

The overlap between epilepsy and movement disorders

11:00 - 12:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Marina de Koning-Tijssen Chairs: Groningen, Netherlands

Sarosh Irani

Oxford, United Kingdom

11:00 Genetic syndromes in the hinterland of epilepsies and movement disorders Marina de Koning-Tijssen Groningen, Netherlands

Autoimmune syndromes in the 11:40 hinterland of epilepsies and movement disorders

Sarosh Irani Oxford, United Kingdom

Role of channelopathies in 12:20 epilepsy and movement disorders Holger Lerche

Ulm, Germany

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe the genetic associations and clinical features of disorders which show features of both epilepsies and movement disorders
- 2) Describe the clinical features, phenomenological and treatment responses of patients with antibody mediated syndromes which show features of movement disorders and epilepsies
- 3) Correlate the pathophysiology of these disorders with channel and cellular defects and compare and contrast the disorders with one another at the molecular level

Guided Poster Tours

GPT 5: Lewy body dementia & Dementias 12:30 - 14:00

Location: Seaport F, 2nd Level, **Seaport Tower**

Guided Poster Tours, cont.

GPT 6: Huntington's disease and other choreiform disorders

12:30 - 14:00

Location: Harbor A, 2nd Level, **Harbor Tower**

GPT 7: Rating Scales

12:30 - 14:00

Location: Harbor B-C, 2nd Level,

Harbor Tower

GPT 8: Genetics 12:30 - 14:00

Location: Harbor G, 2nd Level,

Harbor Tower

Poster Session

12:30 - 14:00

Abstract nubers: 375-740 See page 16 for category locations. Poster viewing: 9:00 - 18:00

Corporate Therapeutic Symposia

13:45 - 15:00 14:00 - 15:00

See pages 126 – 127 for more information.

3203

Parallel Session TICKET



Is there a role for therapies with human-inducedpluripotent stem cellsderived (hiPSC) neurons in patients with Parkinson's disease and Huntington's disease? 15:30 - 17:30

Location: Harbor G, 2nd Level, **Harbor Tower**

Chairs: William Mobley La Jolla, CA, USA Ole Isacson Belmont, MA, USA

Isogenic human-induced-15:30 pluripotent stem cells for studying Parkinson's disease **Stuart Lipton**

La Jolla, CA, USA



3203	Parallel Session (TICKET) (, cont.
16:10	Human-induced-pluripotent stem cells and human embryonic stem cell-based therapies in Parkinson's disease Ole Isacson Belmont, MA, USA
16:50	Human-induced-pluripotent stem cells in Huntington's disease Steven Finkbeiner San Francisco, CA, USA

Recommended Audience: Basic scientists, Clinical academicians

At the conclusion of this session, participants should be better able to:

- 1) Understand the role of human-inducedpluripotent stem cells in studying the pathogenesis and developing treatments for Parkinson's disease
- 2) Understand the cell biology discovery, diagnosis and transplantation of dopaminergic cells differentiated from patient-derived iPS cells or human ES Cells for Parkinson's disease
- 3) Understand the role of using human-inducedpluripotent stem derived neurons in Huntington's disease

Parallel Session TICKET 3204



Genetics of proteinopathyassociated parkinsonian disorders

15:30 - 17:30

Location: Harbor D-F, 2nd Level,

Harbor Tower

Chairs: Don Cleveland La Jolla, CA, USA

> **Eng-King Tan** Singapore

15:30 Utility of next generation sequencing in the diagnosis of parkinsonian disorders

> Andrew Singleton Bethesda, MD, USA

Clinico-genetic correlations in 16:10

parkinsonian disorders Zbigniew Wszolek

Jacksonville, FL, USA

16:50 Therapeutic strategies in genetic forms of proteinopathies

> Don Cleveland La Jolla, CA, USA

3204 Parallel Session TICKET





Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/ **Trainees**

At the conclusion of this session, participants should be better able to:

- 1) Understand the clinical utility and future application of next generation diagnostics in deciphering the genetics of proteinopathies
- 2) Appreciate the relevance of clinico-genetic correlations in proteinopathy associated neurodegenerative movement disorders
- 3) Understand different therapeutic strategies in genetic forms of proteinopathies

3205 Parallel Session TICKET

What's new in Huntington's disease?

15:30 - 17:30

Location: Seaport F, 2nd Level, **Seaport Tower**

Chairs: Michael Levine Los Angeles, CA, USA Cristina Sampaio

Princeton, NJ, USA

15:30 Biomarkers of pre-manifest and manifest Huntington's disease: Ready for clinical trials?

> Ralf Reilmann Münster, Germany

16:10 From pathophysiology to new treatment strategies: Insights

from the laboratory and animal models Michael Levine

Los Angeles, CA, USA

Update on disease modifying and 16:50 symptomatic treatments

> Cristina Sampaio Princeton, NJ, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

Parallel Session TICKET, cont. 3205

At the conclusion of this session, participants should be better able to:

- 1) Discuss biomarkers of pre-manifest and manifest Huntington's disease their role as potential outcomes of clinical trials in Huntington's disease
- 2) Assess the contribution of preclinical research to understand pathophysiology and to study new treatment strategies in Huntington's disease
- 3) Describe current achievements in and future options for the treatment of Huntington's disease

3206 Parallel Session TICKET

Integrated care models in Movement Disorders: Past, present and future 15:30 - 17:30

Location: Seaport G-H, 2nd Level, **Seaport Tower**

Chairs: David John Burn

Newcastle upon Tyne, United Kingdom

Sue Thomas

London, United Kingdom

15:30 The history of interdisciplinary care in Parkinson's disease and

other movement disorders

Sue Thomas

London, United Kingdom

16:10 Developments in interdisciplinary care: What have we achieved so

far?

Galit Kleiner-Fisman Toronto, ON, Canada

What does the future hold for 16:50 interdisciplinary care?

David John Burn

Newcastle upon Tyne, United Kingdom

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees



Parallel Session TICKET, cont. 3206

At the conclusion of this session, participants should be better able to:

- 1) Appreciate the roots and development of interdisciplinary care in Parkinson's disease and other movement disorders from a worldwide perspective
- 2) Understand the current status and evidence of interdisciplinary care in Parkinson's disease and other movement disorders within a wide geographical context
- 3) Be appraised of potential future developments in interdisciplinary care and how this may change practice

3207 Parallel Session TICKET

Dopa-responsive dystonia and related disorders 15:30 - 17:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Beom Jeon Seoul, Korea Manju Kurian London, United Kingdom

15:30 Clinical spectrum of dystonias that are responsive to dopaminerelated drugs

Beom Jeon Seoul, Korea

16:10 Laboratory investigation of dystonias that are responsive to

dopamine-related drugs

Manju Kurian London, United Kingdom

Treatments, long-term outcomes, 16:50 and strategies for complications

Anne Weissbach Lübeck, Germany

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Appreciate the clinical and genetic spectra of dystonias that are responsive to levodopa
- 2) Understand genotype-phenotype correlations and differnet pathogenesis
- 3) Appreciate strategies for diagnostic testing and treatment

Parallel Session TICKET 3208

Gaucher and Parkinson's disease: Lessons from an unexpected link 15:30 - 17:30

Location: Harbor A, 2nd Level, Harbor Tower

Chairs: Roy Alcalay New York, NY, USA Anthony Schapira London, United Kingdom

15:30 Parkinson's disease penetrance and phenotype in GBA carriers Rov Alcalav

New York, NY, USA

16:10 Pathophysiological mechanisms linking Parkinson's disease and Gaucher's disease

Kathrin Brockmann Tübingen, Germany

16:50 Prospects for therapy Anthony Schapira London, United Kingdom

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe the Parkinson's disease phenotype of carriers and understand the risk of conversion in carriers of GBA mutations
- 2) Understand the pathophysiology that may link Parkinson's disease and Gaucher's disease
- 3) Discuss potential new therapies for Parkinson's disease focused on the glucocerebrosidase pathway

Teaching Course TICKET 3309

Diagnosis and treatment of atypical parkinsonism 15:30 - 17:30

Location: Harbor H-I, 2nd Level, **Harbor Tower**

Chairs: Lawrence Golbe New Brunswick, NJ, USA

> Günter Höglinger Munich, Germany

15:30 Clinical "red flag" signs for the diagnosis of MSA and PSP/CBD

> Yvette Bordelon Los Angeles, CA, USA

3209 Teaching Course [TICKET], cont.

16:10 Laboratory investigations supporting the diagnosis of MSA and PSP/CBD

Günter Höglinger Munich, Germany

Treatment options and their 16:50 evidence

Lawrence Golbe New Brunswick, NJ, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Distinguish MSA and PSP/CBD from other parkinsonian disorders including Parkinson's disease
- 2) Describe clinical diagnosis criteria and laboratory investigations
- 3) Discuss therapeutic options for MSA and PSP/CBD based on available evidence

Teaching Course TICKET 3310

Management misadventures in Movement Disorders 15:30 - 17:30

Location: Harbor B-C, 2nd Level, **Harbor Tower**

Chairs: Kelly Foote Gainesville, FL, USA Jorge Juncos

Atlanta, GA, USA Pitfalls in the management of 15:30

Parkinson's disease

Jorge Juncos Atlanta, GA, USA

Preventable iatrogenic errors in 16:10 movement disorders

> John O'Sullivan Coorparoo, QLD, Australia

16:50 Surgical mismanagement of Parkinson's disease and dystonia Kelly Foote

Gainesville, FL, USA

Recommended Audience: Clinical academicians, Practitioners, Students/Residents/Trainees



Teaching Course TICKET, cont. 3310

At the conclusion of this session, participants should be better able to:

- 1) Recognize the capacity of the standard Parkinson's disease pharmacotherapy to harm when inappropriately chosen or not chosen
- 2) Highlight preventable management errors in a variety of movement disorders to avoid replacing the original disability with a clinician-induced one
- 3) Review pitfalls in the surgical management of Parkinson's disease and other diseases to limit suboptimal outcomes

Skills Workshop TICKET 3411

The clinician loses his balance: How to approach genetic and non-genetic ataxia

18:00 - 19:30

Location: Harbor H-I, 2nd Level, **Harbor Tower**

In this interactive session, which will be illustrated with video examples, participants will be instructed on the use of clinical, radiological and genetic tools to investigate different forms of ataxia.

Pramod Pal Bangalore, India Massimo Pandolfo Brussels, Belgium

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Use a logical clinical diagnostic approach to distinguish genetic ataxia from non-genetic ataxia
- 2) Examine and patient with loss of balance and recognize the phenomenology of ataxia and distinguish ataxia from vestibular dysfunction
- 3) Use laboratory, genetic and imaging studies to identify the different forms of ataxia in a logical structured fashion in the diagnosis of ataxia

3412 Skills Workshop TICKET

Practical issues in using neuroimaging in Movement Disorders: What, when, why 18:00 - 19:30

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

In this interactive session, an approach to the use and application of neuroimaging for diagnosis and management of movement disorders will be presented.

Danna Jennings New Haven, CT, USA

Klaus Seppi Innsbruck, Austria

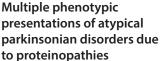
Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe the neuroimaging techniques used in the field of movement disorders
- 2) Develop a strategy for when to order specific tests and which tests to order in clinical practice to aid in the diagnosis of movement disorders
- Describe the typical neuroimaging patterns that are typical of movement disorders that will be encountered regularly in clinical practice

3513 Video Session TICKET





18:00 - 19:30

Location: Harbor B-C, 2nd Level, **Harbor Tower**

In this interactive session, participants will be able to recognize classical and more recently-described phenotypes of atypical parkinsonian disorders.

Giovanni Fabbrini Rome, Italy

Irene Litvan

San Diego, CA, USA

Recommended Audience: Clinical academicians, Practitioners, Students/Residents/Trainees

Video Session TICKET





At the conclusion of this session, participants should be better able to:

- 1) Identify the common and rare forms of tauopathies
- 2) Identify the common and rare forms of synucleinopathies
- 3) Understand what investigations can help differentiate between tauopathies and synucleinopathies

3514 Video Session TICKET

Psychogenic movement disorders

18:00 - 19:30

Location: Seaport F, 2nd Level, **Seaport Tower**

In this video session, participants will learn about clinical features useful in the assessment of patients with a possible diagnosis of a psychogenic movement disorder.

Kailash Bhatia London, United Kingdom Francesca Morgante Messina, Italy

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Appreciate the clinical characteristics of hyperkinetic psychogenic movement disorders
- 2) Recognize the clinical signs of psychogenic parkinsonism and other hypokinetic psychogenic movement disorders
- 3) Understand common social, psychological, medical, and legal circumstances associated with the appearance of psychogenic movement disorders



3515 Video Session TICKET

Tics and stereotypies from childhood to adulthood 18:00 - 19:30

Location: Harbor A, 2nd Level, Harbor Tower

This interactive session will feature videobased, case-oriented content differentiating tics vs. stereotypies and new subtypes of both these movements. Included are strategies in the pharmacological, psychological and behavioral approaches in the management of tics and stereotypies.

Tammy Hedderly West Sussex, United Kingdom

Mayur Pandya Cleveland, OH, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Recognize key terminology and differentiating factors of tics vs. stereotypies, including updates on new subtypes of both these movements
- Recognize how phenomenology and symptoms vary through transition and recognize the signs and cognitive features within a biopsychosocial model
- Develop pharmacological, psychological and behavioral approaches in the management of tics and stereotypies

HEALTHCARE PROFESSIONALS NETWORKING OPPORTUNITY

(Open to all attendees)

Tuesday, June 16, 2015 13:00 – 14:00

Location: Harbor H-I, 2nd Level, Harbor Tower

Join the Health Professionals (Non-Physician) Special Interest Group (SIG) as they discuss exciting updates going on around the world, meet the SIGs Leadership, and discuss the current trends in the field.

3516 Video Session TICKET

Unusual presentation of common movement disorders

18:00 - 19:30

Location: Harbor D-F, 2nd Level, Harbor Tower

In this interactive session, participants will be better able to recognize the spectrum of unusual presentations of common movement disorders, distinguish them from other less common disorders, and discuss the pragmatic diagnostic work-up in such patients.

Michael Hayes Concord, NSW, Australia Stephen Reich Baltimore, MD, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Recognize the phenotypic spectrum of unusual presentations of common movement disorders
- 2) Contrast these presentations with comparable presentations in uncommon movement disorders
- Be familiar with the pragmatic diagnostic workup in patients with an unusual presentation of a common movement disorder

3517 Video Session TICKET

Unusual gait disorders 18:00 – 19:30

Location: Seaport G-H, 2nd Level, Seaport Tower

In this video session, participants will learn how to clinically analyze gait and learn how to diagnose unusual gait disorders and their disease associations.

Bastiaan Bloem Nijmegen, Netherlands Alfonso Fasano Toronto, ON, Canada

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

3517 Video Session TICKET, cont.

At the conclusion of this session, participants should be better able to:

- 1) Understand the different components of normal gait
- 2) Understand how to evaluate gait disorders by breaking down the abnormalities into the different components of the gait cycle
- 3) Understand how to diagnose unusual gait disorders and their disease associations

3518 Video Session TICKET

Movement disorder emergencies

18:00 - 19:30

Location: Harbor G, 2nd Level, Harbor Tower

In this interactive session, participants will be better able to recognize the spectrum of acute presentations of Parkinson's disease and other movement disorders, and discuss the pragmatic diagnostic and therapeutic approach in such cases.

Steven Frucht New York, NY, USA Timothy Lynch Dublin, Ireland

Recommended Audience: Clinical academicians, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Identify, diagnose and manage Parkinson's disease related emergencies
- Recognize common and rare hyperkinetic disorders which may present as an acute condition
- 3) Manage all emergencies related to DBS

Corporate Therapeutic Symposia

19:45 - 21:00

See pages 126 – 127 for more information.



4101	Plenary Session (**)
	Proteinopathies: From paradigm shift to diagnosis of parkinsonian disorders 8:00 – 10:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower
Chairs:	C. Warren Olanow New York, NY, USA Werner Poewe
	Innsbruck, Austria
8:00	Prion-like mechanisms in the pathogenesis of parkinsonian disorders C. Warren Olanow New York, NY, USA
8:40	Are we ready for a protein- based clinical classification of parkinsonian disorders? David Williams Brighton, VIC, Australia
9:20	Novel proteinopathy based tracers for diagnosis Makoto Higuchi <i>Chiba, Japan</i>

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Discuss how alpha-synuclein and other misfolded proteins might propagate
- 2) Discuss the concept of a clinical protein-based classification for parkinsonian disorders
- Identify new imaging techniques (tau, alphasynuclein) for protein identification and their use diagnostically

4102 Plenary Session

Breaking news in movement disorders

10:30 - 12:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Anthony Lang Toronto, ON, Canada Ryosuke Takahashi

Kyoto, Japan

10:30 Late-breaking clinical trials and clinical science in Parkinson's

disease Tanya Simuni *Chicago, IL, USA*

11:00 Late-breaking clinical trials and clinical science in other movement disorders

Tiago Mestre Ottawa, ON, Canada

11:30 Late-breaking advances in basic science

D. James Surmeier Chicago, IL, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Review recent advances in the therapy and other clinical aspects of Parkinson's disease
- 2) Provide an update on the progress of therapeutic interventions and other clinical domains for other movement disorders
- Provide an update on the latest advances in basic science related to movement disorders

Guided Poster Tours

GPT 9: Parkinson's disease:

Clinical trials 12:00 – 13:30

Location: Seaport F, 2nd Level, Seaport Tower

GPT 10: Dystonia 12:00 – 13:30

Location: Harbor A, 2nd Level,

Harbor Tower

GPT 11: Surgical therapy of Movement Disorders

12:00 - 13:30

Location: Harbor B-C, 2nd Level,

Harbor Tower

GPT 12: Basic Science

12:00 – 13:30

Location: Harbor G, 2nd Level,

Harbor Tower

Poster Session

12:00 - 13:30

Abstract nubers: 1112 – 1473 See page 16 for category locations.

Late-Breaking and MDS Study Group Abstracts

12:00 - 13:30

Location: Harbor Foyer, 2nd Level

Poster viewing: 9:00 - 18:00

Corporate Therapeutic Symposia

13:30 - 14:30

See pages 126 — 127 for more information.

NFW

How to Publish in *Movement* Disorders Journal and *Movement* Disorders – Clinical Practice Wednesday, June 17, 2015
12:00-13:30

Location: Harbor H-I, 2nd Level, Harbor Tower

Meet the Editors, Associate Editors and members of the Editorial Board for both MDS Journals and learn the process of how decisions are made regarding acceptance of articles, what the timeline for publishing involves, what the difference is between the two journals and the type of articles that are published in each. This is a non-CME activity. Tickets are not required for this event.



4203	Parallel Session (TICKET)	4204	Parallel Session (TICKET), cont.	4205	Parallel Session TICKET, cont.
	Novel biomarkers to differentiate neurodegenerative parkinsonian disorders 15:00 – 17:00 Location: Seaport G-H, 2nd Level, Seaport Tower	15:00 15:40	MCI in Parkinson's disease: Results from the MDS Validation Study Group Jennifer Goldman Chicago, IL, USA Early markers of cognitive decline in Parkinson's disease	16:20	Mendelian genetics does not explain all familial disease: GWAS-environmental studies, epigenetics and single cell genetic variability Haydeh Payami Albany, NY, USA
Chairs:	Werner Poewe Innsbruck, Australia Antonio Strafella Toronto, ON, Canada	16:20	Alice Chen-Plotkin Philadelphia, PA, USA Therapeutic developments in the treatment of cognitive impairment	academic Practition	ended Audience: Basic scientists, Clinical cians, Non-physician Health Professionals, ners, Students/Residents/Trainees nclusion of this session, participants should
15:00	Nuclear imaging to study parkinsonian disorders Antonio Strafella Toronto, ON, Canada		Hubert Fernandez Cleveland, OH, USA ended Audience: Basic scientists, Clinical cians, Non-physician Health Professionals,	be better 1) Provid develo	able to: le an overview of recent and future opments in disease genetics, and tunities associated with these methods
15:40 16:20	MRI to differentiate parkinsonian disorders Stephane Lehéricy Paris, France Biological markers to differentiate	Practitioners, Students/Residents/Trainees At the conclusion of this session, participants should be better able to: 1) Recognize recent data showing the validity and		Compare insights into genotype-phenotype correlations gained from new versus older genetic techniques Discuss the likely long term implication of these	
	parkinsonian disorders Mario Masellis <i>Toronto, ON, Canada</i>		prediction of dementia of MDS Parkinson's disease Mild Cognitive Impairment criteria		Parallel Session (TICKET)
Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/ Trainees At the conclusion of this session, participants should be better able to: 1) Understand how PET imaging is helping to study neurodegenerative movement disorders 2) Understand how structural imaging is helping to differentiate neurodegenerative movement disorders		2) Understand the role of alpha-synuclein and genetics in cognitive decline3) Recognize new developments in the treatment of PD-MCI and dementia			Electrophysiological, morphological and molecular basis of levodopa-induced dyskinesias and their
		4205	Parallel Session TICKET Next generation genetics for clinicians		therapeutic implications 15:00 – 17:00 Location: Harbor G, 2nd Level, Harbor Tower
		cl .	15:00 – 17:00 Location: Seaport F, 2nd Level, Seaport Tower	Chairs:	Erwan Bezard <i>Bordeaux, France</i> Paolo Calabresi
differe	stand about biomarkers helping to Intiate proteinopathies presenting as nent disorders	Chairs:	Thomas Gasser <i>Tübingen, Germany</i> Haydeh Payami <i>Albany, NY, USA</i>	15:00	Rome, Italy Electrophysiological basis Paolo Calabresi Rome, Italy
4204	Parallel Session TICKET Mild cognitive impairment in Parkinson's disease	15:00	The benefits and pitfalls in data interpretation in gene panel and exome sequencing Owen Ross	15:40	Morphological basis Masahiko Tomiyama Aomori, Japan
	15:00 – 17:00 Location: Harbor D-F, 2nd Level, Harbor Tower	15:40	Jacksonville, FL, USA Genotype-phenotype correlations: Insights from the	16:20	Molecular basis Erwan Bezard Bordeaux, France
Chairs:	Hubert Fernandez Cleveland, OH, USA Vincent Filoteo San Diego, CA, USA		new versus old genetics Thomas Gasser Tübingen, Germany		ended Audience: Basic scientists, Clinical cians, Practitioners, Students/Residents/

4206 Parallel Session (TICKET), cont.

At the conclusion of this session, participants should be better able to:

- Describe the pre- and postsynaptic electrophysiological alterations of striatal neural networks in levodopa-induced dyskinesias
- Describe the neuroanatomical changes including those of striatal dendritic spines in levodopainduced dyskinesias
- Describe the molecular basis of levodopa-induced dyskinesia and its therapeutic implications

4207 Parallel Session TICKET

Movement disorders in paraneoplastic and autoimmune disease 15:00 – 17:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Josep Dalmau Philadelphia, PA, USA

Oscar Gershanik
Buenos Aires, Argentina

15:00 Paraneoplastic movement

disorders Jessica Panzer *Philadelphia, PA, USA*

15:40 Sydenham's chorea and systemic

autoimmune disorders Shekeeb Mohammad Wentworthville. NSW. Australia

16:20 Movement disorders associated with antibodies against cell-surface or synaptic proteins

Josep Dalmau Philadelphia, PA, USA

Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand and diagnose paraneoplastic movement disorders
- Recognize the clinical features and pathogenesis of Sydenham's chorea and other systemic autoimmune movement disorders
- Identify the spectrum of movement disorders associated with antibodies against cell-surface and synaptic proteins

4208 Parallel Session TICKET

Movement disorders in the media

15:00 - 17:00

Location: Harbor A, 2nd Level, Harbor Tower

Discussion Panel:

Brandon Barton Chicago, IL, USA Aikaterini Kompoliti Chicago, IL, USA Maria Stamelou Athens, Greece Carolyn Sue Sydney, NSW, Australia

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Recognize how movement disorders are represented in the movies
- 2) Recognize how movement disorders are represented in the news
- Recognize how movement disorders are represented on the internet

4309 Teaching Course TICKET

Cognitive and psychiatric disturbances in atypical parkinsonian disorders 15:00 – 17:00

Location: Harbor H-I, 2nd Level,

Chairs: Murray Grossman
Philadelphia, PA, USA

David Salmon *La Jolla, CA, USA*

15:00 How to test cognition and

behavior Alexander Troster Phoenix, AZ, USA

15:40 Cognitive disturbance in atypical parkinsonian disorders

Murray Grossman Philadelphia, PA, USA

16:20 Psychiatric disturbances in atypical parkinsonian disorders

Javier Pagonabarraga Mora

Barcelona, Spain

4309 Teaching Course TICKET



Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Recognize how to screen, detect, and evaluate cognitive and psychiatric symptoms using the most relevant bedside tests in atypical parkinsonian disorders
- 2) Recognize and understand the pathophysiology and treatment of cognitive disturbance in atypical parkinsonian disorders
- Recognize and treat psychiatric disturbances of patients with atypical parkinsonian disorders (PSP, MSA, CBS)

4310 Teaching Course TICKET

Detecting prodromal Parkinson's disease 15:00 – 17:00

Location: Harbor B-C, 2nd Level, Harbor Tower

Chairs: Inga Liepelt-Scarfone Tübingen, Germany Ron Postuma Montreal, QC, Canada

15:00 Clinical markers of prodromal Parkinson's disease Ron Postuma

Montreal, QC, Canada

15:40 Imaging and other biomarkers of prodromal Parkinson's disease

Kenneth Marek New Haven, CT, USA

16:20 Putting it together: Can we make diagnostic criteria for prodromal Parkinson's disease?

Inga Liepelt-Scarfone
Tübingen, Germany

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees



4310 Teaching Course [TICKET], cont.

At the conclusion of this session, participants should be better able to:

- 1) Understand the range of clinical markers of early/ prodromal Parkinson's disease, their predictive value, and eventual diagnostic utility
- 2) Understand neuroimaging features of early/ prodromal Parkinson's disease, including MRI, dopaminergic functional neuroimaging, ultrasound, and cardiac scintigraphy as well as blood and cerebrospinal biomarkers for early/ prodromal Parkinson's disease
- 3) Review research criteria for prodromal Parkinson's disease and discuss ethical issues

4411 Skills Workshop TICKET



Neuropathology of proteinopathies

17:30 - 19:00

Location: Harbor H-I, 2nd Level, Harbor Tower

This interactive session is intended to provide the participant with an under-. standing of the basic neuropathologies of proteinopathies and will include basic methodologies and principles of neuropathology that can be understood by non-neuropathologists to enhance interpreting neuropathological data in scientific studies.

Irina Alafuzoff Uppsala, Sweden Thomas Beach Sun City, AZ, USA

Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/ **Trainees**

At the conclusion of this session, participants should be better able to:

- 1) Understand the different laboratory techniques and limitations for identifying proteinopathies
- 2) Identify different proteinopathic lesions and their significance
- 3) Describe the classification system for diagnosing proteinopathies

Skills Workshop TICKET 4412

Managing acute and chronic post-operative issues following DBS in Parkinson's disease

17:30 - 19:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

This interactive session will have didactic and video-interactive components that deal with optimization of postoperative management of DBS in Parkinson's disease.

Anna Castrioto Grenoble, France

Jill Ostrem Greenbrae, CA, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Manage post-operative motor problems in Parkinson's disease patients
- 2) Manage post-operative non-motor problems in Parkinson's disease patients
- 3) Analyze and understand postoperative side effects related to DBS

Skills Workshop TICKET 4413

Palliative care for parkinsonian syndromes: A focus on non-motor issues 17:30 - 19:00

Location: Harbor B-C, 2nd Level, Harbor Tower

In this interactive session, participants will be able to understand the principles of palliative care framed within a conceptual model as well as lessons learned from its practical application in an interdisciplinary clinic. The faculty will outline key principles of palliative care management in the Parkinson's disease nurse specialist in this pathway. Practical tips will be given on how to best apply those principles.

Veronica Bruno Toronto, ON, Canada Julie Carter Portland, OR, USA

Skills Workshop TICKET, c ont. 4413

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Identify the key principles of palliative care (with a focus on non-motor) in Parkinson's using a conceptual framework
- 2) Understand the practical benefits and pitfalls of a model of palliative care in Parkinson's disease
- 3) Understand the role of the Parkinson's disease nurse in palliative care in Parkinson's disease

Skills Workshop TICKET

Practical management of bladder and sexual dysfunction in parkinsonian disorders

17:30 - 19:00

Location: Seaport F, 2nd Level, Seaport Tower

In this interactive session, participants will be able to understand the principles of managing bladder and sexual dysfunction in parkinsonian disorders, practical strategies on how to best to detect and evaluate disturbance and their practical management. The faculty will illustrate these points through lectures and case presentations.

Gila Bronner Ramat-Gan, Israel Jalesh Panicker London, United Kingdom

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand the basis for bladder and sexual dysfunction in patients with parkinsonian disorders
- 2) Understand how to investigate and manage bladder and sexual dysfunction in patients with parkinsonian disorders
- 3) Become familiar with newer treatment options for managing bladder and sexual dysfunction in parkinsonian disorders



4415 Skills Workshop TICKET

The dystonic or spastic upper limb: Reassessing strategies 17:30 – 19:00

Location: Harbor A, 2nd Level, Harbor Tower

This interactive session will have didactic and video-didactic components that deal with dystonia and spasticity assessment in regard to impacts in impairment and disability, as well as therapeutic strategies.

Ryuji Kaji

Tokushima City, Japan Raymond Rosales

Manila, Philippines

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Assess upper limb dystonia and spasticity in regard to severity of impairment, postures and functional disability
- Differentiate pure upper limb dystonia and spasticity, spastic dystonia and associated reactions
- Formulate a therapeutic strategy that will reduce impairment and improve passive and active functions in spasticity and dystonia

4516 Video Session TICKET

Unusual movement disorders 17:30 – 19:00

Location: Seaport G-H, 2nd Level, Seaport Tower

This interactive session will help attendees develop an approach to the differential diagnosis of unusual movement disorders.

Orlando Barsottini São Paolo, Brazil

Mandar Jog London, ON, Canada

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

4516 Video Session TICKET, cont.

At the conclusion of this session, participants should be better able to:

- 1) Identify less common inherited movement disorders
- Recognize less common acquired or "idiopathic" movement disorders
- 3) Develop an approach to the differential diagnosis of unusual movement disorders

4517 Video Session TICKET

Movement disorders in neuromuscular diseases 17:30 – 19:00

Location: Harbor G, 2nd Level, Harbor Tower

This session will demonstrate examples of neuromuscular diseases with abnormal movements and postures that may be seen in or present to a movement disorder clinic.

Alberto Espay Cincinnati, OH, USA Nestor Galvez-Jimenez

Weston, FL, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Recognize movements arising from peripheral nerve hyper-excitability syndromes
- 2) Identify myopathic causes of cramps and abnormal postures (ie. Limb, trunk camptocormia)
- Recognize neuromuscular disease that can mimic a movement disorder due to weakness

4518 Video Session TICKET

Eyes and movement disorders

17:30 - 19:00

Location: Harbor D-F, 2nd Level, Harbor Tower

In this interactive session, participants will learn bedside examination techniques, recognize categories of abnormal eye movements, and become familiar with patterns of oculomotor dysfunction in many movement disorders.

Tim Anderson Christchurch, New Zealand Janet Rucker New York, NY, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Undertake an efficient bedside examination of eye movements including saccades, pursuit, vergence, vestibular and alignment
- Comprehend the phenomenology of abnormal spontaneous and evoked eye movements on bedside examination
- 3) Recognize patterns of abnormal eye movements that aid diagnosis in movement disorders

MDS Video Challenge Pre-Event Gathering

19:00 - 20:00

Location: Harbor and Seaport Foyer, 2nd Level

MDS Video Challenge

20:00 - 22:00

Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

See page 11 for more information.



Thursday, June 18, 2015

5101	Plenary Session
	Emerging paradigms for functional surgery for movement disorders 8:00 – 9:30 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower
Chairs:	Jens Volkmann Würzburg, Germany Paul Krack Grenoble, France
8:00	Focused ultrasound Jeff Elias Charlottesville, VA, USA
8:30	Gamma Knife Yoshinori Higuchi <i>Chiba City, Japan</i>
9:00	New stimulation techniques in DBS Jens Volkmann <i>Würzburg, Germany</i>

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand the pros and cons of focused ultrasound
- 2) Understand the pros and cons of gamma knife surgery
- 3) Understand the potential of steering technology for DBS such as demand pacemakers, directional stimulation, visual representation of electrode localization and shape of electrical stimulation field

5102	Controversies in Movement		
	Disorders		
	10:00 – 11:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower		
Chairs:	Anthony Lang <i>Toronto, ON, Canada</i>		
	Matthew Stern Philadelphia, PA, USA		
10:00	Are synucleopathies prion diseases? (YES)		
	Patrik Brundin Grand Rapids, MI, USA		
10:15	Are synucleopathies prion diseases? (NO)		
	Glenda Halliday <i>Randwick, NSW, Australia</i>		
10:30	Should infusion therapies be considered before DBS? (YES)		
	Angelo Antonini <i>Venice, Italy</i>		
10:45	Should infusion therapies be considered before DBS? (NO)		
	Andres Lozano Toronto, ON, Canada		
Recomme	ended Audience: Basic scientists, Clinical		

Recommended Audience: Basic scientists, Clinical academicians, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

Topic 1:

- 1) Define the basic characteristics of a prion disease
- 2) Assess the pros and cons of the prion paradigm applied to proteinopathies
- 3) Understand the state-of-the-art developments in modeling such phenomenon

Topic 2:

- Describe the clinical effects of STN-DBS and infusion therapies on Parkinson's disease symptoms
- 2) Review the more common side effects of the STN-DBS and infusion therapies when used in Parkinson's disease
- Discuss indication and contraindications for STN-DBS vs Infusion therapies in Parkinson's disease

5103 Blue Ribbon Highlights 11:00 – 12:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower

Chairs: Charles Adler
Scottsdale, AZ, USA
Marcelo Merello

Marcelo Merello Buenos Aires, Argentina This session will provide a

This session will provide a critical review of the best poster presentations by a panel of experts, highlighting the relevance, novelty, and quality of both clinical and basic research presented by delegates.

Presenters:

Christine Klein Lübeck, Germany David Standaert Birmingham, AL, USA

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- Review recent developments in the basic science of movement disorders
- 2) Discuss an overview of recent clinical developments
- Define an overall perspecive on current topics of interest in movement disorders

Guided Poster Tours

GPT 13: Atypical parkinsonism 12:00 – 13:30

Location: Seaport F, 2nd Level, Seaport Tower

GPT 14: Surgical therapy of Parkinson's disease

12:00 - 13:30

Location: Harbor A, 2nd Level, Harbor Tower

GPT 15: Parkinson's disease: Cognitive and behavioral aspects

12:00 - 13:30

Location: Harbor B-C, 2nd Level, Harbor Tower

GPT 16: Parkinson's disease: Neuropharmacology 12:00 – 13:30

Location: Harbor G, 2nd Level, Harbor Tower



in

Thursday, June 18, 2015

Poster Session

12:00 - 13:30

Abstract nubers: 1112 - 1473 See page 16 for category locations. Poster viewing: 9:00 - 16:00

Corporate Therapeutic Symposia

13:30 - 14:30

See pages 126 – 127 for more information.

Parallel Session TICKET 5204

Models to study proteinopathies 15:00 - 17:00

Location: Harbor A, 2nd Level,

Harbor Tower

Chairs: Kelvin Luk

Philadelphia, PA, USA

Miguel Vila Barcelona, Spain

15:00 Use of human-derived protein as

seeds Miguel Vila Barcelona, Spain

15:40 Use of recombinant fibrils as

> seeds Kelvin Luk

Philadelphia, PA, USA

16:20 Structural and functional

characterization of seeding protein strains

Ronald Melki Gif-sur-Yvette, France

Recommended Audience: Basic scientists, Clinical academicians

At the conclusion of this session, participants should be better able to:

- 1) Describe the requirements for modeling proteinopathies using human-derived pathologically conformed protein as seeds
- 2) Understand the state of the art in modeling the seeding process
- 3) Define what strategy is useful for the research needs

5205	Parallel Session TICKET
	Clinical pathological and genetic overlap between FTD and parkinsonism 15:00 – 17:00 Location: Harbor G, 2nd Level, Harbor Tower
Chairs:	Glenda Halliday <i>Randwick, NSW, Australia</i> Ian MacKenzie <i>Vancouver, BC, Canada</i>
15:00	The diagnostic difficulty of parkinsonism in frontotemporal dementia syndromes James Rowe Cambridge, United Kingdom
15:40	Pathology of parkinsonism in frontotemporal lobar degeneration lan MacKenzie Vancouver, BC, Canada
16:20	New genes involved in overlapping FTD and parkinsonism Isabelle Le Ber Paris, France
Recommo	ended Audience: Basic scientists, Clinical
	cians, Practitioners, Students/Residents/

R academicians, Practitioners, Students/Residents/

At the conclusion of this session, participants should be better able to:

- 1) Identify patients with parkinsonism that have underlying frontotemporal dementia pathologies
- 2) Define the pathologies and molecular signatures associated with parkinsonism in frontotemporal lobar degeneration
- 3) Name the new genes involved in parkinsonism and frontotemporal dementia syndromes

5206	Parallel Session TICKET
	Parkinson's disease in underserved areas: Geographical and socioeconomic disparities i movement disorder care 15:00 – 17:00 Location: Seaport F, 2nd Level, Seaport Tower
Chairs:	Louis Tan Singapore Richard Walker North Shields, United Kingdom
15:00	The Asian Experience Roland Dominic Jamora Manila, Philippines
15:40	The African Experience Richard Walker North Shields, United Kingdom
16:20	The American Experience Allison Willis Philadelphia, PA, USA
Non-physic	ded Audience: Clinical academicians, iian Health Professionals, Practitioners, esidents/Trainees
At the conc	lusion of this session, participants shou

be better able to:

- 1) Describe the movement disorders in developing countries that may create an impact into the global perspective
- 2) Identify key problem areas in diagnosis and treatment approaches of movement disorders in the developing countries
- 3) Understand how patient care outcomes are addressed and leveled with their socioeconomic implications



Thursday, June 18, 2015

5207	Parallel Session TICKET
	Drug-induced movement disorders 15:00 – 17:00 Location: Seaport Ballroom A-E, 2nd Level, Seaport Tower
Chairs:	Stewart Factor Atlanta, GA, USA Timothy Lynch Dublin, Ireland
15:00	Understanding, recognizing and treating the tardive syndromes Francisco Cardoso Belo Horizonte, Brazil
15:40	Beyond tardive syndromes: Identifying and managing other neuroleptic-induced movement disorders Robert Rodnitzky <i>lowa City, IA, USA</i>
16:20	Not the usual suspects: Movement disorders caused by other drugs Stewart Factor Atlanta, GA, USA

Recommended Audience: Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand the pathophysiology, clinical spectrum, and treatment of the tardive syndromes
- 2) Identify and manage acute and chronic neuroleptic-induced movement disorders including acute dystonic reaction, akathisia, parkinsonism and neuroleptic malignant syndrome
- 3) Understand how to anticipate, recognize and treat movement disorders caused by other drugs including antiepileptics, antidepressants, cardiac drugs and other agents

Optimizing the effect of
L-Dopa in Parkinson's disease 15:00 – 17:00 Location: Harbor D-F, 2nd Level, Harbor Tower
Peter LeWitt West Bloomfield, MI, USA Per Odin Bremerhaven, Germany
The value of frequent dosing of peroral L-dopa Fabrizio Stocchi Rome, Italy
New L-dopa preparations in development: IPX066, DM1922, XP21279, CVT301, Accordian pills Peter LeWitt West Bloomfield, MI, USA
L-dopa pump infusion: State-of- the-art Per Odin Bremerhaven, Germany

academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Describe possibilities for frequent dosing of
- 2) Describe new L-dopa formulations in development
- 3) Describe pump treatment options for L-dopa, their effects and risks

I didilei Jessivii
Parkinson's subtype: New horizons in pathology to clinic 15:00 – 17:00 Location: Seaport G-H, 2nd Level, Seaport Tower
Charles Adler Scottsdale, AZ, USA Connie Marras Toronto, ON, Canada
Motor subtypes and non-motor subtypes presenting with non-dopaminergic clinical features Connie Marras Toronto, ON, Canada
Non-motor subtypes (mesolimbic and mesocortical) Paul Krack <i>Grenoble, France</i>
Neuropathological concepts underpinning cognitive and other subtyping Charles Adler Scottsdale, AZ, USA

Parallel Session TICKET

5209

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Understand data and evidence on current basis of motor subtyping within Parkinson's and also cases that present dominantly with non-dopaminergic features (cognitive impairment, pain, apathy and aspects of sleep) supporting distinct, subtypes within Parkinson's disease and overlap with motor subtypes
- 2) Understanding the rationale and emerging evidence base of specific non-motor subtypes within Parkinson's disease focusing on subcortical and mesolimbic subtypes supported by clinical, imaging and pharmacological data
- 3) Understand the role of non-dopaminergic neuronal dysfunction in early Parkinson's disease and the variability of neuropathology based on onset pattern of Parkinson's disease



Thursday, June 18, 2015

5310	Teaching Course TICKET
	Exercise in Parkinson's disease: Is it worth the sweat? 15:00 – 17:00 Location: Harbor H-I, 2nd Level, Harbor Tower
Chairs:	Nienke de Vries Nijmegen, Netherlands
	Ergun Uc <i>Iowa City, IA, USA</i>
15:00	Biological effects of exercise in Parkinson's disease: Evidence from animal and human studies Giselle Petzinger Los Angeles, CA, USA
15:40	Evidenced-based review of exercise in Parkinson's disease
	Ergun Uc <i>Iowa City, IA, USA</i>
16:20	Practical implementation of exercise programs in Parkinson's disease Nienke de Vries
_	Nijmegen, Netherlands
Dacammai	ndad Audianca: Racic eciantists Clinical

Recommended Audience: Basic scientists, Clinical academicians, Non-physician Health Professionals, Practitioners, Students/Residents/Trainees

At the conclusion of this session, participants should be better able to:

- 1) Explain how animal models suggest mechanisms for effects of exercise in Parkinson's disease
- 2) List the current evidence supporting a role for exercise in Parkinson's disease
- 3) Explain possible mechanisms underlying the effect of exercise in Parkinson's disease

5311	Teaching Course TICKET	
	Update on pediatric	
	movement disorders	
	15:00 – 17:00	
	Location: Harbor B-C, 2nd Level, Harbor Tower	
Chairs:	Hyder Jinnah	
Citalis.	Atlanta, GA, USA	
	Nardo Nardocci	
	Milan, Italy	
15:00	Isolated and combined dystonia	
	syndromes in children	
	Nardo Nardocci	
	Milan, Italy	
15:40	Paroxysmal dyskinesias	
	Roberto Erro	
	Naples, Italy	
16:20	Alternating hemiplegia of	
	childhood and rapid onset dystonia-parkinsonism	
	Allison Brashear	
	Winston-Salem, NC, USA	
Recommended Audience: Basic scientists, Clinical		
academicia	ns, Practitioners, Students/Residents/	

Trainees

At the conclusion of this session, participants should be better able to:

- 1) Review the most recent advances on the diagnosis and treatment of childhood onset dystonias
- 2) Understand the neurogenetics of paroxysmal dyskinesia, in particular phenotypic pleiotropy of PRRT2 and GLUT1 mutations, and their implications for patient management
- 3) Understand the spectrum of clinical manifestations of ATP1A3 mutations, which includes episodic to progressive movement disorders



Adler, Charles Scottsdale, AZ, USA 5103, 5209

Aggarwal, Annu *Mumbai, India* 2411

Alafuzoff, Irina *Uppsala, Sweden* 4411

Alcalay, Roy New York, NY, USA

3208

Anderson, Tim

Christchurch, New Zealand

4518

Antonini, Angelo Venice, Italy 5102

Bachoud-Levi, Anne-Catherine

Creteil, France 2516 Bajaj, Nin

Nottingham, United Kingdom

2310

Barbosa, Egberto São Paulo, Brazil

2411

Barsottini, Orlando São Paulo, Brazil

4516

Barton, Brandon *Chicago, IL, USA*

4208

Beach, Thomas Sun City, AZ, USA

4411

Berardelli, Alfredo *Rome, Italy* 1104 Bernick, Charles
Las Vegas, NV, USA

2203

Bezard, Erwan *Bordeaux, France*

4206

Bhatia, Kailash

London, United Kingdom

3514

Bloem, Bastiaan Nijmegen, Netherlands

2208, 3517

Bordelon, Yvette
Los Angeles, CA, USA

3309

Boxer, Adam San Francisco, CA, USA

2204

Brashear, Allison
Winston-Salem, NC, USA

5311

Brockmann, Kathrin Tübingen, Germany

3208

Bronner, Gila Ramat-Gan, Israel

4414

Brundin, Patrik Grand Rapids, MI, USA

5102

Bruno, Veronica
Toronto, ON, Canada

4413

Burn, David John

Newcastle upon Tyne, United Kingdom

3206

Calabresi, Paolo *Rome, Italy* 4206 Cardoso, Francisco Belo Horizonte, Brazil

5207

Carter, Julie Portland, OR, USA

4413

Castrioto, Anna Grenoble, France

4412

Chaudhuri, K. Ray *London, United Kingdom*

2309

Chen, Robert
Toronto, ON, Canada

1104

Chen-Plotkin, Alice Philadelphia, PA, USA

4204

Cincotta, Massimo Florence, Italy 2415

Cleveland, Don La Jolla, CA, USA

3204

Colosimo, Carlo *Rome, Italy* 2518

Comella, Cynthia Chicago, IL, USA 1102

Dalmau, Josep *Philadelphia, PA, USA*

4207

Dawson, Ted
Baltimore, MD, USA

3101

De Koning-Tijssen, Marina *Groningen, Netherlands*

3102

de Vries, Nienke Nijmegen, Netherlands

5310

Deuschl, Günther Kiel, Germany

2101

Duda, John

Philadelphia, PA, USA

2207

Elble, Rodger Springfield, IL, USA

2208

Elias, Jeff

Charlottesville, VA, USA

5101

Erro, Roberto Naples, Italy 5311

Espay, Alberto Cincinnati, OH, USA 2208, 4517

Fabbrini, Giovanni *Rome, Italy* 3513

Factor, Stewart Atlanta, GA, USA

5207

Fahn, Stanley New York, NY, USA 2102

Fasano, Alfonso Toronto, ON, Canada

3517

Fernandez, Hubert Cleveland, OH, USA

4204

Ferreira, Joaquim Torres Vedras, Portugal

2516



Filoteo, Vincent San Diego, CA, USA

4204

Finkbeiner, Steven
San Francisco, CA, USA

3203

Foote, Kelly Gainesville, FL, USA

3310

Fox, Susan

Toronto, ON, Canada

1102

Friedman, Jennifer Del Mar, CA, USA 2102, 2517

Frucht, Steven
New York, NY, USA

3518

Fung, Victor

Sydney, NSW, Australia

1102

Galvez-Jimenez, Nestor

Weston, FL, USA

4517

Gasser, Thomas Tübingen, Germany

4205

Gershanik, Oscar
Buenos Aires, Argentina

4207

Goetz, Christopher Chicago, IL, USA

2204

Golbe, Lawrence
New Brunswick, NJ, USA

3309

Goldman, Jennifer *Chicago, IL, USA*

4204

Greene, Paul New York, NY, USA

2310

Grossman, Murray Philadelphia, PA, USA

4309

Hallett, Mark Bethesda, MD, USA

2205

Halliday, Glenda Randwick, NSW, Australia

5102, 5205

Hayes, Michael Concord, NSW, Australia

3516

Hedderly, Tammy

West Sussex, United Kingdom

3515

Helmich, Rick
Nijmegen, Netherlands

2205

Higuchi, Makoto Chiba City, Japan

4101

Higuchi, Yoshinori *Chiba City, Japan*

5101

Höglinger, Günter *Munich, Germany*

3309

Irani, Sarosh

Oxford, United Kingdom

3102

Isacson, Ole Belmont, MA, USA

3203

Jamora, Roland Dominic Manila, Philippines

5206

Jankovic, Joseph Houston, TX, USA

2102

Jennings, Danna New Haven, CT, USA

3412

Jeon, Beom Seoul, Korea 3207

Jinnah, Hyder Atlanta, GA, USA 2205, 5311

Jog, Mandar London, ON, Canada

4516

Juncos, Jorge Atlanta, GA, USA

3310

Kaji, Ryuji Tokushima City, Japan

4415

Klein, Christine *Lübeck, Germany*

5103

Kleiner-Fisman, Galit Toronto, ON, Canada

3206

Kompoliti, Aikaterini

Chicago, IL, USA

4208

Krack, Paul Grenoble, France 5101, 5209

Kulisevsky, Jaime Barcelona, Spain

1103

Kurian, Manju London, United Kingdom

3207

Lang, Anthony *Toronto, ON, Canada*

Le Ber, Isabelle Paris, France

4102, 5102

5205

Lees, Andrew

London, United Kingdom

2102, 2203

Lehericy, Stephane Paris, France

Lerche, Holger Ulm, Germany

3102

4203

Levine, Michael
Los Angeles, CA, USA

3205

LeWitt, Peter

West Bloomfield, MI, USA

5208

Liepelt-Scarfone, Inga Tübingen, Germany

4310

Limousin, Patricia

London, United Kingdom

2412

Ling, Helen

London, United Kingdom

2203

Lipton, Stuart La Jolla, CA, USA

3203

Litvan, Irene San Diego, CA, USA 2102, 3513 Lozano, Andres

Toronto, ON, Canada

5102



Luk, Kelvin

Philadelphia, PA, USA

5204

Lynch, Timothy *Dublin, Ireland* 3518, 5207

MacKenzie, lan Vancouver, BC, Canada

5205

Maetzler, Walter Tübingen, Germany

2208

Marek, Kenneth New Haven, CT, USA

4310

Marras, Connie Toronto, ON, Canada

5209

Marrinan, Sarah

Newcastle upon Tyne, United Kingdom

2206

Martino, Davide

Orpington, United Kingdom

1104

Masellis, Mario Toronto, ON, Canada

4203

Masliah, Eliezer La Jolla, CA, USA

3101

Melki, Ronald Gif-sur-Yvette, France

5204

Merello, Marcelo Buenos Aires, Argentina

5103

Mestre, Tiago Ottawa, ON, Canada

4102

Mobley, William La Jolla, CA, USA

3203

Mohammad, Shekeeb

Wentworthville, NSW, Australia

4207

Morgante, Francesca

Messina, Italy

3514

Nahab, Fatta San Diego, CA, USA

2205

Nardocci, Nardo *Milan, Italy* 5311

Nieuwboer, Alice Heverlee, Belgium

2208

Obeso, Jose *Madrid, Spain*

2101

Odin, Per

Bremerhaven, Germany

5208

Oertel, Wolfgang

Marburg, Germany

2309

Olanow, C. Warren New York, NY, USA

4101

Ondo, William Houston, TX, USA

2414

Ostrem, Jill Greenbrae, CA, USA

4412

O'Sullivan, John

Coorparoo, QLD, Australia

3310

O'Sullivan, Sean *Cork, Ireland* 2310

Pagonabarraga Mora, Javier

Barcelona, Spain

4309

Pal, Pramod Bangalore, India

3411

Pandolfo, Massimo Brussels, Belgium

3411

Pandya, Mayur Cleveland, OH, USA

3515

Panicker, Jalesh

London, United Kingdom

4414

Panzer, Jessica Philadelphia, PA, USA

4207

Payami, Haydeh Albany, NY, USA

4205

Perez Lloret, Santiago Buenos Aires, Argentina

2413

Petzinger, Giselle Los Angeles, CA, USA

5310

Pfeiffer, Ronald Memphis, TN, USA

2206

Poewe, Werner Innsbruck, Austria

1101, 4101, 4203

Postuma, Ron Montreal, Canada

4310

Provini, Federica *Bolgna, Italy* 2414

Rascol, Olivier Toulouse, France

1101

Reich, Stephen *Baltimore, MD, USA*

3516

Reilmann, Ralf *Münster, Germany*

3205

Revesz, Tamas

London, United Kingdom

2203

Rochester, Lynn

Newcastle upon Tyne, United Kingdom

1101

Rodnitzky, Robert Iowa City, IA, USA

5207

Rosales, Raymond *Manila, Philippines*

4415

Ross, Owen

Jacksonville, FL, USA

4205

Rowe, James

Cambridge, United Kingdom

5205

Roze, Emmanuel Paris, France 2415

Rucker, Janet New York, NY, USA

4518

Salmon, David *La Jolla, CA, USA*

4309

Sampaio, Cristina Princeton, NJ, USA

3205

Sanger, Terence Los Angeles, CA, USA

2517

Schapira, Anthony London, United Kingdom

2309, 3208 Seppi, Klaus Innsbruck, Austria

3412

Shoulson, Ira Washington, DC, USA

1104

Simuni, Tanya *Chicago, IL, USA*

4102

Singleton, Andrew Bethesda, MD, USA

3204

Sonies, Barbara Potomac, MD, USA

2206

Stamelou, Maria *Athens, Greece*

4208

Standaert, David
Birmingham, AL, USA

5103

Stern, Matthew *Philidelphia, PA, USA*

5102

Stocchi, Fabrizio *Rome, Italy* 5208

Storch, Alexander Dresden, Germany

1101

Strafella, Antonio
Toronto, ON, Canada

4203

Sue, Carolyn

Sydney, NSW, Australia

4208

Sulzer, David New York, NY, USA

3101

Surmeier, D. James Chicago, IL, USA

4102

Tagliati, Michele
Los Angeles, CA, USA

2412

Takahashi, Ryosuke *Kyoto, Japan* 2310, 4102

Tan, Eng-King Singapore 2518, 3204 Tan, Louis

Singapore 5206

Tanner, Caroline
San Francisco, CA, USA

2207

Thomas, Sue

London, United Kingdom

3206

Thompson, Philip *Adelaide, SA, Australia*

1104

Tinazzi, Michele *Verona, Italy* 2413

Tolosa, Eduardo Barcelona, Spain

2102

Tomiyama, Masahiko

Aomori, Japan

4206

Trenkwalder, Claudia Kassel, Germany

2309

Troster, Alexander Phoenix, AZ, USA

4309

Uc, Ergun *Iowa City, IA, USA*

5310

Vidailhet, Marie *Paris, France* 1102

Vila, Miquel Barcelona, Spain

5204

Volkmann, Jens Würzburg, Germany

5101

Walker, Richard

North Shields, United Kingdom

5206

Weintraub, Daniel Ardmore, PA, USA

1103

Weissbach, Anne Lübeck, Germany

3207

Wenning, Gregor Innsbruck, Austria

2204

Williams, David Brighton, VIC, Australia

4101

Williams-Gray, Caroline Cambridge, United Kingdom

2309

Willis, Allison Philadelphia, PA, USA

5206

Wszolek, Zbigniew Jacksonville, FL, USA

3204

Wu, Ruey-Meei Taipei, Taiwan 2207

Zurowski, Mateusz Toronto, ON, Canada

1103

Faculty Listing



GUIDED POSTER TOUR 1 - PARKINSON'S DISEASE: PHENOMENOLOGY

Seaport F, 2nd Level, Seaport Tower 12:30 - 14:00 Monday, June 15, 2015

- 1220 Do distribution and co-existent myoclonus and dystonia aid in the identification of SGCE mutations?
 - R. Zutt, J.M. Dijk, K. Peall, H. Speelman, Y.E.M. Dreissen, M.F. Contarino, M.A.J. Tijssen (Groningen, Netherlands)
- 1185 Modulation of dystonia during sleep E. Antelmi, R. Ferri, K. Bhatia, F. Mignani, C. Scaglione, F. Provini, P. Martinelli, R. Liquori (Bologna, Italy)
- 4-year longitudinal changes in clinical rating, medication and quantitative motor assessment in mild and moderate Parkinson's disease: Results from the MODEP study
 5. Heinzel, F. Bernhard, M. Maechtel, T. Heger, S. Nussbaum, W. Maetzler, D. Berg (Tuebingen, Germany)
- 1202 Impact of different baseline motor features on prognosis in Parkinson's disease
 - A.D. Macleod, C.E. Counsell (Aberdeen, United Kingdom)
- 1191 A simple approach to monitoring of Parkinson's disease state using a Smart phone platform J.M. Dean, M. Silverman (Boulder, CO, USA)
- 1194 Physical activity correlates with disease severity among new onset Parkinson's disease patientsP. Gonzalez-Latapi, J.D. Ciolino, T. Simuni (Boston, MA, USA)
- 1211 Non-motor symptoms profiles of different ethnic groups with Parkinson's disease: A study comparing the UK, Thailand, Nigeria and Kuwait A. Sauerbier, O. Jitkritsadakul, R. Bhidayasiri, J.Y. Al-Hashel, W.A. Kamel, A. Kilany,
 - A. Sauerbier, O. Jitkritsadakul, R. Bridayasırı, J.Y. Al-Hashel, W.A. Kamel, A. Kilany, T. Farombi, P. Martinez-Martin, R. Brown, M. Parry, A. Martin, R. Inniss, L. Perkins, D. Trivedi, L. Klingelhöfer, A. Rizos, P. Zis, K. Ray Chaudhuri (London, United Kingdom)
- 1195 New observations in the Fragile-X associated tremor/ataxia syndrome (FXTAS) phenotype
 D.A. Hall, A.Y. Fraint, P. Vittal, A. Szewka, B. Bernard, E. Berry-Kravis (Chicago, IL, USA)
- 1208 Clinical features of late-stage early-onset Parkinson's disease:
 38 years of follow-up
 B. Pinter, A. Diem-Zangerl, G.K. Wenning, W. Oberaigner, K. Seppi, W. Poewe (Innsbruck, Austria)
- 1219 Comparing wearable activity sensors and self-report measures of mobility
 L.F. Zhu, P. Boissy, C. Lavigne-Pelletier, M. Jog, R. Edwards, C. Duval, M. Speechley (London, ON, Canada)

GUIDED POSTER TOUR 2 - SLEEP DISORDERS AND RLS

Harbor A, 2nd Level, Harbor Tower 12:30 - 14:00 Monday, June 15, 2015

- 1254 Periodic leg movements of sleep under general anesthesia N. Vanegas, M. Hallett, K.A. Zaghloul, C. Lungu (Bethesda, MD, USA)
- 1245 Deep brain stimulation (DBS) of the subthalamic nucleus (STN) improves restless leg syndrome (RLS) in patients with Parkinson's disease (PD)
 - O.S. Klepitskaya, Y. Liu, S.H. Sillau, J. Tsai, A.S. Walters (Aurora, CO, USA)
- 1240 The prevalence of RLS and severity of symptoms in patients with Idiopatic Parkinson's disease in the Republic of Macedonia
 - A. Doneva, S. Mancevska, V. Donev (Skopje, Macedonia)
- Decision making in Parkinson's disease with and without REM sleep behavior disorder
 M.L. Fantini, P. Beudin, M. Figorilli, A.R. Marques,
 T. Vidal, B. Debilly, P. Derost, U. Miguel, M. Puligheddu, F. Durif (Clermont-Ferrand, France)
- 1252 Familial impulse control disorders associated with dopaminergic agonist therapy for RLS
 M. Schonberger, C. Sidiropoulos, P. LeWitt (West Bloomfield, MI, USA)
- 1241 Acute restless legs syndrome and kleptomania after liposuction surgery
 - G. Fabiani, H.A.G. Teive (Curitiba, Brazil)
- 1097 Pilot study to evaluate transcranial direct current stimulation (tDCS) during sleep for the treatment of Parkinson's disease D.A. Heldman, C.L. Pulliam, L.M. Blassucci, J.P. Giuffrida, C.L. Comella (Cleveland, OH, USA)
- 926 Sleep architecture observed in the patients with SCA 10 E. London, A.C. Crippa, H.A.G. Teive, A. Moro, M. Moscovich, T. Ashizawa (Curitiba, Brazil)
- Motor and non-motor features of Parkinson's disease in idiopathic REM sleep behaviour disorder
 M. Rolinski, L. Griffanti, K. Szewczyk-Krolikowski, R.A. Menke, T. Quinnell,
 Z. Zaiwalla, C.E. Mackay, M.T.M. Hu (Oxford, United Kingdom)



GUIDED POSTER TOUR 3 – TREMOR

Harbor B-C, 2nd Level, Harbor Tower 12:30 - 14:00 Monday, June 15, 2015

- 1459 Climbing fiber-Purkinje cell synaptic changes correlate with clinical features in essential tremor S. H. Kuo, R.J. Louis, C.Y. Lin, A.H. Koeppen, P.L. Faust, E.D. Louis (New York, NY, USA)
- 1470 Elderly onset essential tremor and cognitive impairment H.A. Shill, J.G. Hentz, J.N. Caviness, E. Driver-Dunckley, S. Jacobson, C. Belden, M.N. Sabbaqh, T.G. Beach, C.H. Adler (Sun City, AZ, USA)
- The efficacy of electrical muscle stimulation in various tremor syndromes: An open-label, pilot study including 68 patients
 Jitkritsadakul, C. Thanawattano, C. Anan, R. Bhidayasiri (Bangkok, Thailand)
- 1444 Rate-controlled syllable repetitions improve comparability of DBS-induced dysarthria between on- and off-state in patients with essential tremor J. Becker, D. Mücke, A. Hermes, T.A. Dembek, A.F. Josten, I. Meister, V. Visser-Vandewalle, M. Grice, L. Timmermann, M.T. Barbe (Cologne, Germany)
- 1454 Different features of iron deposition in subcortical nuclei between essential tremor and tremor-dominant Parkinson's disease
 L. Jin, J. Wang, G. Fei, C. Zhong (Shanghai, China)
- 1465 Functional connectivity in the sensorimotor cortex in Parkinson's patients with and without tremor S.E. Qasim, C. de Hemptinne, N. Swann, P.A. Starr (San Francisco, CA, USA)
- 1469 Improvement of repeated Archimedes spirals in essential tremor: Evidence for a learning effect?
 N. Schuhmayer, C. Weber, M. Kieler, W. Pirker, E. Auff, D. Haubenberger (Vienna, Austria)
- Smartphone apps provide a simple, accurate bedside screening tool for orthostatic tremor
 Bhatti, R. Thompson, A. Hellman, C. Penke, J.M. Bertoni, D. Torres-Russotto (Omaha, NE, USA)
- 1449 Hypertrophic olivary degeneration does not reduce essential tremor
 A. Elkouzi, J.C. Kattah, R.J. Elble (Springfield, IL, USA)
- Non-motor symptoms of essential tremor are independent of tremor severity and have an impact on quality of life
 T. Musacchio, V. Purrer, A. Papagianni, A. Fleischer, D. Mackenrodt, C. Malsch,
 G. Gelbrich, F. Steigerwald, J. Volkmann, S. Klebe (Würzburg, Germany)

GUIDED POSTER TOUR 4 - PARKINSON'S DISEASE: NON-MOTOR FEATURES

Harbor G, 2nd Level, Harbor Tower 12:30 - 14:00 Monday, June 15, 2015

- Depression and nighttime-sleep problems in Parkinson's disease
 K. Zhu, J. Marinus, J.J. van Hilten (Leiden, Netherlands)
- Delineating non-motor symptoms in early Parkinson's disease and first-degree relatives
 F. Baig, M. Lawton, M. Rolinski, C. Ruffmann, K. Nithi, S.G. Evetts, H.R. Fernandes, Y. Ben-Shlomo, M.T.M. Hu (Oxford, United Kingdom)
- The contribution of the insula in Parkinson's disease: A quantitative meta-analysis study
 M. Marion, L. Christopher, P. Boulinguez, B. Ballanger, A.E. Lang, S.S. Cho, A.P. Strafella (Toronto, ON, Canada)
- 487 Visual exploration in Parkinson's disease
 D.F. Ye, N. Vanegas-Arroyave, P. Lauro, M. Hallett, C. Lungu (Bethesda, MD, USA)
- Antipsychotic use in Parkinson's disease is associated with increased mortality
 D. Weintraub, C. Chiang, H.M. Kim, J. Wilkinson, C. Marras, B. Stanislawski, E. Mamikonyan, H.C. Kales (Philadelphia, PA, USA)
- Constipation preceding Parkinson's disease Systematic review and meta-analysis
 K.L. Adams-Carr, A. Schrag, S. Shribman, J.P. Bestwick, A. Lees, A.J. Noyce (London, United Kingdom)
- 431 Elevated salivary DJ-1 in Parkinson's disease is associated with altered salivary secretion

 J.M. Masters, A.J. Noyce, G. Giovannoni, T.T. Warner, G.B. Proctor (Herts, United Kingdom)
- Clinical analysis of the non-motor symptoms of Parkinson's patients with diabetes
 Y. Liu, C. Liu, J. Zhang, M. Wang, S. Chen, C. Zhao (Jinan, China)
- 446 Emaciation and life prognosis in Parkinson's disease K. Park, T. Oeda, A. Umemura, M. Kohsaka, S. Tomita, H. Sugiyama, H. Sawada (Kyoto, Japan)
- Aspiration pneumonia in a hospitalized Parkinson's disease cohort
 L. Almeida, D. Martinez-Ramirez, K.W. Hageland, J.C. Giuni, C. Little, J.P. Chapman, B. Ahmed, E. Monari, M. Troche, M.S. Okun (Gainesville, FL, USA)



GUIDED POSTER TOUR 5 - LEWY BODY DEMENTIA & DEMENTIAS

Seaport F, 2nd Level, Seaport Tower 12:30 - 14:00 Tuesday, June 16, 2015

- 1274 Characteristic of cognitive and emotional personality disorders in patients with essential tremor R.J. Matmurodov, K.K. Khalimova (Tashkent, Uzbekistan)
- 1273 Parkinson's disease and cognitive reserve
 F. Mancini, S. Guzzetti, L.G. Manfredi, A. Caporali, R. Daini, A. Antonini (Milano, Italy)
- 1271 Pallidal deep brain stimulation improves memory in patients with cervical dystonia: Is the effect on the nucleus basalis of Meynert?
 - M. Chung, R. Huh, I.U. Song (Incheon, Korea)

Canada)

- 1272 Age-dependent distribution change of amyloid-beta protein in macaque brains K. Kimura, K. Inoue, F. Tanaka, M. Takada (Yokohama, Japan)
- 1279 Learning effect plays a significant role in performance on the Montreal cognitive assessment in patients with Parkinson's disease J.P. Squires, E. Nosova, K. Co, A. Book, O. Yu, V. Silva, C. Thompson, V. O'Neill, S. Yardley, S. Burden, M. McKeown, A.J. Stoessl, S.A. Cresswell (Vancouver, BC,
- 1277 Status of working memory in patients of Parkinson's disease
 A. Pal. M. Behari, R. Sharma (New Delhi, India)
- 1278 Cerebral microbleeds in dementia with Lewy bodies and Alzheimer disease and their influence on cognitive decline T. Poliakova, N. Trusova, A. Arablinskiy, O. Levin (Moscow, Russia)
- 1275 Effects of early iron deficiency on catecholaminergic transporters in rat brainW. Mohamed (Shebin el Kom, Egypt)
- Attentional modulation of activity in the nucleus basalis of Meynert in patients undergoing deep brain stimulation for Parkinson's disease dementia and Lewy body dementia J. Gratwicke, A. Oswal, S. Little, M. Beudel, V. Litvak, L. Zrinzo, M. Hariz, P. Brown, M. Jahanshahi, T. Foltynie (London, United Kingdom)

GUIDED POSTER TOUR 6 - HUNTINGTON'S DISEASE AND OTHER CHOREIFORM DISORDERS

Harbor A, 2nd Level, Harbor Tower 12:30 - 14:00 Tuesday, June 16, 2015

- 1375 First time use of SD-809 in Huntington disease (first-HD)S. Frank, Huntington Study Group/First-HD Investigators (Boston, MA, USA)
- 1384 Safety of pridopidine when taken with antidepressants or antipsychotics: Pooled analysis from two Huntington's disease clinical trials
 - G.B. Landwehrmeyer, S. Zhao, V. Abler (Ulm, Germany)
- 362 Clinical characteristics and genetic testing of a Huntingtin mutation negative cohort
 K.J. Peall, H.R. Morris, M. Wardle (Cardiff, United Kingdom)
- Objective measurement of gait abnormalities in Huntington disease using a shoe-worn inertial sensor
 P. Hogarth, A. Lenahan, A. Portillo, R.K. Ramachandran, K.A. Stenson,
 A.T.R. Legedza, M.C. Botfield, F.B. Horak, J. McNames, M. El-Gohary (Portland, OR, USA)
- 1380 Using a brief balance assessment to estimate disease onset in Huntington's disease A. Herndon, J. Corey-Bloom, A. Lam, C. Heil, S.K. Nam, P. Gilbert, D. Goble (La Jolla, CA, USA)
- 1395 Abnormal electrophysiological motor responses in Huntington's disease: Evidence of premanifest compensation L.M. Turner, R. Croft, A. Churchyard, J.C.L. Looi, D. Apthorp, N. Georgiou-Karistianis (Canberra, Australia)
- Callosal thickness progressively changes in Huntington disease: 30 month IMAGE-HD data
 F.A. Wilkes, M. Walterfang, C. Adamson, J.C.L. Looi, M.L. Seal, D. Velakoulis, J. Stout, A. Churchyard, P. Chua, G.F. Egan, N. Georgiou-Karistianis (Canberra, Australia)
- 1387 Metabolic brain correlates of apathetic symptoms in premanifested Huntington's disease: An 18-FDG PET study
 S. Martinez-Horta, J. Perez-Perez, F. Sampedro-Santalo, R. Fernandez-Bobadilla, M. Carceller, J. Pagonabarraga, A. Campolongo, B. Gomez-Anson, B. Pascual-Sedano, V. Camacho-Marti, D. Lopez-Mora, J. Kulisevsky (Barcelona, Spain)
- 1390 Gait speed modulation in prodromal and early manifest Huntington's disease: Role of internal and external cues A.K. Rao, F. Porciuncula, J. Uddin, K.S. Marder (New York, NY, USA)



GUIDED POSTER TOUR 7 - RATING SCALES

Harbor B-C, 2nd Level, Harbor Tower 12:30 - 14:00 Tuesday, June 16, 2015

- 1088 A multicentre study of the patient's perspective: The first Parkinson's disease pain questionnaire (King's PD pain quest) A.M. Rizos, P. Martinez-Martin, S. Pal, C. Carroll, D. Martino, C. Falup-Pecurariu, B. Kessel, A. Sauerbier, A. Martin, M. Parry, R. Inniss, L. Perkins, D. Trivedi, P. Odin, A. Antonini, K. Ray Chaudhuri (London, United Kingdom)
- 1075 Handling missing values in the MDS-UPDRS C.G. Goetz, S. Luo, L. Wang, B.C. Tilley, N.R. LaPelle, G.T. Stebbins (Chicago, IL, USA)
- 1082 Automatic spiral analysis for objective assessment of motor symptoms in Parkinson's disease
 - M. Memedi, A. Johansson, F. Bergquist, D. Nyholm (Borlänge, Sweden)
- 1089 How to screen for dysphagia in Parkinson's disease? The Munich dysphagia test (MDT-PD) – A patient reported outcome questionnaire J.A. Simons, A. Waldmann, U.M. Fietzek (Lübeck, Germany)
- 1073 UPDRS motor subscales provide a measure of key locomotor function
 - C. Curtze, J.G. Nutt, P. Carlson-Kuhta, M. Mancini, F.B. Horak (Portland, OR, USA)
- 1086 PDSS-2 cut-off scores for the severity of sleep disturbances in PD Patients
 - M.L. Muntean, H. Benes, F. Sixel-Döring, C. Trenkwalder (Kassel, Germany)
- 1076 Predictive validity of facial masking for experienced stigma in Parkinson's disease
 - S.D. Gunnery, M. Saint-Hilaire, C.A. Thomas, L. Tickle-Degnen (Medford, MA, USA)
- 1080 Inter-rater reliability of the hemifacial spasm severity scale (HFS-SS)
 - E.C. Lim, A.M. Quek, L.L. Yeo, L. Shen, A.W. Chow, R.C. Seet (Singapore)
- 1071 Correlation between the functional independence measure (FIM) and the scale for assessment and rating of ataxia (SARA) for the evaluation of spinocerebellar ataxia F.M. Branco Germiniani, T.V. Canelossi Rosa, R. Nickel, P.B.N. Liberalesso, H.A.G. Teive (Curitiba, Brazil)
- Minimal clinically important difference on the Parkinson's disease sleep scale 2nd version (PDSS-2)
 N. Kovács, Z. Aschermann, P. Ács, G. Deli, J. Janszky, S. Komoly, B. Faludi, K. Horváth (Pécs, Hungary)

GUIDED POSTER TOUR 8 - GENETICS

Harbor G, 2nd Level, Harbor Tower 12:30 - 14:00 Tuesday, June 16, 2015

- 1159 LRRK2 and GBA variants influence rate of motor progression in Parkinson's disease
 - M.Y. Davis, C. Johnson, J.B. Leverenz, D. Weintraub, J.Q. Trojanowski, A. Chen-Plotkin, V.M. Van Deerlin, S. Factor, C. Wood-Siverio, J.F. Quinn, K.A. Chung, A.L. Peterson-Hiller, L.S. Rosenthal, T.M. Dawson, M.S. Albert, J.G. Goldman, G.T. Stebbins, B. Bernard, D. Yearout, S. Hu, B.A. Cholerton, T.J. Montine, K.L. Edwards, C.P. Zabetian (Seattle, WA, USA)
- 1162 Novel recruitment strategy to enrich for LRRK2 mutation carriers
 - T. Foroud, D. Smith, J. Jackson, J. Verbrugge, C. Halter, L. Wetherill, K. Sims, W. Xin, V. Arnedo, S. Lasch, K. Marek (Indianapolis, IN, USA)
- 1164 Exon dosage analysis of parkin gene in Chinese sporadic Parkinson's disease
 - J.-F. Guo, X. Dong, X.X. Yan, B. Tang (Changsha, China)
- 1029 Using a GBA deficient drosophila model to understand pathogenic mechanisms in PD M.Y. Davis, K. Trinh, R. Thomas, B. Whittley, T. Montine, L. Pallanck (Seattle, WA, IISA)
- 1154 Glucocerebrosidase activity in Parkinson's disease with and without GBA mutations
 - R.N. Alcalay, O.A. Levy, C. Waters, S. Fahn, B. Ford, S.H. Kuo, P. Mazzoni, M.W. Pauciulo, W. Nichols, Z. Gan-Or, G.A. Rouleau, W.K. Chung, P. Wolf, P. Oliva, J. Kreutzer, K.S. Marder, X.K. Zhang (New York, NY, USA)
- 1167 The impact of rare variants in FUS and HTR2A in essential tremor
 - F. Hopfner, G. Stevanin, S.H. Müller, E. Mundwiller, M. Bungeroth, A. Durr, M. Pendziwiat, M. Anheim, S.A. Schneider, L. Tittmann, S. Klebe, D. Lorenz, G. Deuschl, A. Brice, G. Kuhlenbäumer (Kiel, Germany)
- 1234 Dystonia-spasticity in a patient with a novel SLC25A12 mutation
 - M. Parnes, L. Robak, J.M. Shulman, A. Stocco, J. Jankovic (Houston, TX, USA)
- 1223 Drug response to zinc and D-penicillamine in ATP7B mutant hepatic cell lines
 - G. Chandhok, J. Horvath, A. Aggarwal, M. Bhatt, A. Zibert, H.H.J. Schmidt (Münster, Germany)
- 1060 Leucine-rich repeat kinase 2 (LRRK2) impairs function of the retromer-associated WASH complex
 - K. Venderova, D. Kaing, R. Eismati, R. Joseph, L. Radek, H. Yu-Ju, H. Emily, T. Ariel, F. Ryan, F. Derek (Stockton, CA, USA)



GUIDED POSTER TOUR 9 - PARKINSON'S DISEASE: CLINICAL TRIALS

Seaport F, 2nd Level, Seaport Tower 12:00 - 13:30 Wednesday, June 17, 2015

- Updated long-term safety from ongoing phase 3 trials of levodopa-carbidopa intestinal gel in patients with advanced Parkinson's disease
 - R.L. Rodriguez, N. Schmulewitz, D. Stein, W.Z. Robieson, C.M. Hall, S. Eaton, K. Chatamra, J.A. Benesh, A.J. Espay (Gainesville, FL, USA)
- 260 Inhaled levodopa (CVT-301) provides rapid motor improvements after administration to Parkinson's disease patients when OFF
 - P.A. LeWitt, M.-H. Saint-Hilaire, D.G. Grosset, R. Hauser, F. Stocchi, M.I. Freed, T. DeFeo-Fraulini, M. Leinonen, K. Kieburtz (West Bloomfield, MI, USA)
- 312 The profile of the hospitalized and re-hospitalized Parkinson's disease patient: 5 year data from the National Parkinson's Foundation L. Shahgholi, S. De Jesus, S. Wu, Q. Pei, A. Hassan, P. Schmidt, M. Okun (Gainesville, FL, USA)
- Clinical predictors of functional decline in early treated Parkinson's disease: NET-PD LS1 cohort D. Bega, S. Kim, Y. Zhang, J. Elm, J. Schneider, R. Hauser, A. Fraser, T. Simuni, On Behalf of the NET-PD LS1 Investigators (Chicago, IL, USA)
- 297 A randomized controlled pilot study to evaluate the effect of rotigotine on Parkinson's disease-associated pain O. Rascol, T. Zesiewicz, K.R. Chaudhuri, M. Asgharnejad, E. Surmann, E. Dohin, S. Nilius, L. Bauer (Toulouse, France)
- 326 Assessing the burden of osteoporosis in a population of patients with idiopathic Parkinson's disease M.P. Sritharan, S.J. Jackson (Exeter, United Kingdom)
- 335 Prolonged-release oxycodone/naloxone (OXN PR) is associated with treatment benefits in patients with severe Parkinson's disease (PD)-related pain: Results from a randomised, controlled trial C. Trenkwalder, P. Martinez-Martin, O. Rascol, M. Lomax, J. DeCesare, M. Hopp, K.R. Chaudhuri (Kassel, Germany)
- Safety and clinical effects of NTCELL® [immunoprotected (alginate-encapsulated) porcine choroid plexus cells for xenotransplantation] in patients with Parkinson's disease (PD): 26 weeks follow-up B.J. Snow, K.M. Taylor, J.A. Stoessl, A. Bok, M. Simpson, D. McAuley, L. Macdonald, K.J. Durbin, J. Lee, H. Lin, V. Sossi, K. Dinelle, J. McKenzie (Auckland, New Zealand)
- 221 Efficacy of opicapone as adjunctive therapy to levodopa in patients with Parkinson's disease and motor fluctuations: Analysis of pooled phase III studies J. Ferreira, A. Lees, A. Santos, N. Lopes, R. Costa, C. Oliveira, R. Pinto, T. Nunes, J.F. Rocha, P. Soares-da-Silva (S. Mamede do Coronado, Portugal)
- 24 hour levodopa-carbidopa intestinal gel may reduce falls from unresponsive freezing of gait in Parkinson's disease F.C.F. Chang, D.S.Y. Tsui, N. Mahant, N. Wolfe, S.D. Kim, A.D. Ha, J.M. Griffith, M. Drury, V.S.C. Fung (Westmead, Australia)

GUIDED POSTER TOUR 10 – DYSTONIA

Harbor A, 2nd Level, Harbor Tower 12:00 - 13:30 Wednesday, June 17, 2015

- 1339 Neurochemical and behavioral dysfunction in a new mouse model of dopa-responsive dystonia S.J. Rose, X.Y. Yu, H.A. Jinnah, E.J. Hess (Decatur, GA, USA)
- 1343 Neural correlates of GNAL mutation in laryngeal dystonia K. Simonyan, G. Putzel, T. Fuchs, E. Rubien-Thomas, A. Blitzer, S.J. Frucht, L. Ozelius (New York, NY, USA)
- 1348 Embouchure dystonia: Phenomenology, natural history and mimicks
 - P. Termsarasab, S.J. Frucht (New York, NY, USA)
- 1302 Primary writing tremor is a dystonic trait: Evidence from a single family R. Erro, M. Ciocca, A. Batla, J. Rothwell, K.P. Bhatia (London, United Kingdom)
- 1290 Correlation between Tsui tremor scores and the Toronto western spasmodic torticollis rating scale (TWSTRS): An analysis of data from the ongoing INTEREST IN CD2 study C. Colosimo, D. Charles, V.P. Misra, P. Maisonobe, S. Om (Rome, Italy)
- 1355 Task specific oromandibular dystonia secondary to chewing khat (cantha edulis) P.M. Wadia, J.N. Khanna (Mumbai, India)
- 1292 Characteristics of dystonia in multiple system atrophy E.A. Coon, J.E. Ahlskog, M. Suarez, P.A. Low, W. Singer (Rochester, MN, USA)
- 1325 Sun exposure is an environmental factor for the development of blepharospasm A. Molloy, L. Williams, O. Kimmich, J. Butler, I. Beiser, E. McGovern, S. O'Riordan, R.B. Reilly, C. Walsh, M. Hutchinson (Dublin, Ireland)
- 1303 The role of TorsinA in developing neurons B. Fabry, K. Bretzel, T. Ott, K. Grundmann-Hauser, O. Rieß (Tübingen, Germany)



GUIDED POSTER TOUR 11 - SURGICAL THERAPY OF MOVEMENT DISORDERS

Harbor B-C, 2nd Level, Harbor Tower 12:00 - 13:30 Wednesday, June 17, 2015

- 662 Progressive ataxia under thalamic neurostimulation in essential tremor, neurostimulation effect or disease progression?
 - M.M. Reich, J. Brumberg, F. Steigerwald, G. Marotta, T. Musacchio, D.A. Kirsch, L. Müller, K. Herrmann, A. Buck, J. Volkmann, I.U. Isaias (Wuerzburg, Germany)
- 647 Impedance fluctuations in patients undergoing thalamic deep brain stimulation for essential tremor and their effect on clinical outcome
 - J. Eskenazi, E. Tan, A.N. Mamelak, M. Tagliati (Los Angeles, CA, USA)
- 638 Deep brain stimulation in rare movements disorders I. Beaulieu-Boire, C.C. Aquino, A.E. Lang, R.P. Munhoz, Y.Y. Poon, A. Valencia, M. Fallis, S. Kalia, M. Hodaie, E. Moro, A.M. Lozano, A. Fasano (Sherbrooke, QC, Canada)
- 652 Deep brain stimulation for dystonia: A programming algorithm evaluated by long-term results of the German multicentre study for generalized or segmental dystonia A.D. Kirsch, A.A. Kühn, J. Müller, J. Volkmann for the Deep-Brain Stimulation for Dystonia Study Group (Würzburg, Germany)
- 651 Functional assessment and quality of life in essential tremor following treatment with bilateral or unilateral deep brain stimulation and unilateral focused ultrasound thalamotomy D.S. Huss, R.F. Dallapiazza, B.B. Shah, M.B. Harrison, J.W. Elias (Staunton, VA, USA)
- Update on deep brain stimulation for refractory Tourette syndrome: 10 patients with CM-Pf/Voi stimulation
 R.S. Dowd, M.H. Pourfar, A.Y. Mogilner (New York, NY, USA)
- Therapeutic deep brain ablation via implanted DBS leads:
 Technique and potential complications
 A. Mantovani, A.R. Bona, M.S. Okun, K.D. Foote (Gainesville, FL, USA)
- The efficacy of VIM and VIM/ZI DBS in treatment of various tremors
 M. Bonello, J. Osman-Farah, P.R. Eldridge, B. Hammersley, L. Lowry, P. Byrne,
 N.A. Fletcher, S.H. Alusi (Liverpool, United Kingdom)
- 658 Reversal of acquired hepatocerebral degeneration with live donor liver transplant A.H. Qavi, S. Hammad, A.I. Rana, M. Salih, N.H. Shah, F.S. Dar, A. Ahmad (Islamabad, Pakistan)
- Target correlated mapping of therapeutic effects in deep brain stimulation using voxel-based estimations of neuroanatomical structures and volumes of tissue activated T.A. Dembek, M.T. Barbe, M. Åström, V. Visser-Vandewalle, L. Timmermann (Cologne, Germany)

GUIDED POSTER TOUR 12 - BASIC SCIENCE

Harbor G, 2nd Level, Harbor Tower 12:00 - 13:30 Wednesday, June 17, 2015

- 105 Association between locus coeruleus pathology and gait dysfunction in Parkinson's disease: A clinical-pathological preliminary analysis
 - K.A. Mills, Z. Mari, C. Bakker, G.M. Pontone, J.C. Troncoso, L.S. Rosenthal (Baltimore, MD, USA)
- Dopaminergic fibers from the substantia nigra to the olfactory bulb in the rat
 D. Alvarez-Fischer, O. Arias-Carrion, C. Klein, W.H. Oertel, G.U. Hoeglinger (Luebeck, Germany)
- 120 Alpha-synuclein immunohistochemistry studies in gastrointestinal tissue from preclinical Parkinson's disease patients M.G. Stokholm, E.H. Danielsen, S.J. Hamilton-Dutoit, P. Borghammer (Aarhus, Denmark)
- 571 Staining for unphosphorylated alpha-synuclein in the colon mucosa. No difference between patients with Parkinson's disease and healthy controls
 L. Antunes, S. Frasquilho, M. Ostaszewski, J. Weber, L. Longhino, P. Antony, A. Baumuratov, P. Derkinderen, R. Balling, N.J. Diederich (Luxembourg-City, Luxembourg)
- 119 Isradipine rescues alpha-synuclein toxicity in a zebrafish model of Parkinson's disease by upregulating autophagy M.C. Stahl, S. Prabhudesai, A. Lulla, J. Bronstein (Hershey, PA, USA)
- Mid-life milk consumption and substantia nigra neuron density at death
 G.W. Ross, R.D. Abbott, H. Petrovitch, K.H. Masaki, L.J. Launer, L.R. White, J. Nelson, C.M. Tanner (Honolulu, HI, USA)
- 88 Insights into freezing of gait from wearable sensors F.B. Horak, J.G. Nutt, M. Mancini (Portland, OR, USA)
- Gait outcomes characterize people with Parkinson's disease who transition to falling within the first year
 S. Lord, D. Burn, L. Rochester (Newcastle upon Tyne, United Kingdom)
- 507 Efficacy of high-frequency repetitive transcranial magnetic stimulation on depression in Parkinson's disease H.-W. Shin, S.J. Chung, Y.H. Sohn (Seoul, Korea)
- 121 Premorbid exercise engagement and motor reserve in Parkinson's disease M.K. Sunwoo, J.E. Lee, J.Y. Hong, B.S. Ye, H.S. Lee, J. Oh, J.S. Kim, P.H. Lee, Y.H. Sohn (Seongnam, Korea)



GUIDED POSTER TOUR 13 - ATYPICAL PARKINSONISM

Seaport F, 2nd Level, Seaport Tower 12:00 - 13:30 Thursday, June 18, 2015

- Prevalence of depression in atypical Parkinsonian disorders versus Parkinson's disease
 L. Almeida, M.S. Okun, D. Bowers, H. Ward, S. Fayad, C. Jacobson, N. McFarland (Gainesville, FL, USA)
- Benign progressive supranuclear palsy: A clinico-pathological analysis of cases with prolonged survival
 G. Respondek, C. Kurz, M. Stamelou, L.W. Ferguson, A. Rajput, W.Z. Chiu, J.C. Van Swieten, C. Troakes, S. al Sarraj, E. Gelpi, C. Gaig, E. Tolosa, S. Wagenpfeil, A. Giese, T. Arzberger, G. Hoeglinger (Munich, Germany)
- Highly specific radiographic marker predates clinical diagnosis in progressive supranuclear palsy
 E.K. Owens, K.N. Krecke, J.E. Ahlskog, R.D. Fealey, A. Hassan, K.A. Josephs,
 B.T. Klassen, J.Y. Matsumoto, J.H. Bower (Rochester, MN, USA)
- 814 The contribution of cerebellar cortex to cognitive impairment in multiple system atrophy using a probabilistic MR atlas-based topographic analysis

 J.J. Lee, D.K. Lee, J.H. Ham, J.M. Lee, Y.H. Sohn, P.H. Lee (Seoul, Korea)
- 823 Underlying dopaminergic deficit in suspected drug-induced Parkinsonism is associated with olfactory impairment J.F. Morley, G. Cheng, J. Bubroff, J.R. Wilkinson, J.E. Duda (Philadelphia, PA, USA)
- Clinicopathological features and diagnostic criteria for progressive supranuclear palsy with predominant cerebellar ataxia
 T. Shimohata, M. Kanazawa, H. Takahashi, M. Nishizawa (Niiqata, Japan)
- 789 Longitudinal follow-up and neurophysiological findings in two Chinese siblings with compound heterozygote mutations in ATP13A2 (PARK9) causing juvenile onset Parkinsonism (Kufor-Rakeb syndrome)
 H.L. Chiang, D.S.Y. Tsui, S.D. Kim, V.S.C. Fung (Sydney, Australia)
- 815 American multiple system atrophy natural history study P.A. Low, S.G. Reich, J. Jankovic, C.W. Shults, M.B. Stern, P. Novak, C.M. Tanner, S. Gilman, F.J. Marshall, F. Wooten, B. Racette, T. Chelimsky, W. Singer, S. May, D.M. Sletten, P. Sandroni, J. Mandrekar (Rochester, MN, USA)
- The visual estimation of midbrain to pons ratio combined with cerebrospinal fluid biomarkers improves the diagnostic accuracy of PSP
 N. Magdalinou, H. Ling, A. Noyce, L. Massey, R. Paterson, J. Schott, I. Davagnanam, C. Micallef, N. Fox, T. Warner, H. Zetterberg, A. Lees (London, United Kingdom)

GUIDED POSTER TOUR 14 - SURGICAL THERAPY OF PARKINSON'S DISEASE

Harbor A, 2nd Level, Harbor Tower 12:00 - 13:30 Thursday, June 18, 2015

- 548 Interventional MRI (iMRI) guided DBS: Factors affecting lead placement accuracy R.R. Coleman, J.L. Ostrem, P.A. Starr, A.J. Martin, S.E. Qasim, N. Ziman, P.S. Larson (San Francisco, CA, USA)
- Electrode lead induced white matter changes in patients treated with deep brain stimulation
 R. Erasmi, O. Granert, D. Zorenkov, O. Jansen, D. Falk, G. Deuschl, K. Witt (Kiel, Germany)
- Role of the frequency of STN stimulation on bradykinesia in Parkinsonian patients
 A. Zacharia, I. Sastre, D. Georgiev, M. Hariz, L. Zrinzo, T. Foltynie, M. Jahanshahi,
 J. Rothwell, P. Limousin (London, United Kingdom)
- 563 Differential effects of subthalamic nucleus stimulation frequency on speech intelligibility and verbal fluency in patients with Parkinson's disease
 T. Grover, D. Georgiev, R. Kaliola, L. Zrinzo, M. Hariz, T. Foltynie, M. Jahanshahi, P. Limousin, J. Candelario, E. Tripoliti (London, United Kingdom)
- 596 The maintenance of motor function with unilateral electrode dysfunction in Parkinson's disease after bilateral subthalamic nucleus deep brain stimulation H. Park, B.S. Jeon, H.J. Kim, W.W. Lee, C.W. Shin (Seoul, Korea)
- 582 Parkinson's disease (PD) patient experience with deep brain stimulation (DBS) surgery using asleep interventional MRI (iMRI)-guided versus awake physiology-guided implantation techniques
 S.C. LaHue, J.L. Ostrem, N.B. Galifianakis, M. San Luciano, N. Ziman, S. Wang, C. Racine, P.A. Starr, P.S. Larson, M. Katz (San Francisco, CA, USA)
- Motor cortex stimulation for gait disorders in advanced Parkinson's disease
 E.U. da Silva, L.A. Nilton, Jr., J.C.E. Veiga, J.M.d.A. Silva, H.C. de Souza (Sao Paulo, Brazil)
- 618 Effect of STN deep brain stimulation on autonomic functions in patients with Parkinson's disease
 P. Surathi, A. Lenka, K.R. Jhunjhunwala, A. Zafar, T.N. Sathyaprabha, R. Yadav,
 M. Nethravathi, D. Srinivas, A. Arivazhagan, P.K. Pal (Bangalore, India)
- Hesitation in deciding-deep brain stimulation of Parkinson's disease
 J.Y. Yun, M.R. Kim, Y.H. Lim, K.R. Kim, S.H. Paek, B.S. Jeon (Seoul, Korea)



GUIDED POSTER TOUR 15 - PARKINSON'S DISEASE: COGNITIVE AND BEHAVIORAL ASPECTS

Harbor B-C, 2nd Level, Harbor Tower 12:00 - 13:30 Thursday, June 18, 2015

- Pattern of working memory deficit in REM sleep behaviour disorder is the same as in Parkinson's disease
 M. Rolinski, N. Zokaei, C.E. Mackay, M. Husain, M.T.M. Hu (Oxford, United Kingdom)
- 867 Predictive validity of level II PD-MCI criteria for PDD J. Hoogland, J.A. Boel, R.M.A. de Bie, J.G. Goldman, B. Schmand, A.I. Tröster, D.J. Burn, I. Litvan, G.J. Geurtsen, The MDS PD-MCI Validation Study Group (Amsterdam, Netherlands)
- Long-term outcomes for Parkinson's disease patients with normal cognition
 D. Weintraub, K. Pigott, J. Rick, S.X. Xie, H. Hurtig, A. Chen-Plotkin, J. Duda, J. Morley, L. Chahine, N. Dahodwala, R. Akhtar, A. Siderowf, J. Trojanowski (Philadelphia, PA, USA)
- Visual hallucinations in Parkinson's disease with mild cognitive impairment do not imply a more severe cognitive deficit but a more severe cerebral hypometabolism
 C. Gasca-Salas, P. Clavero, D. García-García, R. González-Redondo, J. Obeso, M.C. Rodríguez-Oroz (Toronto, ON, Canada)
- 846 Validation of predictors of dementia in Parkinson's disease J.B.M. Anang, S.R. Romenets, T. Nomura, R.B. Postuma (Montreal, QC, Canada)
- Substantia nigra hyperechogenicity and cognitive functions: Results from the TREND study
 S. Heinzel, R. Yilmaz, I. Liepelt-Scarfone, B. Roeben, R. Niebler, G.W. Eschweiler, A.J. Fallgatter, F.G. Metzger, W. Maetzler, D. Berg (Tuebingen, Germany)
- 859 Using virtual reality to investigate the deficits in voluntary gait initiation and cessation in patients with Parkinson's disease and freezing of gait
 M.J. Georgiades, M. Gilat, J.M. Shine, S.J.G. Lewis (Sydney, Australia)
- 877 Does prolonged use of anticholinergic medication contribute to cognitive impairment in early Parkinson's
 - R.A. Lawson, A.J. Yarnall, G.W. Duncan, D.P. Breen, T.K. Khoo, D. Brooks, R.A. Barker, D. Collerton, J.-P. Taylor, D.J. Burn (Newcastle upon Tyne, United Kingdom)

GUIDED POSTER TOUR 16 - PARKINSON'S DISEASE: NEUROPHARMACOLOGY

Harbor G, 2nd Level, Harbor Tower 12:00 - 13:30 Thursday, June 18, 2015

- 237 F15599, a 5-HT1A biased agonist with preferential affinity for post-synaptic receptors, reduces dyskinesia without impairing the anti-Parkinsonian effect of L-DOPA, in the MPTP-lesioned macaque

 P Hunt TH Johnston A Newman-Tancredi S H Fox J M Brotchie (Montreal)
 - P. Huot, T.H. Johnston, A. Newman-Tancredi, S.H. Fox, J.M. Brotchie (Montreal, Canada)
- 170 Pharmacokinetics, safety and tolerability of sub-lingually administered APL-130277 compared to subcutaneous apomorphine in healthy volunteers
 A. Agro, J. Dubow, L. Toong-Chow, A. Giovinazzo (Toronto, ON, Canada)
- 281 Pharmacokinetic factors and levodopa-induced dyskinesia in Parkinson's disease
 T. Oeda, A. Umemura, S. Tomita, M. Kohsaka, K. Park, Y. Mori, H. Sawada (Kyoto, Japan)
- BDNF rs6265 met allele confers suboptimal response to medication in early Parkinson's disease subjects
 C.E. Sortwell, M.L. Hacker, P.E. Konrad, T.L. Davis, J.S. Neimat, L. Wang, Y. Song, Z.R. Mattingly, A. Cole-Strauss, J.W. Lipton, D. Charles (Grand Rapids, MI, USA)
- 331 Single oral treatment with the 5-HT1A/B agonist, eltoprazine, counteracts L-dopa-induced dyskinesias in Parkinson's disease: A phase I/IIA, double-blind, randomized, placebo-controlled, dose-finding study
 P. Svenningsson, C. Rosenblad, K. af Edholm Arvidsson, K. Wictorin, C. Keywood, B. Shankar, D.A. Lowe, A. Björklund, H. Widner (Stockholm, Sweden)
- 259 Predictability of response to apomorphine subcutaneous injections: Responder analyses from the AM-IMPAKT trial M. Lew, S. Isaacson, F. Pagan, W. Ondo (Los Angeles, CA, USA)
- Analysis of the incidence of supine hypertension with droxidopa
 S. Isaacson, W.B. White, G.J. Rowse, L.A. Hewitt (Boca Raton, FL, USA)
- 207 Efficacy of IPX066, an extended-release formulation of carbidopa-levodopa, in advanced Parkinson's disease patients with troublesome dyskinesia R. Dhall, L. Struck, R. Rubens, V. Shah, S. Gupta (Phoenix, AZ, USA)



Kingdom)

PARKINSON'S DISEASE: NEUROIMAGING AND NEUROPHYSIOLOGY

- Neurovascular status in idiopathic Parkinson's disease; an MRI study
 S. Al-Bachari, H.C.A. Emsley, R. Vidyasagar, L.M. Parkes (Manchester, United
- Apathy in Parkinson's disease (PD) as a disconnection syndrome – A resting state fMRI study S. Appel-Cresswell, A. Liu, S.J. Lin, N. Baradaran, T. Kang, J.Z. Wang, M.J. McKeown (Vancouver, BC. Canada)
- Cortical metabolic alterations underlying cognitive decline in Parkinson's disease
 T. Baba, Y. Hosokai, Y. Nishio, A. Kikuchi, T. Hasegawa, K. Hirayama, K. Suzuki, M. Aoki, Y. Itoyama, S. Takahashi, H. Fukuda, A. Takeda, E. Mori (Sendai, Japan)
- 4 Corpus callosal atrophy in Parkinson's disease I.O. Bledsoe, G.T. Stebbins, B.A. Bernard, J.G. Goldman (Chicago, IL, USA)
- The role of the supplementary motor area in freezing of gait A theta-burst stimulation study in Parkinson's disease F. Brugger, R. Wegener, S. Bohlhalter, E. Abela, S. Hägele-Link, J. Walch, G. Kägi (St. Gallen, Switzerland)
- A sensory geste-like movement to stop tremor in Parkinson's disease A clinical and electrophysiological case report
 F. Brugger, B. Balint, R. Erro, F. Gövert, E. Antelmi, J.C. Rothwell, K.P. Bhatia (London, United Kingdom)
- Disruption of resting state functional connectivity with Parkinson's disease progression
 M.C. Campbell, J.M. Koller, A.Z. Snyder, J.S. Perlmutter (St. Louis, MO, USA)
- 8 Visual motor control in patients with Parkinson's disease J. Chen, S.L. Ho, M.C. Lee, S.K. Chang, Y.Y. Pang, L. Li (Hong Kong)
- 9 The impact of amyloid deposition on brain network functional connectivity in Parkinson's disease L. Christopher, M. Criaud, A. Kucyi, Y. Koshimori, P. Rusjan, N. Lobaugh, A.E. Lang, S. Houle, A.P. Strafella (Toronto, ON, Canada)
- Gray matter changes in Parkinson's disease with freezing of gate
 M. Delgado-Alvarado, L. García-Penton, H. Jiménez-Urbieta, B. Gago, C. Caballero, M. Carreiras, M.C. Rodriguez-Oroz (San Sebastián, Spain)
- 11 Cerebral mechanisms underlying initiation and propagation of Parkinson's tremor A dynamic causal modeling study M.F. Dirkx, H.E. Den Ouden, E. Aarts, M. Timmer, R. Cools, R.A. Esselink, B.R. Bloem, I. Toni, R.C. Helmich (Nijmegen, Netherlands)
- 12 Derivation of a levodopa-related pattern with metabolic imaging in idiopathic Parkinson's disease
 C. Dresel, C. Tang, D. Eidelberg (Manhasset, NY, USA)
- Differential audiovisual processing in Parkinson's disease C. Fearon, J. Butler, C. McDonnell, I. Killane, R. Reilly, T. Lynch (Dublin, Ireland)
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- 346 Contribution of a pharmacist to the multidisciplinary consultation on Parkinson's short-stay ward L. Wijma-Vos (Groningen, Netherlands)
- 347 Patient and provider perception of video telehealth in Parkinson's disease (PD) J.R. Wilkinson, D. Korom-Djakovic, M. Spindler, J. Morley, J. Duda (Philadelphia, PA, USA)
- 349 Efficacy and safety of rotigotine transdermal patch in Chinese patients with early-stage Parkinson's disease: A randomized, double-blind, placebo-controlled study Z. Zhang, M. Asgharnejad, X. Du, E. Surmann, L. Bauer (Beijing, China)
- 350 Rhythmic cueing with the Google glass for patients with Parkinson's disease Y. Zhao, T. Heida, J.H. Nonnekes, R.J.A. van Wezel (Enschede, Netherlands)

CHOREAS (NON-HUNTINGTON'S DISEASE)

351 New onset progressive chorea with elevated striational Ab titers

J.P. Battista, W. Tse (New York, NY, USA)



- Chorea as presenting clinical feature in a patient with cryopyrin-associated periodic syndrome (CAPS)
 C. Blahak, C.J. Schwarzbach, W.H. Schmitt, H. Baezner, K. Szabo, M.G. Hennerici (Mannheim, Germany)
- 353 Neurologic and systemic variability in benign hereditary chorea due to NKX2-1 mutations E.A. Coon, M. Milone, Z. Niu, M.C. Patterson, J.E. Ahlskog (Rochester, MN, USA)
- 354 HIV seroconversion-associated chorea M.V. Della Coletta, R.A.P. Souza (Manaus, Brazil)
- 355 A m.12242A>G MTTS2 (mt-tRNASer(AGY)) variant in a patient with dystonia and choreoathetoid movements R.J.B. Ellis, M. Bonello, N.A. Fletcher, S.A. Hardy, R.W. Taylor (Liverpool, United Kingdom)
- 356 ADCY5 mutations can cause benign hereditary chorea R. Erro, N.E. Mencacci, J. Hersheson, S. Wiethoff, B. Balint, C. Ganos, M. Stamelou, N.P. Quinn, H. Houlden, N.W. Wood, K.P. Bhatia (London, United Kingdom)
- Acute onset hemichorea-hemiballism after treatment with recanalization of middle cerebral artery
 H. Kim, J.H. Jin, H.G. Roh, H.Y. Kim (Seoul, Korea)
- 358 Network localization of hemichorea S. Laganiere, A. Boes, L. Shih, M. Fox (Boston, MA, USA)
- Choreoballism arising from the involvement of the putamen:
 A report of 18 cases and a systemic literature review
 D. Lee, H.G. Woo, T.B. Ahn (Seoul, Korea)
- Management of aceroplasminemia with a combination of venesection, fresh frozen plasma and desferrioxamine
 M. Narasimhan, S. Ramanathan, C. Turner, L. Ramon (Sydney, Australia)
- 361 Optical coherence tomography in Huntington disease V. Parisi, E. Gatto, S. Ochoa, D. Scocco, E. Fernandez Rey (Buenos Aires, Argentina)
- Clinical characteristics and genetic testing of a Huntingtin mutation negative cohort
 K.J. Peall, H.R. Morris, M. Wardle (Cardiff, United Kingdom)
- Pyramidal involvement in Huntington's disease. Preliminary report
 A. Sanguinetti, E.M. Gatto, M. Cesarini, J. Etcheverry, V. Parisi, G. Persi, L. Bevacqua, P. Lopez, A. Bertotti (Buenos Aires, Argentina)
- 364 Non-rapid-eye movement and rapid-eye-movement parasomnia with sleep breathing disorder, chorea and dementia associated with antibodies to IgLON5: Case report M.M. Simabukuro, L. Sabater, T. Adoni, R.G. Cury, M.S. Haddad, C.H. Moreira, L. Oliveira, R.C. Alves, L.A. Soster, R.A. Nogueira, C. Graig, R. Nitrini (São Paulo, Brazil)

MYOCLONUS

- Ortostatic myoclonus: Clinical and electrophysiological features of four patients
 H. Apaydin, B. Zeydan, A. Gunduz, G. Kiziltan, S. Ertan, M. Kiziltan (Istanbul, Turkey)
- Cortical myoclonus in neurocritical care unit in patients with acute stroke and stroke like syndrome patients
 N. Chaudhary, J.M.K. Murthy, S. Jaiswal, M. Reddy (Hyderabad, India)

- 367 Electrophysiological findings in Rasmussen's encephalitis A. Gunduz, M. E. Kiziltan, T. Coskun, S. Delil, N. Yeni, Ç. Özkara (Istanbul, Turkey)
- 368 Isolated lingual myoclonus as a presentation of celiac disease D.C. Khandelwal, C.M. Sharma, B. Kumawat (Jaipur, India)
- Psychiatric features may be clinical spectrum of myoclonus dystonia syndrome regardless of SGCE gene mutation J.Y. Kim, W.W. Lee, H.J. Kim, B.S. Jeon (Seoul, Korea)
- 370 Limbic encephalitis associated with anti–voltage-gated potassium channel complex antibodies mimicking Creutzfeldt-Jakob disease
 M.J. Liu, G. Chang (Phoenix, AZ, USA)
- An interesting case of post-infectious myoclonus secondary to infection with cytomegalovirus
 S. Padidam, D.E. Kremens (Philadelphia, PA, USA)
- 372 The efficacy of piracetam for management of cortical myoclonus: A meta-analysis of randomized control clinical trials
 - A.R. Sanchez, R.C.M.L. Alemany (Pasig City, Philippines)
- 373 The prevalence of affected muscles and the associations between the numbers of affected muscles and age of onset and duration of disease in hemifacial spasm
 K. Ukantapornpong, P. Chairangsaris (Bangkok, Thailand)
- The added value of neurophysiologic investigations in post-hypoxic myoclonus
 J.C. van Zijl, M. Beudel, B.M. de Jong, J. van der Naalt, H.J. van der Hoeven,
 F. Lange, W.M. van den Bergh, J.W.J. Elting, M.A.J. Tijssen (Groningen, Netherlands)

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- 375 Safety and efficacy of transdermal rotigotine for the treatment of fatigue and quality of life (QOL) in patients with Parkinson's disease
 - K. Abe, S. Kitamura, I. Yokoa, J. Ogura, M. Fjita, H. Yoshikawa (Nishinomiya, Japan)
- Constipation preceding Parkinson's disease Systematic review and meta-analysis
 K.L. Adams-Carr, A. Schrag, S. Shribman, J.P. Bestwick, A. Lees, A.J. Noyce (London,
- United Kingdom)

 377 Levodopa attenuates fatigue in reserpine-treated mice An
 - A.S. Aguiar, Jr., D.L. Scheffer, R.D.S. Prediger, A.S. Latini (Florianópolis, Brazil)
- 378 Aspiration pneumonia in a hospitalized Parkinson's disease cohort
 - L. Almeida, D. Martinez-Ramirez, K.W. Hageland, J.C. Giuni, C. Little, J.P. Chapman, B. Ahmed, E. Monari, M. Troche, M.S. Okun (Gainesville, FL, USA)
- Delineating non-motor symptoms in early Parkinson's disease and first-degree relatives
 - F. Baig, M. Lawton, M. Rolinski, C. Ruffmann, K. Nithi, S.G. Evetts, H.R. Fernandes, Y. Ben-Shlomo, M.T.M. Hu (Oxford, United Kingdom)



- 380 Safinamide significantly reduces pain treatments when given as add-on therapy to levodopa in patients with Parkinson's disease and fluctuations
 - P. Barone, C. Cattaneo, E. Bonizzoni, R. La Ferla, M. Sardina (Baronissi (Salerno), Italy)
- Impulse control disorder and rapid eye movement sleep behavior disorder in Parkinson's disease
 Bayard, Y. Dauvilliers, H. Yu, M. Croisier Langenier, A. Rossignol, M. Charif, C. Geny, V. Cochen De Cock (Montpellier, France)
- 382 Association of side of onset of motor symptoms to prevalence of various domains of non-motor symptoms (NMS) in Parkinson's disease (PD)
 R.S. Boddepalli, T.S. Khan (Weston, FL, USA)
- 383 Unmasking the face of Parkinson's disease: Immediate and 3 month followup from a randomized double-blind shamcontrolled behavioral intervention D. Bowers, C. Sapienza, R. Rodriguez, H. Fernandez, M.S. Okun (Gainesville, FL, IISA)
- Rotigotine objectively improves sleep in Parkinson's disease:
 A pilot study with actigraphic recording
 G. Calandra-Buonaura, P. Guaraldi, A. Doria, S. Nassetti, V. Favoni, S. Cevoli,
 F. Provini, P. Cortelli (Bologna, Italy)
- 385 Sleep and sleepiness symptoms as predictors of cognitive decline in early Parkinson's disease: Results from the PPMI study
 L.M. Chahine, B. Tran, S. Xie, S. Christi, D. Abi, C. Linder, R. Purri, T. Simuni,
- G. Murray, W. Daniel (Philadelphia, PA, USA)
 Fatigue in Parkinson's disease: The evidence of regional cerebral glucose metabolism abnormalities
 S.S. Cho, K. Aminian, S. Houle, A.E. Lang, M. Criaud, A.P. Strafella (Toronto, ON,
- Olfaction and neuropsychiatric symptoms in early Parkinson's disease
 J.K. Choi, J.Y. Hong, M.K. Sunwoo, J.H. Ham, J.J. Lee, P.H. Lee, Y.H. Sohn (Wonju,
- 388 Comparative patient satisfaction and efficacy of a Parkinson's disease enrichment program (PEP)
 T.K. Choudhury, M.K. York, C. Harris, K. Crist, B. Treece, T. Satterwhite (Houston, TX,
- Does the pattern of striatal dopamine depletion contribute non-motor symptoms in Parkinson's disease?
 S.J. Chung, J.J. Lee, J.H. Ham, P.H. Lee, Y.H. Sohn (Seoul, Korea)
- Supine sleep and obstructive sleep apnea syndrome in Parkinson's disease
 V. Cochen De Cock, N. Benard-Serre, V. Driss, M. Charif, B. Carlander, D. Cugy, S. Bayard (Montpellier, France)
- Excessive daytime sleepiness in Parkinson's disease:
 Subjective and objective measures
 V. Cochen De Cock, S. Bayard, I. Jaussent, M. Charif, B. Carlander, C. Geni,
 Y. Dauviliers (Montpellier, France)

- 392 Pharmacological treatment for apathy in Parkinson's disease: A systematic review
 - C.A. Cooper, N. Dahodwala (Philadelphia, PA, USA)
- Subthalamic stimulation lead coordinates correlate with non-motor effects in Parkinson's disease
 H. Dafsari, J.N. Petry-Schmelzer, T. Dembek, A. Rizos, A. Antonini, P. Martinez-Martin, K.R. Chaudhuri, V. Visser-Vandewalle, L. Timmermann, On Behalf of EUROPAR and the IPMDS Non Motor PD Study Group (Cologne, Germany)
- Dopamine dysregulation syndrome in patients with Parkinson's disease in a rural based movement disorders clinic in Western India
 S.D. Desai (Anand, India)
- 395 Compulsive tobacco use in patients with Parkinson's disease on dopamine agonist /levodopa therapy: Is it also an impulse control disorder?
 S.D. Desai (Anand, India)
- The non motor network in early Parkinson's disease: Is there first network tightening followed by network loosening?
 N.J. Diederich, N. Sauvageot, V. Pieri, G. Hipp, M. Vaillant (Luxembourg-City, Luxembourg)
- 397 Does movement impairments cause anxiety in Parkinson's disease? A chicken or egg question

 K.A. Ehgoetz Martens, C.G. Ellard, Q.J. Almeida (Waterloo, ON, Canada)
- 398 Intensive rehabilitation enhances lymphocytes BDNF-TrkB signaling in patients with Parkinson's disease
 C. Fontanesi, S. Kvint, G. Frazzitta, G. Pezzoli, A. Di Rocco, A. Quartarone, H.Y. Wang, M.F. Ghilardi (New York, NY, USA)
- 399 Olfaction and nonmotor symptoms (NMS) in subjects with scans without evidence of dopaminergic deficit (SWEDDs)
 M.E. Fullard, D. Weintraub, J.E. Duda, J.F. Morley (Philadelphia, PA, USA)
- 400 Relationship between olfaction, motor and nonmotor symptoms and dopamine transporter binding in de novo PD
 M.E. Fullard, D. Weintraub, J.E. Duda, J.F. Morley (Philadelphia, PA, USA)
- 401 Prevalence and severity of non motor symptoms (NMS) of Parkinson's disease (PD) in the elderly An Australian perspective
 S. Gangadharan, A. Withanage, C.P. Padmakumar, M. Rees, A. Johnson (Newcastle, Australia)
- 402 The assessment of visuospatial functions in Parkinson's disease patients without dementia
 M. Gultekin, A. Ekinci, M. Mirza (Kayseri, Turkey)
- The assessment of apathy symptoms in Parkinson's disease patients without dementia
 M. Gultekin, A. Ekinci, M. Mirza (Kayseri, Turkey)
- 404 Assessing postural stability in early stages of Parkinson's disease
 - H.D. Hambardzumyan, H.M. Manvelyan (Yerevan, Armenia)
- 405 Non-motor symptoms in Parkinson's disease: A correlation with depression and quality of life
 H.D. Hambardzumyan, H.M. Manvelyan (Yerevan, Armenia)



- 406 Characterize sleep related disorders in subtypes of Parkinson's disease
 - S. Hanif, M.S. Bashir, T.M. Muhammad, J.A. Bajwa (Riyadh, Saudi Arabia)
- 407 Use of the SpeechVive device improves communication in people with Parkinson's disease
 J.E. Huber, S. Snyder, C.E. Rountrey, C.L. Ludlow (West Lafayette, IN, USA)
- 408 Zero non-motor symptoms in a martial arts expert L.J. Jaffe (San Diego, CA, USA)
- 409 Impulse control disorders and compulsive behaviors in Parkinson's disease and control subjects
 S. Jesus, C. Cortes, I. Huertas-Fernandez, M.T. Caceres-Redondo, F. Carrillo, M. Bernal-Escudero, L. Vargas-Gonzalez, M. Carballo, P. Mir (Seville, Spain)
- 410 An 8-year follow-up on the effect of subthalamic deep brain stimulation on pain in Parkinson's disease
 Y.J. Jung, H.J. Kim, B.S. Jeon, H. Park, W.W. Lee, S.H. Paek (Seoul, Korea)
- 411 Evaluation of cardiovascular autonomic dysfunction in Parkinson's disease by cardiovascular autonomic indexes Y.J. Kang, T.K. Lee, J.H. Park, K.B. Sung (Bucheon-si, Korea)
- 412 Increased energy expenditure may be reversed by dopaminergic medications in patients with Parkinson's disease
 - K. Kashihara, A. Hongo, H. Kagayama, K. Hasegawa (Okayama, Japan)
- 413 Prevalence, severity and treatment rate of major non-motor Parkinson's disease symptoms according to social media platform PatientsLikeMe A. Killoran (Morgantown, WV, USA)
- Sleep assessment in Parkinson's disease The use of Parkinson's KinetiGraph
 L. Klingelhoefer, M. Horne, A. Rizos, A. Sauerbier, S. McGregor, D. Trivedi, L. Perkins, K. Ray Chaudhuri (Dresden, Germany)
- 415 The Biodex system: Sensitive for fall detection in Parkinsonism
 - E. Lapointe, E. Lafleur Prudhomme, M. Panisset (Sherbrooke, QC, Canada)
- 416 REM sleep disorders in early onset Parkinsonism: Non-motor symptoms and the functional predictors perspective in advanced age L.A. Leandro, H.G. Teive (Curitiba, Brazil)
- 417 Swallowing, voice and freezing of gait in patients with Parkinson's disease – Correlation between each other and contribution to quality of life
 - S.Y. Lee, S.M. Cheon, J.W. Kim (Busan, Korea)
- 418 The role of catastrophizing and non-motor symptoms in quality of life of Parkinson's disease patients
 S.F. Lerman, G. Bronner, N. Warman-Alaluf, O.S. Cohen, G. Yahalom, S. Hassin-Baer (Tel Hashomer, Israel)
- Clinical analysis of the non-motor symptoms of Parkinson's patients with diabetes
 Y. Liu, C. Liu, J. Zhang, M. Wang, S. Chen, C. Zhao (Jinan, China)

- 420 Prevalence of non-motor fluctuations in Parkinson's disease R. Llorens-Arenas, M. Rodriguez-Violante, A. Cervantes-Arriaga, D. Piña-Fuentes, M.I. Lopez-Belmonte, P. Escobar-Martinez (Mexico City, Mexico)
- 421 Fatigue and cardiac sympathetic denervation in Parkinson's disease
 - C.C. Luca, D. Spengler, F. Nahab, A. Serafini, M. Georgiou, C. Singer (Miami, FL, USA)
- 422 Efficacy and safety profile of prolonged release oxycodone in combination with naloxone (OXN PR) in Parkinson's disease patients with chronic pain
 G. Madeo, T. Schirinzi, M. Pierantozzi, A. Stefani, S. Natoli, A. Pisani (Rome, Italy)
- Odour identification testing is a quick and accurate diagnostic tool for Parkinson's disease
 P. Mahlknecht, K. Seppi, B. Pinter, E. Reiter, C. Müller, A. Djamshidian, M. Nocker, G.K. Wenning, F. Krismer, J. Willeit, S. Kiechl, W. Poewe, G. Göbel (Innsbruck, Austria)
- 424 Clinical features and varieties of non motor fluctuations in Parkinson's disease
 N. Mansurova, A. Prokhorova (Tashkent, Uzbekistan)
- Changes in retinal morphology and visual field in early Parkinson's disease
 C.J. Mao, L. Ling Li, X.Y. Ji, J. Jing Wei, J. Jing Chen, S. Sha-Sha Guo, Y. Yi Chen, S.J. Li, C.F. Liu (Suzhou, China)
- 426 The clinical analysis of sleep disorders in patients with Parkinson's disease and the study of them by polysomnogram
 Z. Mao, S. Ji, Q. Yang, H. Ye, Z. Xue (Wuhan, China)
- 127 The contribution of the insula in Parkinson's disease: A quantitative meta-analysis study
 M. Marion, L. Christopher, P. Boulinguez, B. Ballanger, A.E. Lang, S.S. Cho, A.P. Strafella (Toronto, ON, Canada)
- 428 Heart rate variability by passive leg raising test in patients with Parkinson's disease and multiple system atrophy in early stages
 - V.A. Martínez Villota, J.D. Triana, W. William Fernández Escobar (Pasto, Colombia)
- 429 Combining antipsychotics and antidepressants increase falls in Parkinson's disease
 - D. Martinez-Ramirez, J.C. Giugni, L. Almeida, B. Ahmed, V. Rundle-Gonzalez, A.R. Bona, E. Monari, C.J. Hass, M.S. Okun (Gainesville, FL, USA)
- Fatigue is associated with performance on a demanding finger motor task in Parkinson's disease
 D. Martino, T. Tamburini, P. Zis, E. Pelosin, A. Sauerbier, G. Abbruzzese, K. Ray-Chaudhuri, L. Avanzino (London, United Kingdom)
- 431 Elevated salivary DJ-1 in Parkinson's disease is associated with altered salivary secretion J.M. Masters, A.J. Noyce, G. Giovannoni, T.T. Warner, G.B. Proctor (Herts, United Kingdom)
- The effect of sleep and wakefulness disorders on cognitive function in Parkinson's disease
 R.J. Matmurodov, O.E.U. Turgunkhujaev, K.M. Khalimova, U.S. Ergashev (Tashkent, Uzbekistan)



- 433 Quality of life in PD correlates with arising from chair, gait and postural stability
 - A. Mentreddi, N. Patel, I. Bernstein, K. Pravin, S.M. McClintock, C.M. Cullum, M.M. Husain, R.B. Dewey (Dallas, TX, USA)
- Inner retinal layer thickness of the fovea depends on dopaminergic medications in Parkinson's disease
 Miri, S. Glazman, Y. Ding, S. Slotnick, E.M. Shrier, A. Joh, I. Bodis-Wollner (Brooklyn, NY, USA)
- 435 The effect of istradefylline for anhedonia in Parkinson's disease
 - H. Nagayama, M. Mishina, K. Kimura (Bunkyo-Ku, Japan)
- Pattern of non motor symptoms (NMS) among subtypes of Parkinson's disease in Arab ancestry
 S. Nahrir, M.N. AlMotiri, Z.G. AlJohani, G.A. Alhifthi, T.M. Alayan, J.A. Bajwa (Riyadh, Saudi Arabia)
- Parkinson's disease duration: Non motor symptoms: Arab ancestry "The new dimension"
 S. Nahrir, Z.G. AlJohani, G.A. Alhifthi, M.N. AlMotiri, T.M. Alayan, J.A. Bajwa (Riyadh, Saudi Arabia)
- Early onset Parkinson's disease vs. late onset Parkinson's disease Is there any difference in non motor symptoms among Arab ancestry?
 Nahrir, G.A. Alhifthi, M.N. AlMotiri, Z.G. AlJohani, T.M. Alayan, J.A. Bajwa (Riyadh, Saudi Arabia)
- Does impaired peripheral vasoconstrictor response predict orthostatic hypotension in Parkinson's disease?
 T. Nakamura, M. Suzuki, A. Okada, J. Suzuki, M. Hirayama, G. Sobue (Nagoya City, Japan)
- Olfactory dysfunction in Parkinson's disease could be associated with central cholinergic system
 E. Oh, J.G. Lim, J. Park, J. Youn, J.S. Kim, W. Jang (Daejeon, Korea)

P. Soares-da-Silva (S. Mamede do Coronado, Portugal)

- Opicapone and non-motor symptoms in Parkinson's disease:
 Results from a double-blind, randomized, placebo-controlled study and open-label extension
 C. Oliveira, A. Lees, J. Ferreira, N. Lopes, R. Costa, R. Pinto, T. Nunes, J.F. Rocha,
- Heart rate variability during sleep stages to assess autonomic function in patients with Parkinson's disease: A preliminary polysomnographic study
 D.B. Oropeza-Canto, M. Velázquez-Vaquero, R. Flores-Morales, A. Espinosa-Cerón
 - D.B. Oropeza-Canto, M. Velázquez-Vaquero, R. Flores-Morales, A. Espinosa-Cerón (Puebla, Mexico)
- 443 Prevalence of non-motor symptoms in Parkinson's disease versus age-matched healthy controls: A systematic review with meta-analysis
 G. Pagano, E.E. Tan, M. Tagliati (Campobasso, Italy)
- 444 Course of cognitive and neuropsychiatric features in patients with Parkinson's disease
 H.K. Park, J.E. Kim (Goyang, Korea)
- 445 Orthostatic dizziness in Parkinson's disease is attributed to impaired cerebral autoregulation: A trancranial doppler study J. Park, W. Jang, J.S. Kim, J. Youn, E. Oh (Busan, Korea)

- 446 Emaciation and life prognosis in Parkinson's disease K. Park, T. Oeda, A. Umemura, M. Kohsaka, S. Tomita, H. Sugiyama, H. Sawada (Kyoto, Japan)
- 447 E-DUO Study: Use of levodopa-carbidopa intestinal gel in Spanish advanced Parkinson's disease patients. Non-motor symptoms and clinical global impression subanalyses J.C. Parra, D. Santos, M.J. Catalán, I. Regidor (Madrid, Spain)
- An observational study of pattern of admission in Parkinson's disease
 B.S. Paul, G. Paul, G. Singh, S. Kaushal, U. Verma (Ludhiana, India)
- 449 Real time imaging of stomach motility in patients with REMsleep behavior disorder and de novo Parkinson's disease E.K. Paule, T. Hasemann, A. Hermsen, E. Sittig-Wiegand, D. Vadasz, K. Eggert, S. Knake, W.H. Oertel (Mainz, Germany)
- 450 Effect of acute non-oral dopaminergic (apomorphine and levodopa) treatment on non-motor symptoms in Parkinson's disease
 - L. Perkins, M. Politis, F. Niccolini, A. Sauerbier, R. Inniss, A. Martin, D. Trivedi, K. Ray-Chaudhuri (London, United Kingdom)
- Dysarthria in Parkinson's disease: Lusophony vs. francophony comparison (FraLusoPark)
 S. Pinto, I. Guimarães, R. Rothe-Neves, J. Sadat, R. Cardoso, A.T. Britto, F. Viallet, J. Ferreira, F. Cardoso (Aix-en-Provence, France)
- REM sleep behavior disorder and neuropathology in Parkinson's disease
 R.B. Postuma, C.H. Adler, J.G. Hentz, H.A. Shill, E. Driver-Dunckley, M.N. Sabbagh, S.A. Jacobson, C.M. Belden, L.I. Sue, B.N. Dugger, G. Serrano, T.G. Beach (Montreal, QC, Canada)
- Non-motor symptom burden in Parkinson's disease: A longitudinal study
 K.M. Prakash, N.V. Nadkarni, W.K. Lye, L.M. Chew, M.H. Yong, E.K. Tan (Singapore)
- 454 Prevalence of wearing off symptoms among Parkinson's disease patients at a tertiary hospital
 P.A.A. Quitasol, C.L. Go (Manila, Philippines)
- 455 Impaired contrast sensitivity is associated with more severe cognitive impairment and nigrostriatal denervation in Parkinson's disease
 A.J. Ridder, M.L.T.M. Muller, V. Kotagal, K.A. Frey, R.L. Albin, N.I. Bohnen (Ann Arbor, MI, USA)
- Role of premotor symptoms on non-motor symptoms burden and quality of life
 M. Rodriguez-Violante, A. Cervantes-Arriaga, I. Estrada-Bellmann, R. Leal-Ortega, R. Millán-Cepeda, H. Morales-Briceño, G. Neri-Nani, R. Llorens-Arenas, H. Calderon-Fajardo, C. Zuñiga-Ramirez, A. Jorge de Sarachaga (Mexico City, Mexico)
- Motor and non-motor features of Parkinson's disease in idiopathic REM sleep behaviour disorder
 M. Rolinski, M. Lawton, S. Evetts, F. Baig, C. Ruffmann, C.E. Mackay, T. Quinnell, Z. Zaiwalla, Y. Ben-Shlomo, M.T.M. Hu (Oxford, United Kingdom)



- 458 Symptom severity and pain intensity may be risks for post STN DBS impulsivity in Parkinson's disease
 A. Rothstein, B. Avery, A. Boyanpally, J. Hesse, R. Coghill, A. Laxton, S. Tatter,
 M. Siddiqui, I. Haq (Winston Salem, NC, USA)
- Comparing speech function in persons with Parkinson's disease in clinical and home environments
 C.E. Rountrey, N.M. Borras, C.L. Ludlow (Harrisonburg, VA, USA)
- 460 Parkinson's disease: Markers of lower body mass index (BMI) J.J.E. Rovers, S.S. Wu, B.R. Bloem, M.S. Okun, B. Post (Nijmegen, Netherlands)
- An evaluation of non-motor symptoms in Parkinson's disease patients using 2 rating scales
 A. Sánchez-Jordán, D. Padilla-Carmona, U. Rodríguez-Ortiz, M.C. Boll (Mexico City, Mexico)
- Orthostatic hypotension increases the risk of falls in idiopathic Parkinson's disease patients
 M. Sarchioto, M. Zibetti, S. Maule, V. Milazzo, E. Montanaro, A. Romagnolo,
 S. Angrisano, F. De Matteis, C.A. Artusi, A. Bernardini, L. Lopiano (Turin, Italy)
- 463 REM density in patients with early or late stage Parkinson's disease. A polysomnography-based case-control study L.A. Schroeder, O. Rufra, N. Sauvageot, F. Fays, V. Pieri, N.J. Diederich (Howald, Luxembourg)
- 464 Skin biopsy is useful for diagnostic tool of Lewy body disease R. Sengoku, H. Sumikura, Y. Saito, Y. Nishina, S. Miyagawa, T. Komatsu, M. Ikemura, Y. Saito, K. Kanemaru, S. Murayama (Tokyo, Japan)
- 465 Characterizing apathy and possible neural correlates in Parkinson's disease J.H. Shin, J.Y. Lee, A. Kim, S.A. Shin, Y.K. Kim (Seoul, Korea)
- Mood fluctuations in Parkinson's disease: Toward a better understanding
 C. Siri, N. Meucci, A. Colombo, E. Reali, B. Pozzi, G. Sacilotto, M. Zini, G. Pezzoli (Milan, Italy)
- Different cardiovascular modulation in Parkinson's disease patients with tremor dominant subtype compared to those with akinetic rigid dominant subtype
 P. Solla, C. Cadeddu, A. Cannas, D. Fonti, G. Orofino, M. Deidda, L. Cugusi, M. Meloni, G. Mercuro, F. Marrosu (Cagliari, Italy)
- Apathy in movement disorders: A cross-sectional study
 M. Sousa, J. Ribeiro, I. Marques, F. Cunha, N. Canário, F. Moreira, A. Freire,
 C. Januário (Coimbra, Portugal)
- 469 Olfactory performance and resting state functional connectivity in non-demented drug naïve patients with Parkinson's disease M.K. Sunwoo, J. Cha, J.H. Ham, S.K. Song, J.Y. Hong, J.M. Lee, Y.H. Sohn, P.H. Lee (Seongnam, Korea)
- Sleep disturbances in Parkinson's disease and related disorders: Using Parkinson's disease sleep scale-2
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- The impact of diabetes mellitus on non-motor symptoms in patients with Parkinson's disease
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- Transcranial magnetic stimulation increases overall cognition in patients with Parkinson's disease
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- 475 Effect of saccadic movement impairment cognition in Parkinson's disease
 0.E.U. Turqunkhujaev, R.J. Matmurodov (Tashkent, Uzbekistan)
- 476 Effect of single levodopa/carbidopa intake on heart rate variability in Parkinson's disease
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- 477 A comprehensive approach to Parkinson's disease C.P. Vaughan, A.E. Vandenberg, F.C. Goldstein, L.M. Trotti, A.P. Hermida, M.L. Weeks, S.A. Factor (Atlanta, GA, USA)
- 478 Increased odds of bladder and bowel symptoms in early Parkinson's disease compared to healthy controls C.P. Vaughan, J.L. Juncos, A.D. Markland, K.L. Burgio, P.S. Goode, T.M. Johnson II (Atlanta, GA, USA)
- Patients with REM behavior disorder demonstrate degraded contrast sensitivity visual acuity while patients with restless legs syndrome do not
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 D. Huang, C. Maitland (Tallahassee, FL, USA)
- Frequency and predictors of fatigue in Parkinson's disease in a population-based cohort
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- 483 Deep brain stimulation (DBS) in the external globus pallidus (GPe) promotes sleep in a rodent model J. Wu, M. Qiu, M. Chen, D. Nelson, J. Lu (Minneapolis, MN, USA)
- 484 Demographics and motor features on risk of Parkinson's disease dementia: A meta-analysis Y. Xu, H. Shang (Chengdu, China)
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- 487 Visual exploration in Parkinson's disease
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- 488 Chronotype and sleep quality in Parkinson's disease R. Zangaglia, B. Minafra, M. Terzaghi, C. Pacchetti, R. Manni (Pavia, Italy)
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 - R. Borgohain, R.M. Kandadai, M.K.V. Ch, A. Jabeen, M.A. Kanikannan (Hyderabad, India)
- Deep brain stimulation (DBS) rescue of gait freezing by patterned stimulation in select Parkinson's disease (PD) patients
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- 494 Exercise intervention modulate corticostriatal glutamatergic neurotransmission by increased D2DR and NMDAR1 expression of striatum in PD model of rats
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- 496 Effects of texting while walking (dual tasking) on objective gait parameters
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- 497 Gait cycle related modulation of electrophysiological activity in the human subthalamic nucleus of patients with Parkinson's disease F.L. Hell, K. Boetzel, J.H. Mehrkens, S. Kammermeier, A. Plate, P. Hathway (Munich, Germany)
- Rubber hand illusion induced changes in sensorimotor integration in Parkinson's disease
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- 499 Transcranial magnetic stimulation as an early marker to differentiate between early Alzheimers disease and frontotemporal dementia and its further utility for early diagnosis and prognostication in corticobasal ganglia degeneration- A pilot study T.G. Issac, S.R. Chandra, B.C. Naqaraju, T. Issac (Bangalore, India)
- Physiological changes in Parkinson's symptoms by slow wave potential
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- Propensity for heterosynaptic motor cortex plasticity in the de novo state predicts early motor complications of L-DOPA treatment in Parkinson's disease
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- 502 Timing accuracy of voluntary rhythmic hand movement in essential tremor and Parkinson's disease F. Luft, S. Sharifi, W. Mugge, A.C. Schouten, L.J. Bour, A.F. van Rootselaar, C. Heida (Enschede, Netherlands)
- 503 Intraoperative electrocorticography activity in the sensorimotor cortex differentiates generalized dystonia, segmental dystonia, and Parkinson's disease S. Miocinovic, C. de Hemptinne, S. Qasim, J.L. Ostrem, P.A. Starr (San Francisco, CA, USA)
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- 510 Comparison of GPi local field potential characteristics in patients with Parkinson's disease, craniocervical dystonia, and generalized dystonia D.D. Wang, C. de Hemptinne, S. Qasim, S. Miocinvic, J.L. Ostrem, P.A. Starr (San Francisco, CA, USA)



- 511 Phase reorganization of thalamic oscillatory activity contributes to the generation of the somatosensory evoked potentials in Vim thalamus in Parkinson's disease and essential tremor patients
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- 513 Modulation of short-latency afferent inhibition (SAI) in multisystem atrophy by low frequency (1-Hz) repetitive transcranial magnetic stimulation (rTMS) of the cerebellum F.G. Yildiz Sarikaya, E. Saka, B. Elibol, C.M. Temucin (Ankara, Turkey)
- 514 Temporal patterning of spike-LFP synchronization in the internal globus pallidus in Parkinson's disease S.E. Zauber, S. Ratnadurai-Giridhara, R.M. Worth, T. Witt, L. Rubchinsky (Indianapolis, IN, USA)

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- Botulinum toxin treatment: Experience in a public hospital from Buenos Aires, Argentina
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- 517 Botulinum toxin type A therapy for cervical dystonia An update of a Cochrane systematic review and meta-analysis M. Castelão, R. Marques, G. Duarte, F.B. Rodrigues, J.J. Ferreira, P. Moore, J. Costa (Lisbon, Portugal)
- 518 A retrospective analysis of 73 patients switched from onabotulinumtoxinA to incobotulinumtoxinA D.R. Greeley (Spokane, WA, USA)
- Real-world onabotulinumtoxinA treatment patterns in movement disorder patients in a prospective, observational cohort study: MOBILITY®
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- 520 An experience of changing from onabotulinumtoxin-a to abobotulinumtoxin-a in 64 patients with focal hyperkinesias M. Kuzu, S.I. Gul, S. Tezcan, C.M. Akbostanci (Ankara, Turkey)
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- 522 Botulinum toxins type A and B for cervical dystonia, blepharospasm and hemifacial spasm An update of Cochrane movement disorders group systematic reviews F.B. Rodrigues, G. Duarte, R. Marques, M. Castelão, J.J. Ferreira, P. Moore, J. Costa (Lisbon, Portugal)

- Safety and efficacy of botulinum toxin injections for lower limb spasticity management in children
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- 526 Technology-enhanced maintenance practice following intensive voice therapy (LSVT LOUD) in children with cerebral palsy and dysarthria C.M. Fox, C.A. Boliek (Denver, CO, USA)
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- 529 What do we know about PANS..? S.E. Munasipova, Z.A. Zalyalova (Kazan, Russia)
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- Need for improved bone mineral density screening in Parkinsonism
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- Postoperative deep brain stimulation (DBS) impedance variability in Parkinson's disease (PD) patients implanted with Vercise system
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- Usability and technical options of rechargeable pulse generators
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- Long-term outcomes of subthalamic deep brain stimulation in monogenic Parkinson's disease
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- Parkinsonism-hyperpyrexia syndrome due to deep brain stimulation withdrawal: Case report
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- Placement accuracy of deep brain stimulation electrodes implanted by frameless system Nexframe©
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- Effects of low and high frequency STN DBS on beta oscillations and movement using synchronized neural and kinematic recordings in freely moving Parkinson's disease subjects
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- Unilateral subthalamic nucleus deep brain stimulation for on-state freezing of gait in Parkinson's disease
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- Benefits of subthalamic stimulation for elderly Parkinsonean patients over age 70 yearsS.M. Chiou, M.K. Lu, C.H. Tsai (Taichung, Taiwan)

- 548 Interventional MRI (iMRI) guided DBS: Factors affecting lead placement accuracy R.R. Coleman, J.L. Ostrem, P.A. Starr, A.J. Martin, S.E. Qasim, N. Ziman, P.S. Larson (San Francisco, CA, USA)
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 - G.A. de Erausquin, K. Vyas, E. Sanchez, L. Alba-Ferrara, D. Smith, F. Vale, T. Malapira, T. Zesiewicz (Tampa, FL, USA)
- To test the effect of deep brain stimulation (DBS) frequencies on gait abnormalities in Parkinson's disease (PD)
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- Vercise DBS registry: Outcomes of a prospective, multi-center international registry for Parkinson's disease
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- 559 A stimulating idea: Treating mixed essential tremor and Parkinson's disease tremor with a novel DBS approach R.A. Falconer, S.L. Rogers, C. Kalhorn, F. Pagan (Washington, DC, USA)
- The neuroprotective potential of subthalamic nucleus deep brain stimulation in an α-synuclein overexpression rat model of Parkinson's disease
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- Deep brain stimulation in early stage Parkinson's disease may reduce the relative risk of worsening of both motor symptoms and complications of therapy
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- Programming strategies for tremor resistant to standard DBS settings: Constant current vs interleaving
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- Wearable sensors for quantifying deep brain stimulation washout effects on gait in Parkinson's disease D.A. Heldman, E.B. Brokaw, A.J. Espay, F.J. Revilla, D.E. Riley, T.O. Mera, J.P. Giuffrida, B.L. Walter (Cleveland, OH, USA)
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- 574 Effect of bilateral STN DBS on impulse control disorders in patients with idiopathic Parkinson's disease- A case control study

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- 575 Pallidal stimulation is effective for complex cranio-cervical dystonia and an unappreciated advers effect as tensor sensation
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- 577 Estimating the proportion of essential tremor and Parkinson's disease patients referred for deep brain stimulation: Five-year data from Columbia University Medical Center (2009-2014)
 - M. Kestenbaum, E.D. Louis (New York, NY, USA)
- The effect of subthalamic nucleus deep brain stimulation on REM sleep behavior disorder
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- 580 The sequence of electrode placement affects outcomes after subthalamic nucleus deep brain stimulation for Parkinson's disease
 - V. Krishna, F. Sammartino, N.K.K. King, V. Bruno, C. Marras, S. Kalia, M. Hodaie, A. Lozano, A. Fasano (Toronto, ON, Canada)
- The impact of the cause of death on neuropathological changes due to deep brain stimulation
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 - S.C. LaHue, J.L. Ostrem, N.B. Galifianakis, M. San Luciano, N. Ziman, S. Wang, C. Racine, P.A. Starr, P.S. Larson, M. Katz (San Francisco, CA, USA)
- 583 Effects of randomized subthalamic nucleus deep brain stimulation on gait in patients with Parkinson's disease K.J. Lizarraga, J. Jagid, B. Gallo, C. Luca (Miami, FL, USA)
- 584 Intraoperative MRI for deep brain stimulation lead placement in Parkinson's disease: One year motor and quality of life outcomes
 - A. Mahajan, J. Schwalb, P. LeWitt, M. Schonberger, A. Ellenbogen, D. Taylor, J. Wall, C. Sidiropoulos (Detroit, MI, USA)



- The research on deep brain stimulation to improve non-motor symptoms of Parkinson's disease
 Z. Mao, S. Ji, Q. Yang, H. Ye, Z. Xue (Wuhan, China)
- 586 Short-term follow-up of bilateral subthalamic nucleus DBS in advanced PD: Gait and balance outcomes V. Marta, A.O. Iciar, C. Lidia, S.M. Arantza, D.Á. Marta, R. Ignacio (Madrid, Spain)
- Postoperative apathy can neutralize benefits in quality of life after subthalamic stimulation for Parkinson's disease
 R. Martinez-Fernandez, P. Pelissier, J.L. Quesada, H. Klinger, E. Lhommée,
 E. Schmitt, V. Fraix, S. Chabardes, P. Mertens, A. Castrioto, A. Kistner, E. Broussolle,
 P. Pollak, S. Thobois, P. Krack (Grenoble, France)
- 588 Intraoperative objective assessment and quantification of rigidity, akinesia, and tremor for optimized target-selection during DBS-implantation in Parkinson's disease

 J.H. Mehrkens, J.A. Cov. B. Kai, L. Tim (Munich, Germany)
- 589 Neurologists' or patients' choice: Reasons Parkinson's disease (PD) patients do not undergo deep brain stimulation (DBS) surgery N.F. Mercan, S.I. Gul, A. Savas, C.M. Akbostanci (Ankara, Turkey)
- 590 Bilateral subthalamic nucleus deep brain stimulation in elderly patients with Parkinson's disease K.T. Mitchell, S.A. Norris, S.D. Tabbal, J.L. Dowling, K.M. Rich, J.S. Perlmutter, M. Ushe (St. Louis, MO, USA)
- Beta-band activity changes during sleep in the subthalamic nucleus of patients with Parkinson's disease
 L. Mueller, A. Auchter, M.M. Reich, F. Steigerwald, K. Reiners, I.U. Isaias,
 J. Volkmann (Würzburg, Germany)
- 592 Personality and quality of life assessments before and after deep brain stimulation surgery in patients with Parkinson's disease
 M. Newley, M. O'Copper, I. Vapust, C. Bierro, A. Silver, D.V. Simon, D. Tarriy
 - M. Newlon, M. O'Connor, L. Kapust, C. Pierce, A. Silver, D.K. Simon, D. Tarsy, E. Papavassiliou, R. Alterman, L.C. Shih (Boston, MA, USA)
- 593 Susceptibility weighted magnetic resonance imaging for targeting of the subthalamic nucleus in Parkinson's disease R.C. Nickl, S. Johannes, F. Steigerwald, M.M. Reich, S. Rückriegel, T. Günthner-Lengsfeld, R.I. Ernestus, V. Sturm, J. Volkmann, C. Matthies (Würzburg, Germany)
- 594 Ipsilateral somatotopy within the subthalamic nucleus M.J. Nolt, T. Masnyk, M.T. McGraw, A.P. Monette, M. Rezak (Winfield, IL, USA)
- Intraoperative electrocorticography as a tool for the understanding of movement disorders: Principals and experience in 190 patients
 F.E. Panov, E. Levin, C. de Hemptinne, N. Swann, S. Qasim, S. Miocinovic, J. Ostrem, P.A. Starr (San Francisco, CA, USA)
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 H. Park, B.S. Jeon, H.J. Kim, W.W. Lee, C.W. Shin (Seoul, Korea)
- Restoration of audio-spinal reflex reflects gait improvement in patients with subthalamic nucleus stimulation
 E. Parmentier, V. De Pasqua, G. Garraux, A. Maertens de Noordhout (Seraing, Belgium)

- Hemorrhage risk associated with multiple simultaneous microelectrode recording for deep brain stimulation
 F.T. Phibbs, A. Wang, C. Tolleson, J.L. Stroh, J. Neimat, P. Konrad (Nashville, TN, USA)
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 A case series
 M. Picillo, G.B. Vincos, F. Sammartino, R.P. Munhoz, A. Fasano (Toronto, Canada)
- Deep brain stimulation (DBS) in Parkinson's disease (PD):
 Single-center experience from 2000 to 2013
 N.G. Pozzi, B. Minafra, R. Zangaglia, D. Servello, C. Pscchetti (Pavia, Italy)
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 A.K. Puligopu, R.M. Kandadai, V.V.P. Kagita, J. Afshan, M.A. Kanikannan,
 R. Borgohain (Hyderabad, India)
- Does the use of intraoperative microelectrode recording influence the final location of lead implant in the globus pallidus interna for deep brain stimulation?
 S. Reddy, A.J. Fenoy, E. Furr-Stimming, W.G. Ondo, M.C. Schiess, R. Mehanna (Houston, TX, USA)
- 603 Unilateral STN DBS treats bilateral OFF dystonia in PD M. Rezak, A.P. Monette, M.T. McGraw, T. Masnyk, M.J. Nolt (Winfield, IL, USA)
- Quality of life of patients with Parkinson's disease:
 Development of utility values by mapping PDQ-39 to EQ-5D using data from the EARLYSTIM study
 C. Rinciog, S. Walleser Autiero, I. Durand Zaleski, L. Timmermann, J.L. Hueto,
 M. Schüpbach (Herts, United Kingdom)
- 605 Comparison of therapeutic and adverse effects of pallidal and subthalamic deep brain stimulation in Parkinson's disease H.S. Ryu, J. Kim, Y.J. Kim, K. Kim, M.S. Kim, S. You, M.J. Kim, S.J. Chung (Seoul, Korea)
- Early subthalamic neurostimulation improves quality of life of elderly patients with Parkinson's disease
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- 607 Gait and balance in Parkinson's disease (PD) following bilateral subthalamic nucleus (STN) and globus pallidus interna (GPi) stimulation: 36 month follow-up of CSP#468 cohort
 - A.I. Sarwar, K. Carlson, P. Luo, K.A. Follett, M. Stern, F.M. Weaver, D.J. Reda, E.C. Lai, For the CSP 468 Study (Houston, TX, USA)
- 08 MRI guided focused ultrasound VIM thalamotomy for Parkinson's disease-First case series I. Schlesinger, A. Eran, A. Sinai, I. Erikh, M. Nassar, D. Goldsher, M. Zaaroor (Haifa, Israel)
- 609 Changes in subthalamic nucleus local field potentials following administration of levodopa in patients with Parkinson's disease correlate with clinical improvement as measured by objective sensor data A.N. Sen, G. Meloni, I. Telkes, A. Abosch, N.F. Ince (Houston, TX, USA)



- 610 New frontiers in focused ultrasound treatment in Parkinson's disease: A potential paradigm for staged lesioning of the subthalamic nucleus
 - B.B. Shah, D.S. Huss, M.B. Harrison, G.F. Wooten, S. Sperling, W.J. Elias (Charlottesville, VA, USA)
- 611 Motion perception during subthalamic nucleus deep brain stimulation: Current spread to vestibulothalamic tract A.G. Shaikh, K. Mewes, K. Wilson, M.R. DeLong, A.G. Machado (Cleveland, OH, USA)
- 612 Deep brain stimulation for Parkinson's disease in Kazakhstan C. Shashkin, S. Akshulakov, Z. Komarov (Astana, Kazakhstan)
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 C. Sidiropoulos, P. LeWitt, A. Mahajan, M. Schonberger, A. Ellenbogen, D. Taylor, J. Wall, J.M. Schwalb (West Bloomfield, MI, USA)
- 614 Incidence of dyskinesia improvement following subthalamic DBS with and without medication reduction L. Solis-Cohen, D.K. Simon, D. Tarsy, E. Papavassiliou, R. Alterman, L.C. Shih (Boston, MA, USA)
- 615 Spinal cord stimulation improves gait performance in advanced Parkinson's disease patients with chronic stn-dbs: Pilot study C.P. Souza, C.O. Souza, W.L. Contreras, R.G. Cury, M.G.S. Ghillard, M.J. Teixeira, E.R. Barbosa, E.T. Fonoff (Ribeirao Preto, Brazil)
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- 617 Deep brain stimulation and outcome: Hints out of the smoke screen?
 - M.H. Strothjohann (Bad Camberg, Germany)
- Effect of STN deep brain stimulation on autonomic functions in patients with Parkinson's disease
 P. Surathi, A. Lenka, K.R. Jhunjhunwala, A. Zafar, T.N. Sathyaprabha, R. Yadav,
 M. Nethravathi, D. Srinivas, A. Arivazhagan, P.K. Pal (Bangalore, India)
- 619 VANTAGE trial: Two year outcomes of a prospective, multicenter trial evaluating deep brain stimulation with a new multiple-source, constant-current rechargeable system (Vercise) in Parkinson's disease L. Timmerman, R. Jain, L. Chen, T. Brücke, F. Seijo, E. Suarez San Martin,
 - L. Himmerman, K. Jain, L. Chen, I. Brucke, F. Seijo, E. Suarez San Martin, C. Haegelen, M. Verin, M. Maarouf, M.T. Barbe, S. Gill, A. Whone, M. Porta, D. Servello, F. Alesch (Cologne, Germany)
- 620 Cost-effectiveness of deep brain stimulation for Parkinson's disease with a multi-source, constant-current rechargeable system: Results from the two-year follow-up of the VANTAGE trial
 - L. Timmermann, F. Alesch, T. Brücke, F. Seijo, E. Suarez San Martin, C. Haegelen, M. Verin, M. Maarouf, M.T. Barbe, S. Gill, A. Whone, M. Porta, D. Servello, R. Jain, L. Chen, N. Mekel-Bobrov (Cologne, Germany)

- Attenuation of STN beta oscillations persists immediately and 60 minutes after turning OFF chronic STN DBS
 M.H. Trager, E. Quinn, Z. Blumenfeld, A. Velisar, M. Koop, L. Shreve, C. Kilbane, T. Prieto, J. Henderson, H. Bronte-Stewart (Stanford, CA, USA)
- 622 Subthalamic deep brain stimulation can improve constipation and other bowel dysfunction in Parkinson's disease
 T. Uchiyama, T. Yamamoto, Y. Watanabe, K. Hashimoto, T. Kadowaki, Y. Higuchi, T. Shingo, C. Shibata-Yamaguchi, K. Kaga, T. Yamanishi, R. Sakakibara, S. Kuwabara, K. Hirata (Tochigi, Japan)
- 623 A review of initial consultations for deep brain stimulation: The NYU experience R.K. Unia, A. Mogilner, M. Pourfar (New York, NY, USA)
- Peripheral nerve grafts reduce medication requirements and reduce motor scores in Parkinson's disease patients with deep brain stimulation therapy

 C.G. van Horne, G. Quintero, J. Gurwell, G. Gerhardt, J. Slevin (Lexington, KY, USA)
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 R. Verhagen, D.G.M. Zwartjes, T. Heida, E.C. Wiegers, M.F. Contarino, R.M.A. de Bie, P. van den Munckhof, P.R. Schuurman, P.H. Veltink, L.J. Bour (Amsterdam, Netherlands)
- 627 STN model based on intraoperative microelectrode recordings assists in postoperative management of DBS settings and clinical research
 R. Verhagen, P.R. Schuurman, P. van den Munckhof, M.F. Contarino, R.M.A. de Bie, L.J. Bour (Amsterdam, Netherlands)
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 L.N. Hazrati (Toronto, ON, Canada)
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 T. Xie, R. Guan, J. Staisch, D. Casaubon, V.L. Towle, P.C. Warnke (Chicago, IL, USA)
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 Can it really influence surgical outcomes?
 X.X. Yu, H. Abboud, G. Genc, N. Thompson, S. Oravivattanakul, F. Alsallom,
 D. Floden, A. Machado, M. Gostkowski, H.H. Fernandez (Cleveland, OH, USA)
- 632 Hesitation in deciding-deep brain stimulation of Parkinson's disease J.Y. Yun, M.R. Kim, Y.H. Lim, K.R. Kim, S.H. Paek, B.S. Jeon (Seoul, Korea)



- 633 Role of the frequency of STN stimulation on bradykinesia in Parkinsonian patients
 - A. Zacharia, I. Sastre, D. Georgiev, M. Hariz, L. Zrinzo, T. Foltynie, M. Jahanshahi, J. Rothwell, P. Limousin (London, United Kingdom)

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 B. Ahmed, D.M. Ramirez, L. Almeida, J.C. Giugni, E. Monari, K.D. Foote, M.S. Okun (Gainesyille, FL, USA)
- 635 Improvement in disabling action tremor associated with cerebellar multiple system atrophy by thalamic DBS: A case report
 - P. Anprasertporn, N. Hidarilak, B.L. Guthrie, H.C. Walker (Birmingham, AL, USA)
- 636 Surgical treatment of post-traumatic midbrain resting-kinetic tremor with stereotactic lesions with M.E.R. of the zona incerta
 - A.R.C. Azevedo, W.O. Contreras, P.R. Reis, R.G. Cury, F.E.F. Silva, J. Navarro, E.T. Fonoff (São Paulo, Brazil)
- Effects of VIM-DBS on the speech motor system in ET patients: An electromagnetic articulograph study
 M.T. Barbe, D. Mücke, A. Hermes, J. Becker, T.A. Dembek, A. Josten, I.G. Meister, V. Visser-Vandewalle, M. Grice, L. Timmermann (Cologne, Germany)
- 638 Deep brain stimulation in rare movements disorders I. Beaulieu-Boire, C.C. Aquino, A.E. Lang, R.P. Munhoz, Y.Y. Poon, A. Valencia, M. Fallis, S. Kalia, M. Hodaie, E. Moro, A.M. Lozano, A. Fasano (Sherbrooke, QC, Canada)
- 639 Results from first year experience of dedicated pediatric DBS dystonia program at Barrow Neurological Institute at Phoenix Children's Hospital
 R.D. Bhardwaj, S. Flecky, N. Remec, J. Samanta (Phoenix, AZ, USA)
- Delayed scalp erosion after DBS surgery: Incidence, treatment, outcomes, and prevention
 A.R. Bona, A. Mantovani, S. Vaziri, R. Walz, M.S. Okun, K.D. Foote (Gainesville, FL, USA)
- The efficacy of VIM and VIM/ZI DBS in treatment of various tremors
 - M. Bonello, J. Osman-Farah, P.R. Eldridge, B. Hammersley, L. Lowry, P. Byrne, N.A. Fletcher, S.H. Alusi (Liverpool, United Kingdom)
- Biochemical mechanisms of pallidal deep brain stimulation in X-linked dystonia Parkinsonism
 N. Brüggemann, A. Moser, A. Domingo, C.K. Moll, D. Rasche, C. Mohr, R. Rosales, P. Capetian, R.D. Jamora, L.V. Lee, A. Münchau, C.C. Diesta, V. Tadic, C. Klein, V. Tronnier (Luebeck, Germany)
- 643 Deep brain stimulation artifact in cervical electromyography
 M.V. Della Coletta, A.R. Marcião (Manaus, Brazil)
- Target correlated mapping of therapeutic effects in deep brain stimulation using voxel-based estimations of neuroanatomical structures and volumes of tissue activated T.A. Dembek, M.T. Barbe, M. Åström, V. Visser-Vandewalle, L. Timmermann (Cologne, Germany)

- Neuropsychological outcome of bilateral pallidal stimulation in cervical dystonia: One-year follow-up results from a prospective multicenter trial
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- Update on deep brain stimulation for refractory Tourette syndrome: 10 patients with CM-Pf/Voi stimulation
 R.S. Dowd, M.H. Pourfar, A.Y. Mogilner (New York, NY, USA)
- 647 Impedance fluctuations in patients undergoing thalamic deep brain stimulation for essential tremor and their effect on clinical outcome J. Eskenazi, E. Tan, A.N. Mamelak, M. Tagliati (Los Angeles, CA, USA)
- 648 Panic disorder following implantation of deep brain stimulation (DBS) leads in the ventral intermediate nucleus of the thalamus (VIM)

 S.M. Fayad, U. Akbar, P. Zeilman, M.S. Okun, H.E. Ward (Gainesville, FL, USA)
- Deep brain stimulation (DBS) interleave contact configuration with implementation of dual frequency stimulation fields improves control in essential tremor (ET) and reduces adverse effects
 E.M. Feinstein, D.L. Caputo, D.P. Schneider, R.J. DiPaola, S.F. Danish, E.L. Hargreaves (New Brunswick, NJ, USA)
- Dorsal lead migration in a dystonia patient following deep brain stimulation
 W. Hu, A.R. Bona, D. Martinez-Ramirez, A. Wagle Shukla, K.D. Foote, M.S. Okun (Gainesville, FL, USA)
- 651 Functional assessment and quality of life in essential tremor following treatment with bilateral or unilateral deep brain stimulation and unilateral focused ultrasound thalamotomy D.S. Huss, R.F. Dallapiazza, B.B. Shah, M.B. Harrison, J.W. Elias (Staunton, VA, USA)
- Deep brain stimulation for dystonia: A programming algorithm evaluated by long-term results of the German multicentre study for generalized or segmental dystonia A.D. Kirsch, A.A. Kühn, J. Müller, J. Volkmann for the Deep-Brain Stimulation for Dystonia Study Group (Würzburg, Germany)
- 653 Long term effective thalamic deep brain stimulation (DBS) for neuropathic tremor in patients with hereditary motor-sensory polineuropathy

 C.M. Lidia, A.O. Iciar, V. Marta, D.Á. Marta, R. Ignacio (Madrid, Spain)
- Deep brain stimulation in the nucleus ventralis oralis anterior for post anoxic dystonia, case report and review of the literature?
 M. Mansour, Y.M. Mansour, J. Vaidyanathan (Abu Dhabi, United Arab Emirates)
- 755 Therapeutic deep brain ablation via implanted DBS leads: Technique and potential complications A. Mantovani, A.R. Bona, M.S. Okun, K.D. Foote (Gainesville, FL, USA)
- 656 Two patients with dystonia treated with internal globus pallidus deep brain stimulation (GPi-DBS) using a multiple independent source current-controlled system, a case report 0. Morsi, J. Jimenez, B. Cuartero, J. Zamarro, R. Sanchez, M. Felipe, B. Segura, J.J. Martin (Murcia, Spain)



- 657 Combined anterior and posterior lumbar rhizotomy for treatment of mixed dystonia and spasticity in children with cerebral palsy
 - M.A. Nada, W.A. Abdel Ghany (Cairo, Egypt)
- Reversal of acquired hepatocerebral degeneration with live donor liver transplant
 A.H. Qavi, S. Hammad, A.I. Rana, M. Salih, N.H. Shah, F.S. Dar, A. Ahmad (Islamabad, Pakistan)
- 659 Does the use of intraoperative microelectrode recording influence the final location of lead implant in the ventral intermediate nucleus for deep brain stimulation?
 S.T. Reddy, A.J. Fenoy, E. Furr-Stimming, W.G. Ondo, M.C. Schiess, R. Mehanna (Houston, TX, USA)
- Does the use of intraoperative microelectrode recording influence the final location of lead implant in the subthalamic nucleus for deep brain stimulation?
 S.T. Reddy, A.J. Fenoy, E. Furr-Stimming, W.G. Ondo, M.C. Schiess, R. Mehanna (Houston, TX, USA)
- 661 Intraoperative thresholds for capsular stimulation are predictive of the chronic therapeutic window in pallidal deep brain stimulation for dystonia R. Reese, D. Falk, H.M. Mehdorn, G. Deuschl, J. Volkmann (Würzburg, Germany)
- Progressive ataxia under thalamic neurostimulation in essential tremor, neurostimulation effect or disease progression?
 M.M. Reich, J. Brumberg, F. Steigerwald, G. Marotta, T. Musacchio, D.A. Kirsch, L. Müller, K. Herrmann, A. Buck, J. Volkmann, I.U. Isaias (Wuerzburg, Germany)
- Force platform analysis after deep brain stimulation of peduncolopontine nucleus in progressive supranuclear palsy: Report of one case C.O. Souza, R. Brant, A.L. Pardini, D. Boari, L.A. Teixeira, M.J. Teixeira, E.R. Barbosa, E.T. Fonoff (São Paulo, Brazil)
- Coaxial deep brain stimulation of ventral thalamic nuclei and posterior subthalamic area for movement disorders
 H. Toda, H. Saiki, R. Okumura, S. Matsumoto, K. Iwasaki (Osaka, Japan)
- 665 Subthalamic stimulation for tremor
 A.T. Tran, G. Moguel-Cobos, R. Dhall, A. Lieberman (Phoenix, AZ, USA)
- STN DBS in dystonia modulates sensorimotor integration and plasticity but not motor cortex excitability
 A. Wagle Shukla, J. Ostrem, D. Vaillancourt, K. Foote, J. Shuster, M. Okun (Gainesville, USA)
- Combined deep brain stimulation in the internal globus pallidus (GPi) and pallidothalamic tract (PTT) in a patient suffering from a nigrostriatal lesion due to subarachnoid haemorrhage
 - N.A. Wegener, S. Haegele-Link, K. Georg, P. Anita, B. Thomas, B. Ronald (St. Gallen, Switzerland)

OTHER (NON-CATEGORY SPECIFIC)

 The Parkinson's disease and movement disorders program at King Fahad Medical City
 F.Y. AlSwaiti, J.A. Bajwa, R. Mayo (Greensboro, NC, USA)

- 669 The effect of motor imagery on stepping characteristics and motor control of gait in persons with Parkinson's disease P.E. Atwood, W.J. Farrington, A.C. Brandt, A. Smiley-Oyen, K.A. Lowry (Des Moines, IA, USA)
- Antibody spectrum in stiff person syndrome and related disorders
 B. Balint, I.M. Blöcker, M. Unger, W. Stöcker, C. Probst, L. Komorowski, H.M. Meinck (London, United Kingdom)
- NMDAR-antibodies in atypical corticobasal syndrome New phenotype or (contributing) epiphenomenon?
 B. Balint, R. Erro, M. Stamelou, F. Brugger, E. Antelmi, A. Batla, C. Ganos, A. Vincent, K. Bhatia (London, United Kingdom)
- 672 Development and evaluation of a patient decision aid, should you have botulinum toxin injections or surgery for hemifacial spasm C.T. Barrett, D.A. Grimes, V. Parker (Ottawa, ON, Canada)
- 673 Effect of progressive aerobic and large-amplitude training (PWR!Moves) on advanced Parkinson's disease A case study J. Bazan-Wigle, K. Moynahan, B. Farley (Tucson, AZ, USA)
- Ultrastructural distribution and features of dopaminergic and cholinergic innervations of the primate subthalamic nucleus
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 H. Bernad-Elazari, A. Weiss, S. Oren, Y. Cohen, A. Mirelman, N. Giladi, J. Hausdorff (Tel Aviv, Israel)
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- Walking speed and switching attention in individuals with Parkinson's disease
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- 680 Movement disorders after stroke
 A. Chahidi, M. Chraa, N. Kissani (Beni Mellal, Morocco)
- Mirror movement among patients with Parkinson's disease-An under-appreciated clinical sign
 P. Chatterjee, S. Choudhury, D. Naskar, S. Anand, B. Mondal, M.U. Kulsum, H. Kumar (Kolkata, India)



- 682 Hypoglycemia induced acute bilateral basal ganglia lesions presenting as generalized dyskinesia in a patient with diabetic uremia
 - P.Y. Chen, S.H. Yan, S.C. Lai, C.S. Lu, T.H. Yeh (Taipei, Taiwan)
- 683 Cytoarchitecture of the human nitrergic neurons in basal nuclei
 - B.L. Dos Santos, E.A. Del Bel, J.E. Pittella, V. Tumas (Ribeirão Preto, Brazil)
- 684 Is change in physical performance in persons with Parkinson's disease meaningful following LSVT® BIG: A retrospective study W.J. Farrington, T. Miller, G. McGauqhy, K. Mercuris, K. Lowry (Des Moines, IA, USA)
- 685 Clinical subtypes of Parkinson's disease and disease progression: Data-driven comparison of new phenotypes with other cluster solutions S.M. Fereshtehnejad, S.R. Romenets, J. Anang, V. Latreille, J.F. Gagnon,
- 686 Continuous stimulation of the subthalamic nucleus improves skilled forelimb grasping after photothrombotic infarction in Wistar rats
 - F. Fluri, J. Volkmann, C. Kleinschnitz (Würzburg, Germany)

R.B. Postuma (Stockholm, Sweden)

- Characterization of movement disorder phenomenology in genetically proven frontotemporal lobar degeneration: A systematic review and meta-analysis
 C. Gasca-Salas, B.B. Shah, M. Masellis, E. Khoo, D. Fisman, A.E. Lang, G. Kleiner-Fisman (Toronto, ON, Canada)
- Assessment of Parkinsonian motor symptoms using a continuously worn smartwatch: Preliminary experience
 E. Gazit, H. Bernad-Elazari, S.T. Moore, C. Cho, K. Kubota, L. Vincent, S. Cohen, L. Reitblat, N. Fixler, A. Mirelman, N. Giladi, J.M. Hausdorff (Tel Aviv, Israel)
- 689 Clinical and dynamic balance measures can predict postural instability in Parkinson's disease patients L.T.B. Gobbi, P.H.S. Pelicioni, M.P. Pereira, J. Lahr, L.C. Morais, N.M. Rinaldi (Rio Claro, Brazil)
- 690 Initial treatment choice is associated with medical resource use in people aged 35 to 64 years with Parkinson's disease E. Grubb, M. Treglia, M. Lage (Overland Park, KS, USA)
- 691 Smartphone-PD: Preliminary results of an mHealth application to track and quantify characteristics of Parkinson's disease in real-time

 D.A. Harris, S.O. Abiola, K.M. Biglan, E.R. Dorsey, M.A. Little, S. Saria, A. Zhan (Rochester, NY, USA)
- 692 Iron deposition and oxidative stress in the brain of the Zitter rat
 - T. Kadowaki, H. Lassmann, S. Ueda, C. Schuh, K. Hirata (Mibu, Japan)
- 693 Ethical and legal concerns for a highly vulnerable population of 70+ cases of PD and dementia: A qualitative study in Indian context

 M. Kakoti, D. Misra (New Delhi, India)

- 694 The Parkinsonian toxin 1-methyl-4-phenylpyridinium (MPP+), and proteins α-synuclein and glia maturation factor (GMF) activate mast cells and release proinflammatory mediators
 - D. Kempuraj, T. Ramasamy, S. Zaheer, D.A. Santillan, M.K. Santillan, A. Zaheer (Iowa Citv. IA. USA)
- 695 Finally it's time for a perspective: Barriers and facilitators in physical rehabilitation for Parkinson's disease from the Arabian Peninsula H. Khalil, J.A. Bajwa (Irbid, Jordan)
- 696 The effects of 12-week exercise therapy program on the gait characteristics in people with Parkinson's disease C.H. Kim, M.Y. Kim, B.O. Lim (Inchon, Korea)
- 697 Preliminary results for a national case study of virtual care visits for Parkinson's disease R.E. Korn, M.A. Achey, R. Rodriguez, K. Rizer, I. Richard, E.R. Dorsey, H.T. Keenan (Rochester, NY, USA)
- 698 Validation of a smartphone application measuring bradykinesia in Parkinson's disease
 W. Lee, A. Evans, D.R. Williams (Melbourne, Australia)
- 699 Improving of balance in patients affected by Parkinson's disease by decreasing rigidity

 A.P.C. Loureiro, V. Bauer, C.d.C. Loureiro (Curitiba, Brazil)
- 700 Speech intelligibility perception of advanced Parkinson's disease patients compared to early Parkinson's disease patients and first degree relatives Y. Manor, D. Shpunt, M. Chermon, L. Fregel, A. Ezra, A. Migirov, J. Zitser, T. Gurevich (Tel Aviv, Israel)
- Acoustic analysis of voice and speech of advanced
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 Y. Manor, D. Shpunt, I. Ben Asher, A. Tsvion, N. Horev, A. Ezra, A. Megirov, A. Hilel,
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- 702 The self-perception of multiple system atrophy patients of swallowing disorders and drooling and its relation to quality of life and disease severity Y. Manor, D. Shpunt, Y. Zlotnik, A. Megirov, L. Brounshtai, T. Voler-Kohaner, T. Lupo, T. Gurevich (Tel Aviv, Israel)
- 703 3D sensors, a new paradigm for assessing Parkinson's disease A. Mario, B. Jorge, M. Daniel, V. Pedro (Havana, Cuba)
- 704 Variability in Parkinson's disease quality improvement measure documentation in a specialty center J.P. Martello, M. Armstrong (Baltimore, MD, USA)
- 705 Decreased FOG following multi-system behavioral intervention-A case report
 C.E. McLean (Hermosa Beach, CA, USA)
- One year dynamics of spatiotemporal gait parameters and ADL performance in patients with Parkinson's disease
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- 707 Intraoperative microstimulation predicts outcome of postoperative macrostimulation in STN DBS for PD
 R. Mehanna, A.G. Machado, F. Alsaloum, S.E. Cooper (Houston, TX, USA)
- Parkinson's disease: A regression based approach to motor symptom progression
 A. Mendes, A. Gonçalves, N. Vila-Chā, M. Calejo, I. Moreira, J. Fernandes, J. Damásio, A.B. Lima, S. Cavaco (Porto, Portugal)
- 709 Fluorodeoxyglucose positron emission tomography (FDG-PET) in prion disease
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- 710 Mimicking progressive supranuclear palsy and causing Tako-Tsubo syndrome: A case report on IgLON5-encephalopathy M.T. Montojo, V. Piren, F. Benkhadra, A. Codreanu, G. Wirtz, P. Kerschen, N.J. Diederich (Mostoles, Spain)
- 711 e-Motion: A reliability assessment for a prototype software to complement the clinical evaluation of patients with Parkinson's disease

 B.E. Muñoz, A. Navarro, Y.J. Ariza, J.D. Arango, J.L. Orozco (Cali, Colombia)
- 712 A powered orthosis improves the magnitude and consistency of gait initiation in Parkinson's disease with freezing of gait
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- 713 Withdrawn by Author
- 714 The mitochondrial serine protease HtrA2 degrades diseaseassociated prion proteinM.M. Rahman, S. Akhter, S.T. Hong (Jessore, Bangladesh)
- Functional (psychogenic) neurological symptoms in patients with postural tachycardia syndrome (PoTS)
 L. Ricciardi, A.P. Owens, G. Ferrazzano, V. Iodice, C.J. Mathias, M.J. Edwards (London, United Kingdom)
- Unilateral decreased palpebral fissure in patients with Parkinson's disease: A new sign to consider
 M. Sanchez Abraham, O.S. Gershanik, S.S. Garcia, G. Mizraji, A. Chade, G. Gomez Arevalo (Buenos Aires, Argentina)
- Parkinsonism and dystonia: Predominant features in a case of ADEM
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- 718 Compliance with Parkinson's disease quality measures R.B. Schneider, R. Holloway, K. Biglan, M. Burack (Rochester, NY, USA)
- 719 Non-tardive orofacial akathisia with dental sensory phenomenon
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- 720 Psychogenic movement disorders: Are there neurocognitive differences between patients with non-epileptic seizures vs those with other hyperkinetic motor manifestations?

 B.M. Scott, A.M. Strutt, P.K. Lundberg-Love, A.L. Schmitt, E.R. Trifilio, D. Bowers (Gainesville, FL, USA)

- 721 A pilot study of a plant-based diet intevention in Parkinson's disease
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- 722 The role of nutrition in Parkinson's disease S.P. Shah, J.E. Duda (Philadelphia, PA, USA)
- 723 Psychodynamic and reality therapy for psychogenic movement disorders: report on 9 cases V.D. Sharma, R. Jones, G. Alexander, C. Testa, S. Factor (Atlanta, GA, USA)
- 724 Quantitative analysis of voice in Parkinson's disease
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- Beat complexity and variability may optimize the effects of rythmic auditory cueing on walk in Parkinson's disease
 B. Sophie, D.G. Dotov, C.D.C. Valérie, K. Torre, B. Bardy, S. Dalla Bella (Montpellier, France)
- 726 Effects of singing on voice and swallow in Parkinson's disease E.L. Stegemöller (Ames, IA, USA)
- 727 Repetitive finger movement, Purdue pegboard and buttoning in persons with Parkinson's disease E.L. Stegemöller, J. Uzochuckwu (Ames, IA, USA)
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- 729 Stressful life events precede the onset of hemifacial spasm. A retrospective study in Penang Hospital, Malaysia K. Tan, G.B. Eow, H.B. Chow, C. Cheah, Y.K. Chia, R. Kanesalingam, M.H. Rafia, R. Azman Ali, T.T. Lim (Georgetown, Malaysia)
- 730 Neurotological disease in intracranial tumors H.A.G. Teive, B.S. Zeigelboim, V.R. Fonseca, H.A. Carvalho, J.H. Faryniuk (Curitiba, Brazil)
- 731 Effectiveness of allied health therapy in the symptomatic management of progressive supranuclear palsy: A systematic review E. Tilley, S. White, M. Peters, S.A. Koblar, S. Doeltgen, J. McLoughlin (Adelaide, Australia)
- 732 Spinal and bulbar muscular atrophy with dementia of frontal-lobe type
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- 733 Nursing diagnoses related to motor and nonmotor symptoms in Parkinson's disease M.H.S. Tosin, B.G.R.B. Oliveira (Rio de Janeiro, Brazil)
- 734 A metabolomic study in post-mortem DBS human tissue V. Vedam-Mai, S. Sternberg, M. Williams, T.J. Garrett, M.S. Okun (Gainesville, FL, USA)
- Histopathological observations from 50 human deep brain stimulation cases
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- 736 Non-supportive touch improves static balance in active and inactive individuals with Parkinson's disease
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- 737 Demodex sp prevalence in Parkinson's disease patients 0. Yilmaz Kusbeci, O. Miman, M. Gedizlioglu (Izmir, Turkey)
- 738 Infantile systemic hyalinosis presenting as neurological hypertonic movement disorder
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- 739 Speed influences handwriting in persons with Parkinson's disease
 - A.F. Zaman, E. Stegemoller (Ames, IA, USA)
- 740 Anti-GAD65 negative stiff-person syndrome with a favorable response to pregabalin: A case post-thymoma excision accompanying central sleep apnea
 G. Zhang, L. Liu, N. Xiong, J. Huang, T. Wang (Wuhan, China)

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- 742 Aripiprazole-induced movement disorders A case-series S. Chouinard, P. Huot (Montreal, Canada)
- 743 Lithium induced lingual dystonia: A case report R.K. Dhamija, R. Aggarwal (New Delhi, India)
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- 745 Tremor and ataxia due to chronic toluene exposure: Case report
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- 746 Can the clinical phenotype in suspected drug induced Parkinsonism reliably predict the presence of abnormal functional imaging suggesting dopaminergic deficiency?

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- 748 Propriospinal myoclonus provoked by tramadol use H.S. Kim, Y. Kim, H. Lee (Seongnam, Korea)
- 749 Acute and reversible Parkinsonism with phorate A. Kumar (Patna, India)
- 750 Phenomenology and dopamine transporter density in a patient with amphetamine induced hyperkinetic facial movement disorders

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- 751 Pilot study of cardio-vascular risks, insulin resistance and neurocognition in neuroleptic-induced Parkinsonism in schizophrenia: Post-hoc analysis of RCT study H. Raheb, S. Chiu, Z. Cernovsky, K. Terpstra, J. Vaughese, H. Jirui, Y. Bureau, C. John, M. Husni, R. Campbell (London, ON, Canada)
- 752 Clinical characteristics of tetrabenazine-induced Parkinsonism
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- 753 5-Meo-DALT-induced cyclic myoclonus
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 B. Katirji (Cleveland, OH, USA)
- The effects of early versus late L-DOPA initiation in Parkinson's disease
 G. Yahalom, O.S. Cohen, N. Warmann-Alaluf, C. Shabat, H. Strauss, S. Elincx-Benizri, S. Israeli-Koren, E. Stein, S. Hassin-Baer (Ramat-Gan, Israel)

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- 756 Dopaminergic modulation of neural progenitor cells in the hippocampal dentate gyrus in a mouse model of Parkinson's disease W.H. Chiu, G.U. Höglinger, W.H. Oertel, V. Ries (Marburg, Germany)
- 757 Brain delivery of microencapsulated GDNF promotes functional and structural recovery in a primate model of Parkinson's disease E. Garbayo, H. Lana, G. D'Addario, M.d.M. Carmona-Abellan, I. Marcilla,

J.L. Lanciego, M.R. Luquin, M.J. Blanco-Prieto (Pamplona, Spain)

- 758 The critical role of Beclin 1 up regulation in dopamine D2 like receptor agonists-induced autophagy activation
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- 759 L-dopa therapy increases homocysteine concentration in cerebrospinal fluid from patients with Parkinson's disease C. Isobe, C. Otsuka, T. Murata, T. Abe, Y. Terayama (Sapporo, Japan)
- 760 Changes in α-7 nicotinic acetylcholine receptor specific binding in the brain of dyskinetic Parkinsonian monkeys V.A. Jourdain, L. Grégoire, T. Di Paolo (Manhasset, NY, USA)
- 761 The adenosine A2A receptor antagonist, istradefylline enhances and prolongs the anti-Parkinsonian activity by combined treatment with low doses of L-DOPA and dopamine agonists in MPTP-treated common marmosets T. Kanda, S. Uchida, K. Soshiroda, E. Okita, M. Kawai-Uchida, A. Mori, P. Jenner (Shizuoka, Japan)
- 762 Brain neurotransmitters in Parkinson's induced rats N. Kumar, R.K. Khanna (Jaipur, India)
- 763 Withdrawn by Author
- 764 The protective effect of curcumin on tyrosine hydroxylase immunoreactivity in both substantia nigra and the ventral tegmental area, after acute aluminum intoxication W. Laabbar, A. Elgot, H. Gamrani (Marrakech, Morocco)
- 765 Incidence and prescribing trends of antipsychotic and antiemetic dopamine receptor blocking agents (DRBAs) in patients with Parkinson's disease
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- 766 Novel structural congeners of a known phosphodiesterase type-IV inhibitor against experimental Parkinson's disease D.N. Nthenge-Ngumbau, S. Mitra, P. Verma, N. Ali, R. Singh, P. Bhattacharjee, J. Vinayagam, D. Nandi, P. Jaisankar, K. Mohanakumar (Kolkata, India)



- 767 Neuroprotective and neurotrophic effects of apigenin and luteolin in MPTP induced Parkinsonism in mice S.P. Patil, S. Sathaye (Mumbai, India)
- 768 Modulation of NADPH oxidase: A plausible candidate to prevent or slow down the neurodegneration process in lipopolysaccharide induced Parkinson's disease
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- 769 Effects and side-effects on Chinese patients with Wilson disease by unithiol (DMPS) intravenous infusion X. Wang, H. Liu (Shanghai, China)
- 770 Autophagy is involved in age-related sensitivity to Parkinsonian pathogenesis Y.P. Yang, H.F. Zheng, C.J. Mao, F. Wang, L.F. Hu, C.F. Liu (Suzhou, China)

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 - I. Aiba, Y. Saito, M. Kaneko, M. Kawai, M. Yoshioka, H. Matsuo, H. Fujimura, M. Tobita, T. Inui, K. Chida, A. Tamakoshi (Nagoya, Japan)
- Prevalence of depression in atypical Parkinsonian disorders versus Parkinson's disease
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- 773 Prevalence of anxiety in atypical Parkinsonian patients L. Almeida, M.S. Okun, D. Bowers, H. Ward, S. Fayad, C. Jacobson, N. McFarland (Gainesville, FL, USA)
- Usefulness of transcranial ultrasound in atypical Parkinsonism: A cross sectional study
 A. Alonso-Canovas, J.L. Lopez-Sendon, A. deFelipe-Mimbrera, M.C. Matute-Lozano,
 S.S. de laMaza-Cantero, R. Alvarez-Velasco, J. Buisan, G. Garcia-Ribas, I. Aviles-Olmos, J. Masjuan, J.C. Martinez Castrillo (Madrid, Spain)
- 775 Progression of clinical symptoms and survival in progressive supranuclear palsy
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- Diagnosing dementia in multiple system atrophy with MDS criteria for Parkinson's disease dementia
 N. Auzou, K. Dujardin, R. Biundo, A. Foubert-Samier, C. Barth, F. Tison, L. Defebvre, A. Antonini, W.G. Meissner (Bordeaux, France)
- Perry syndrome Characteristics of the first Portuguese family
 R. Barreto, M. Lopes, J.M. Roriz, M. Magalhães (Santa Maria Feira, Portugal)
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- Region-specific alterations of matrix metalloproteinase activity in multiple system atrophy
 F. Bassil, A. Monvoisin, M.H. Canron, A. Vital, W.G. Meissner, F. Tison, P.O. Fernagut (Bordeaux, France)
- Young onset MSA can mimic young onset PD- clues to help the diagnosis
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- 782 Epidemiological aspects in a Tunisian cohort of Parkinsonplus syndromes
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- Cortical excitability and sensorimotor integration correlates with cognitive profile in vascular Parkinsonism
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- 784 Diagnostic accuracy of magnetic resonance Parkinsonism index in progressive supranuclear palsy in Indian patients K. Bharambe, C. Sankhla, S. Gupta, N. Savant (Mumbai, India)
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- Relationship between uric acid levels and progressive supranuclear palsy (PSP)
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- 787 Acute onset of shuffling gait from hypertensive hemorrhage J.Y.C. Chen, I. Keshet, J. Weinberger (San Francisco, CA, USA)
- 788 Gait disturbance and Parkinsonism in a patient with hereditary diffuse leukoencephalopathy with axonal spheroids and CSF1R mutation Y.F. Chen, M.Y. Lan, J.S. Liu, Y.Y. Chang (Kaohsiung, Taiwan)
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- 790 Progressive supranuclear palsy showing pure akinesia with gait freezing – Clinicopathological report of an autopsy case E.J. Choi, D.G. Lee, S.K. Khang, C.S. Lee (Seoul, Korea)
- 791 Parkinsonism due to neurosyphilis M. Chraa, N. Kissani (Marrakech, Morocco)
- 792 Corticobasal syndrome due to Creutzfeldt-Jakob disease: Report of a case C. Cosentino, Y. Nuñez, M. Velez, E. Sarapura, R. Suarez, L. Torres (Lima, Peru)
- 793 To study falls in Parkinson's disease (PD)A. Deep, A. Lieberman, R. Dhall, A. Tran, M.J. Liu (Phoenix, AZ, USA)



- 794 Spectrum of disorders presenting as secondary Parkinsonism in a rural based medical teaching college in Western India
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- 795 Sudden onset Parkinsonism following hyponatraemia correctionG. Fabiani, H.A.G. Teive (Curitiba. Brazil)
- 796 Young onset Parkinsonism after bariatric surgery G. Fabiani, H.A.G. Teive (Curitiba, Brazil)
- 797 Progressive supranuclear palsy and statin use
 A. Fuentes, D. Standaert, C. Marras, D. Riley, D. Hall, B. Kluger, J. Juncos, S. Reich,
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- 798 Usefulness of cardiac ¹²³l-MIBG uptake, olfactory function and substantia nigra hyperechogenicity in distinguishing between Parkinson's disease and Parkinsonian syndrome H. Fujita, K. Suzuki, A. Numao, Y. Watanabe, M. Miyamoto, T. Miyamoto, H. Takekawa, T. Kadowaki, K. Hashimoto, K. Hirata (Mibu, Japan)
- 799 Relationship between serum uric acid concentration and disease progression in multiple system atrophy J. Fukae, S. Yanamoto, S. Fujioka, T. Hatano, A. Mori, T. Nomi, K. Fukuhara, N. Hattori, Y. Tsuboi (Fukuoka, Japan)
- A case of vascular Parkinsonism simultaneous with progressive supranuclear palsy (PSP)
 I. Gabrielyan, H. Amirjanyan, K. Harutyunyan, G. Avagyan, H. Hambardzumyan, H. Manvelyan (Yerevan, Armenia)
- 801 Lose-dose lithium therapy improved "off" time without worsened dyskinesias in a patient with Parkinson's disease T. Guttuso (Buffalo, NY, USA)
- Observing of the incidence and characteristics of Parkinson's disease in the neurology clinic of University of Uyo Teaching Hospital, Uyo, Nigeria
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- 803 Meningioma presenting as tremor dominant Parkinsonism T. Khan, S.A. McMahan (Weston, FL, USA)
- 804 123I-MIBG myocardial scintigraphy and neurocirculatory abnormalities in dementia with Lewy bodies J.S. Kim, H.E. Park, Y.S. Oh, I.S. Park, K.S. Lee (Seoul, Korea)
- 805 A neuroimaging rating scale with adjustable diagnostic validity to enhance the inter-rater reliability of hummingbird sign Y.J. Kim, Y.E. Kim, S.Y. Kang, H. Ma (Anyang, Korea)
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- 807 Unusual manifestation of dural arteriovenous fistula presenting with Parkinsonism and impaired smooth pursuit eye movement K.H. Kim, Y.S. Park, W.T. Yoon, B.C. Suh, H.S. Moon, P.W. Chung, Y.B. Kim (Seoul, Korea)

- Diagnostic accuracy of multiple system atrophy: An autopsy study of 134 patients
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- Effects of isradipine in a transgenic mouse model of multiple system atrophy
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- 810 Possible neuroprotective mechanism of atorvastatin and simvastatin in experimental model of Parkinson-like symptoms
 - A. Kumar, N. Sharma, J. Mishra (Chandigarh, India)
- 811 Diffusion tensor imaging of idiopathic normal-pressure hydrocephalus and the cerebrospinal fluid tap test H.W. Lee, P.W. Ko, D. Choi, K. Kang, U. Yoon (Daegu, Korea)
- 812 Cognitive impairments associated with morphological changes in cortical and subcortical structures in multiple system atrophy of the cerebellar type M.J. Lee, J.H. Shin, J.K. Seoung, J.H. Lee, U. Yoon, J.H. Oh, D.S. Jung, E.J. Kim (Busan, Korea)
- Retinal nerve fiber layer and retinal thickness changes in multiple system atrophy
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- 814 The contribution of cerebellar cortex to cognitive impairment in multiple system atrophy using a probabilistic MR atlas-based topographic analysis

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- 815 American multiple system atrophy natural history study P.A. Low, S.G. Reich, J. Jankovic, C.W. Shults, M.B. Stern, P. Novak, C.M. Tanner, S. Gilman, F.J. Marshall, F. Wooten, B. Racette, T. Chelimsky, W. Singer, S. May, D.M. Sletten, P. Sandroni, J. Mandrekar (Rochester, MN, USA)
- PROMESA: Progression rate of MSA under EGCG supplementation as anti-aggregation-approach
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- 817 The visual estimation of midbrain to pons ratio combined with cerebrospinal fluid biomarkers improves the diagnostic accuracy of PSP
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- 818 Movements disorders due to toxoplasma abscess in patients with AIDS
 - A.M. Magnerou, V. Sini, P. Ongolo-zogo, Y. Fogang, L. Kaptue (Dakar, Senegal)
- 819 Elimination of neurotoxic gangliosides protects against MPTP-induced neurodegeneration and executive dysfunction in mouse model of Parkinson's disease P. Maiti, M.P. McDonald, T. Rex (Memphis, TN, USA)
- 820 Meningioma presenting as Parkinsonism S.A. McMahan, N. Galvez (Weston, FL, USA)



- Unusual phenotype of pathologically confirmed progressive supranuclear palsy
 K. Mensikova, L. Tuckova, J. Ehrmann, P. Kanovsky (Olomouc, Czech Republic)
- Fahr's syndrome presenting with atypical Parkinsonian signs:
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 N.F. Mercan, S. Ozdemir, H. Uyanik, N. Oztekin, F. Ak (Ankara, Turkey)
- Underlying dopaminergic deficit in suspected drug-induced Parkinsonism is associated with olfactory impairment

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- 939 Quantitative gait and balance testing for NPH J.F. Quinn, S. Jewell, M. Fleming, S. O'Connor, M. Mancini (Portland, OR, USA)
- 940 Withdrawn by Author

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941 Exome sequencing as a diagnostic tool for hereditary ataxias: Our experience in a neurogenetic center from Buenos Aires-Argentina S.A. Rodrìguez-Quiroga, C. Marta, D. Gonzalez-Moròn, E.M. Gatto, S. Gonorazky, P. Vega, N. Medina, C. Vazquez Dusefante, T. Arakaki, N.S. Garretto, M.A. Kauffman

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 - T. Schmitz-Hübsch, A.U. Brandt, C. Pfueller, A. Seidel, T. Klockgether, F. Paul A. Kühn, M. Minnerop, S. Doss (Berlin, Germany)
- 943 Strabismus and eye movement deficits in Machado-Joseph disease
 - A.G. Shaikh, G. Wilmot, A. Ahmed, F.F. Ghasia (Cleveland, OH, USA)
- 944 A unique combination of spinocerebellar ataxia type 2 and 3 mutations in a patient
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- 945 India share the common mitochondrial lineage with Caucasians with increased load of mitochondrial variations in Friedreich's ataxia (FRDA) patients I. Singh, S. Shakya, M. Faruq, A.K. Srivastava, M.V. Padma, M. Behari, M. Mukerji (New Delhi, India)
- Autosomal recessive cerebellar ataxias in India: Genetic heterogeneity and mutation spectrum revealed by whole exome sequencing
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- 947 Case of spinocerebellar ataxia type-12 associated with only 43 CAG repeats in PPP2R2B gene
 A. Takkar, M. Faruq, S. Shakya, A. Garg, A.K. Srivastava (New Delhi, India)
- 948 Sympathetically induced sudomotor and cold pressor test in patients of spinocerebellar ataxia 2: A preliminary study D. Tamuli, M. Faruq, A.K. Jaryal, A.K. Srivastava, K.K. Deepak (New Delhi, India)
- Distal hereditary motor neuropathy with HSJ1 chaperone mutation, presenting with peripheral motor neuropathy, associated to Parkinsonism, and cerebellar ataxia. Case report
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- 953 SCA2 presenting as a focal dystonia H.M. Wied, J.J. Gaul, L.E. Doyle, S.G. Reich (Baltimore, MD, USA)
- 954 Withdrawn by Author
- Recurrent episodic isolated nystagmus associated with GAD antibody positivity
 Z. Xu, P.X. Koh, N.K. Loh, T. Umapathi, J.Y.H. Chia (Singapore, Singapore)

- 956 Clinical characteristics of patients with paraneoplastic cerebellar degenerationZ. Xu, L.C. Tan (Singapore)
- 957 Neurotological findings prevalent in ataxias hereditary B.S. Zeigelboim, H.A.G. Teive, E.S. Abdulmassih, R.C. Cardoso, G. Santos, M.I. Severiano, R. Sampaio (Curitiba, Brazil)
- 958 Vestibular disease in patients with Friedreich ataxia B.S. Zeigelboim, H.A.G. Teive, R.C. Cardoso, G. Santos, M.I. Severiano, J.H. Faryniuk (Curitiba, Brazil)
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- 961 Movement disorders and the media B.R. Barton, K. Kompoliti (Chicago, IL, USA)
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- The contributions of continuing education in dysphagia for pediatric nursing care in a teaching hospital
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- 965 Efficacy of an education and exercise group on understanding of Parkinson's and uptake of exercise in people with Parkinson's disease
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- Medication errors prolong length of stay in hospitalized Parkinson's disease patients
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- 967 Knowledge and awareness regarding Parkinson's disease in general population Truth and prejudice
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968 Parkinson's progression markers initiative (PPMI) prodromal cohort of REM behavior disorder (RBD) with DAT deficit Parkinson's Progression Markers Initiative (PPMI) RBD Investigators (New Haven, CT, USA)

- 969 Rat brain basal ganglia imaged with optical coherence tomography: Feasibility and future perspectives J.S. dos Ângelos, W.O.C. Lopez, R.C.R. Martinez, P.R. Reis, C.K. Takimura, M.J. Teixeira, P.A. Lemos Neto, E.T. Fonoff (Sao Paulo, Brazil)
- 970 Arterial spin labelling (ASL) reveals an abnormal cerebral perfusion pattern in Parkinson's disease K. Abe, T. Hayashi, M. Yamamoto, N. Akiyama, M. Fujita (Nishinomiya, Japan)
- Brain amyloid-β content is associated with cognitive decline in Parkinson's disease: A cross sectional study using [F18] FDDNP PET and CSF Aβ levels
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- 972 Brain connectivity changes associated with t-DCS and cognitive training plus cognitive training in Parkinson's disease with mild cognitive impairment
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- 973 Substantia nigra echogenicity and oddor discrimination in REM-sleep behavior disorder and Parkinson's disease
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- 974 Comparison between oddor discrimination, substantia nigra echogenicity and nigrostriatal dopaminergic activity measured by 18F.PR04 PET in Parkinson's disease
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- 975 Functional connectivity in Parkinson's disease is differentially impacted by alpha-synuclein and amyloid
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- White matter microstructure in idiopathic craniocervical dystonia
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- Pattern of regional cortical thickness in patients with Parkinson's disease and impulse control disorders
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- 978 Lead location for subthalamic nucleus deep brain stimulation using a 3d visualization tool
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- 980 Comparison of baseline 123-I Ioflupane SPECT striatal binding ratios with diffusion tensor images from the Parkinson's progression marker initiative C.L. Gallagher, J. Sojkova, B.B. Bendlin, O. Okonkwo, A. Alexander, I.W. Wu, N. Schuff (Madison, WI, USA)
- HemiParkinsonism leading to the discovery of a large epidermoid tumor
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- 982 Longitudinal evaluation of brain atrophy in Parkinson's 's disease and Parkinson's plus syndromes
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- 983 Metabolic changes associated with slow dopaminergic depletion: A longitudinal PET study in the MPTP primate model of Parkinson's disease
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- 984 Assessment of outcomes in Parkinson's disease subjects randomized to SPECT imaging of the dopamine transporter P.T. Hickey, M. Kuchibhatla, B.L. Scott, L. Gauger, M.A. Stacy (Durham, NC, USA)
- 985 The decreasing of dopamine-transporter uptake on the right ipsilateral side of tremor in a patient with Parkinson's disease E. Hoshiyama, T. Kadowaki, A. Nakamura, K. Suzuki, K. Hashimoto, K. Hirata (Tochiqi, Japan)
- 986 The role of DaT scan in drug induced Parkinsonism R. Irons, B.M. Joanna, C.K. Apurba (Reading, United Kingdom)
- D. Jennings, M. Stern, A. Siderowf, S. Eberly, D. Oakes, K. Marek, PARS Investigators (New Haven, CT, USA)
- Quantitative assessment of iron deposition in Parkinson's disease using enhanced T2 star weighted angiography (ESWAN)
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- 989 Longitudinal [¹¹C]BF-227 PET study in MSA-C patients A. Kikuchi, N. Okamura, M. Tashiro, S. Furumoto, T. Hasegawa, S. Watanuki, K. Hiraoka, Y. Funaki, T. Baba, M. Kobayashi, N. Sugeno, M. Konno, E. Miura, R. Oshima, S. Yoshida, R. Iwata, S. Takahashi, H. Fukuda, Y. Itoyama, H. Arai, Y. Kudo, K. Yanai, M. Aoki, A. Takeda (Sendai, Japan)
- 990 Cognitive impairment and its structural correlates in the Parkinsonian subtype of multiple system atrophy J.S. Kim, J.J. Yang, D.K. Lee, J.M. Lee, J. Youn, Y.E. Huh, J.W. Cho (Seoul, Korea)
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- A functional neuroradiological study in an adult case of beta-propeller protein-associated neurodegeneration
 S. Kumada, I. Hayakawa, Y. Nakata, E. Yoshida-Kasai, S. Uchino, Y. Hachiya,
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- The usefulness of magnetic resonance imaging on Parkinsonian multiple system atrophy before the occurrence of autonomic dysfunction W.W. Lee, J. Shin, H.J. Kim, H. Park, C.W. Shin, B.S. Jeon (Seoul, Korea)

- Longitudinal assessment of subcortical volume and iron content in two variants of multiple system atrophy
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- DaTscan: Correlation of clinical phenotype and and scan concordance: A retrospective study
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- 997 The role of the frontal lobe in complex walking tasks in healthy older adults and patients with Parkinson's disease:
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 - I. Maidan, H. Bernad-Elazari, F. Nieuwhof, M. Reelick, N. Giladi, J. Deutsch, J. Hausdorff, A. Mirelman (Tel Aviv, Israel)
- Midbrain MR planimetry in neurodegenerative Parkinsonism:
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- Automatic and non-automatic gait: Identifying two different networks using functional MRI
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- 1000 Mechanisms underlying impaired self-agency in functional movement disorders: A resting state fMRI study C.W. Maurer, S. Horovitz, K. LaFaver, M. Hallett (Bethesda, MD, USA)
- Longitudinal functional MRI studies of Parkinson's disease patients with and without mild cognitive impairment
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- 1002 Anatomical differences in white matter integrity between idiopathic normal pressure hydrocephalus and secondary obstructive hydrocephalus: Diffusion tensor study
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- 1003 GABA (gamma-aminobutyric acid) in essential tremor: An MR spectroscopy study
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- 1004 First Latin American experience in the assessment of striatal dopaminergic uptake in patients with Parkinson's disease by means of co-registered 18F-DOPA PET/CT and MRI images M.C. Peralta, D. Menna, M. Aguilar, H. Corradini, A. Perez, A. Valda, F. Biafore, J.A. Gili, M.J. Bastianello (Caba, Argentina)
- 1006 Transcranial sonography of the substantia nigra in Parkinson's disease (PD) and controls: Distinguishing PD and controls by two different measurement strategies
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- 1010 Dopamine transporter scan (DaTscan) and clinical global impression of severity of Parkinson's disease: Data from a non motor natural history study
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- 1011 Imaging neurodegeneration in movement disorders: A VBM study
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- 1012 Resting state fMRI differentiates essential tremor patients from controls
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- 1015 The dynamic change in substantia nigra hyperechogenicity in Parkinson's disease is associated with age and disease duration
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- 1016 Brain microstructural grey and white matter alterations in patients with cortico-basal syndrome
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- 1017 Structural assessment in craniocervical dystonia: global and differential analyses
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- 1018 Amyloid-β imaging in Parkinson's disease: Comparison of analytic techniques
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 - K.K. Alagamuthu, A. Meyyazhagan, M.A. Shafi Ahammed Khan, P. Krishnan, S. Keshavaroa, B. Vellingiri (Coimbatore, India)

1020 Case of a man with early Parkinson's disease with a history of essential tremor running in the familyG. Avaqyan, A. Sahakyan, I. Gabrielyan, S. Khachaturyan, K. Harutyunyan,

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- 1022 Expanding the phenotype of *PLA2G6* related Parkinson's subtypes
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- 1023 Clinical and genetic analysis of a large pedigree with Parkinson's disease from an isolated Trentino valley
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- 1024 Investigating prodromal markers of Parkinson's disease in adults with hemizygous 22q11.2 deletions N.J. Butcher, C. Marras, M. Pondal, P. Rusjan, L. Christopher, A.P. Strafella, A.E. Lang, A.S. Bassett (Toronto, ON, Canada)
- 1025 Genetic variants of SNCA are associated with the susceptibility of Parkinson's disease but not for amyotrophic lateral sclerosis and multiple system atrophy in a Chinese population Y. Chen, Q. Wei, R. Ou, B. Cao, X. Chen, B. Zhao, K. Chen, W. Song, H. Shang (Chengdu, China)
- 1026 Mitochondria-related genes and the risk of Parkinson's disease and Alzheimer's disease: Gene-gene interaction analysis S.J. Chung, J. Kim, Y.J. Kim, K. Kim, S. You, M.J. Kim, H.S. Ryu, S.Y. Kim, J.H. Lee (Seoul, Korea)
- 1027 Polymorphisms of dopamine receptor genes are associated to increased risk of visual hallucinations in Italian Parkinson's disease patients
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 - C. Comi, M. Ferrari, F. Marino, G. Riboldazzi, S. Rosa, R. Cantello, G. Bono M. Cosentino (Novara, Italy)
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- 1029 Using a GBA deficient drosophila model to understand pathogenic mechanisms in PD M.Y. Davis, K. Trinh, R. Thomas, B. Whittley, T. Montine, L. Pallanck (Seattle, WA, USA)
- 1030 DNA methylation as an epigenetic biomarker for Parkinson's and Alzheimer's diseases
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- 1031 Substantia nigra hyperechogenicity in LRRK2 G2019S mutation carriers
 - A. Drobnis, J. Hagenah, R.A. Ortega, A. Glickman, C. Wang, A. Deik, J. Soto-Valencia, B. Johannes, M. Barrett, D. Raymond, L.J. Ozelius, K. Marder, N. Giladi, S.B. Bressman, R. Saunders-Pullman (New York, NY, USA)
- 1032 Withdrawn by Author
- 1033 Genetic loci of Parkinson's disease in rapid eye movement sleep behavior disorder
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- 1034 Postural control alterations in healthy LRRK2 G2019S mutation carriers
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- 1035 The SNP rs11868035 may not confer genetic risk toward Parkinson's disease in central China C. Han, J. Huang, N. Xiong, L. Liu, G. Zhang, H. Jiang, J. Yang, J. Li, X. Xu, Y. Shen, T. Wang (Wuhan, China)
- 1036 CSF derived exosomal microRNA profile in patients with Parkinson's disease
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- Association between PARK16 variants and Parkinson's disease in central China: A case-control study
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- 1038 The tyrosine hydroxylase Val81Met polymorphism is associated with motor symptom severity in de novo patients with Parkinson's disease

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- 1039 Whole-exome sequencing for mutation discovery in an African-American pedigree with Parkinson's disease M.S. LeDoux, S.R. Vemula, J. Xiao, O.A. Ross, Z.W. Wszolek (Memphis, TN, USA)
- 1040 Genetic variation and cognitive impairment in Parkinson's disease patients from Uruguay A. Lescano, V. Raggio, E. Dieguez, B. Aguiar, L. Bocos, N. González, F. Saldaña, J. Sburlati, J.M. Carrasco, F. Brunet, I. Amorín, R. Aljanati, M. Martinovic, L. Roche, R. Buzó, S. Dansilio, M. Inca-Martinez, B.A. Cholerton, C.P. Zabetian, I. F. Mata (Montevideo, Uruguay)
- Leucine-rich repeat kinase 2 (LRRK2) interacts with vacuolar protein sorting 35 (Vps35) to regulate autophagy
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 A. Tsang, D. Fong, A. Dawson, K. Venderova (Stockton, CA, USA)
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- Olfaction in *Parkin* compound and single heterozygotes in young onset United Kingdom PD patients
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A. Alonso Cánovas (Madrid, Spain)

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- 1151 Glucocerebrosidase mutations and atypical Parkinsonism: A multi-centre exploratory study
 R. Álvarez Velasco, P. Giraldo, P. Irún, E. Viedma Guiard, J. López Sendón, I. Avilés
 Olmos, G. García Ribas, P.J. García-Ruiz, L. Vela Desojo, J.C. Martínez Castrillo,
- 1152 C9ORF72 expansion in neurodegenerative disorders characterized by Parkinsonism and chorea N.Y. Abramycheva, E.Y. Fedotova, M.S. Stepanova, S.A. Klyushnikov, Y.A. Seliverstov, S.N. Illarioshkin (Moscow, Russia)
- 1153 Phosphorylated pS1292 LRRK2 to total LRRK2 concentration ratio in urine exosomes distinguishes LRRK2-PD and idiopathic PD R.N. Alcalay, K.B. Fraser, A. West (New York, NY, USA)



- 1154 Glucocerebrosidase activity in Parkinson's disease with and without GBA mutations
 - R.N. Alcalay, O.A. Levy, C. Waters, S. Fahn, B. Ford, S.H. Kuo, P. Mazzoni, M.W. Pauciulo, W. Nichols, Z. Gan-Or, G.A. Rouleau, W.K. Chung, P. Wolf, P. Oliva, J. Kreutzer, K.S. Marder, X.K. Zhang (New York, NY, USA)
- 1155 Double homozygous mutations (R275W and M432V) in the Parkin gene associated with late onset PD

 J. Carr, B. Sihaam, T. Chris, B. Soraya, F. Matt (Cape Town, South Africa)
- 1156 Establishment and validation of the first stable human ATP7B knockout hepatoma cell line: A Wilson disease cell model G. Chandhok, V. Sauer, A. Aggarwal, M. Bhatt, A. Zibert, H.H.J. Schmidt (Münster, Germany)
- 1157 Phenotypic characterization of patients with p.C271* Wilson disease mutation; the most frequent ATP7B mutation in India G. Chandhok, A. Zibert, H.H.J. Schmidt, M. Bhatt, A. Aggarwal (Münster, Germany)
- 1158 No association of GPNMB rs156429 polymorphism with Parkinson's disease, amyotrophic lateral sclerosis and multiple system atrophy in Chinese population
 Y. Chen, R. Ou, Q. Wei, B. Cao, X. Chen, K. Chen, B. Zhao, H. Shang (Chengdu, China)
- 1159 LRRK2 and GBA variants influence rate of motor progression in Parkinson's disease M.Y. Davis, C. Johnson, J.B. Leverenz, D. Weintraub, J.Q. Trojanowski, A. Chen-
 - M.Y. Davis, C. Jonnson, J.B. Leverenz, D. Weintraub, J.Q. Irojanowski, A. Chen-Plotkin, V.M. Van Deerlin, S. Factor, C. Wood-Siverio, J.F. Quinn, K.A. Chung, A.L. Peterson-Hiller, L.S. Rosenthal, T.M. Dawson, M.S. Albert, J.G. Goldman, G.T. Stebbins, B. Bernard, D. Yearout, S. Hu, B.A. Cholerton, T.J. Montine, K.L. Edwards, C.P. Zabetian (Seattle, WA, USA)
- 1160 Novel GNAL variant in a Brazilian patient with sporadic dystonia
 - P.M. de Carvalho Aguiar, C. Oliveira dos Santos, F.P. da Silva- Junior, S.C. Azevedo Silva, E.R. Barbosa, V. Borges, M.S.G. Rocha, H.B. Ferraz (São Paulo, Brazil)
- 1161 Novel compound heterozygous mutations in PRKRA cause pure dystonia
 - P. de Carvalho Aguiar, V. Borges, H.B. Ferraz, L.J. Ozelius (São Paulo, Brazil)
- 1162 Novel recruitment strategy to enrich for LRRK2 mutation carriers
 - T. Foroud, D. Smith, J. Jackson, J. Verbrugge, C. Halter, L. Wetherill, K. Sims, W. Xin, V. Arnedo, S. Lasch, K. Marek (Indianapolis, IN, USA)
- 1163 Association study of GWAS top hits in late-onset Alzheimer's disease with the susceptibility to Parkinson's disease in a Chinese population
 - J.F. Guo, Y. Wang, X.X. Yan, B. Tang (Changsha, China)
- 1164 Exon dosage analysis of parkin gene in Chinese sporadic Parkinson's disease
 - J.F. Guo, X. Dong, X.X. Yan, B. Tang (Changsha, China)
- Secondary paroxysmal kinesigenic dyskinesia associated with CLCN2 gene mutation
 H.A. Hanagasi, B. Bilgic, T.E.M. Abbink, F. Hanagasi, Z. Tufekcioglu, H. Gurvit, N. Basak, M.S. van der Knaap, M. Emre (Istanbul, Turkey)
- 1166 A novel mutation for McLeod neuroacanthocytosis V.N. Holiday, A. Hiller (Portland, OR, USA)

- 1167 The impact of rare variants in FUS and HTR2A in essential tremor
 - F. Hopfner, G. Stevanin, S.H. Müller, E. Mundwiller, M. Bungeroth, A. Durr, M. Pendziwiat, M. Anheim, S.A. Schneider, L. Tittmann, S. Klebe, D. Lorenz, G. Deuschl, A. Brice, G. Kuhlenbäumer (Kiel, Germany)
- 1168 Association of MAPT single nucleotide polymorphism with corticobasal syndrome
 - C.L. Huang, S.C. Lai, Y.W. Lin, Y.H. Wu-Chou, C.S. Lu, T.H. Yeh (Taoyuan, Taiwan)
- Systematic mutational analysis of glucocerebrosidase gene in a Parkinson's disease population from Southern Spain
 Jesus, P. Gomez-Garre, I. Huertas-Fernandez, I. Bernal-Bernal, M. Bonilla-Toribio, M.T. Caceres-Redondo, F. Carrillo, L. Vargas-Gonzalez, M. Gomez-Llamas, E. Calderón, M. Carballo, P. Mir (Seville, Spain)
- 1170 Phenotypic and molecular characterisation of autosomal recessive spastic paraplegias
 E. Kara, J. Hardy, H. Houlden, For the Institute of Neurology HSP Collaboration (London, United Kingdom)
- 1171 Dopamine receptor (DRD3 rs6280) polymorphism and the risk of impulse control disorders in an Indian Parkinson's disease cohort
 - A. Kishore, S. Moorthy, S. Krishnan, G. Sarma, S. Sarma, M. Banerjee (Trivandrum, India)
- 1172 C9orf72 mutation in a patient with a movement disorder presentation
 - N. Licking, R. Woltjer, T. Bird, J. Quinn (Portland, OR, USA)
- 1173 SPG11 mutations cause autosomal recessive axonal Charcot-Marie-Tooth disease
 T. Lo Giudice, C. Montecchiani, M. Di Lullo, M. Mearini, A. Casella, F. Gaudiello, C. Terracciano, R. Massa, E. Rogaeva, P.H. St George-Hyslop, J.L. Pedroso,
- 0.G.P. Barsottini, T. Kawarai, A. Orlacchio (Rome, Italy)1174 Exome sequencing in 25 index cases of congenital mirror movements
 - A. Méneret, E.A. Franz, O. Trouillard, R.J.M. Gardner, C. Depienne, S.P. Robertson, E. Roze, D. Markie (Paris, France)
- 1175 A missense mutation in the KCTD17 gene causes autosomal dominant myoclonus-dystonia
 - N.E. Mencacci, I. Rubio-Augusti, A. Zdebik, F. Asmus, M. Ludtmann, A.K. Hauser, V. Plagnol, A. Pittman, S. Bandres-Ciga, M. Soutar, K. Peall, H. Morris, D. Trabzuni, M. Ryten, M. Tekman, H. Stanescu, R. Kleta, M. Carecchio, N. Nardocci, B. Garavaglia, E. Lohmann, A. Weissbach, C. Klein, J. Hardy, A.Y. Abramov, T. Foltynie, T. Gasser, K.P. Bhatia, N.W. Wood (London, United Kingdom)
- 1176 Methodology for assessment of genetic-environmental interaction in epigenesis of early onset Parkinson's disease in Arab ancestry
 - A.A. Peer Zada, S. Nahrir, J.A. Bajwa (Riyadh, Saudi Arabia)
- 1177 The Contursi family 20 years later: Intrafamilial variability in a kindred with A53T mutation of SCNA gene
 L. Ricciardi, S. Petrucci, D. Di Giuda, M.C. Sensi, F. Cocciolillo, M. Ginevrino,
 E.M. Valente, A. Fasano (London, United Kingdom)



- 1178 Exome association study and 2nd SNP-GWAS of Japanese Parkinson's disease
 - W. Satake, Y. Ando, M. Suzuki, H. Tomiyama, Y. Nagai, K. Kashihara, S. Murayama, H. Mochizuki, K. Nakashima, K. Hasegawa, A. Takeda, K. Wada, S. Tsuji, M. Yamamoto, M. Murata, N. Hattori, T. Toda (Kobe, Japan)
- 1179 Association analysis of the GRN rs5848 and MAPT rs242557 polymorphisms in Chinese patients with PD, ALS and MSA H. Shang, Y. Chen, B. Cao, X. Chen, B. Zhao, Q. Wei, R. Ou, X. Guo (Chengdu, China)
- 1180 A novel tau mutation, p.K317N, and globular glial tauopathy P.M. Tacik, M. DeTure, W.L. Lin, M. Sanchez Contreras, A. Wojtas, K.M. Hinkle, S. Fujioka, M.C. Baker, R. Walton, Y. Carlomagno, P. Brown, A. Strongosky, N. Kouri, M.E. Murray, L. Petrucelli, K.A. Josephs, R. Rademakers, O. Ross, Z. Wszolek, D.W. Dickson (Jacksonville, FL, USA)
- 1181 Juvenile Parkinsonism and epilepsy due to homozygous mutations in *DNAJC6* P. Termsarasab. T.S. Pearson (New York, NY, USA)
- 1182 Gene expression in rat brain by GSM900 MHz N.K. Tiwari, V.P. Sharma, A. Pathak (Barabanki, India)
- 1183 C9orf 72 repeat expansions in a Canadian provincial cohort A. Venkitachalam, S. Hume, S. Ashtiani, S. Christian, O. Suchowersky (Edmonton, AB, Canada)
- 1184 Interaction between SNCA, LRRK2 and GAK increases susceptibility to Parkinson's disease in a Chinese population W. Yu, N. Li, L. Chen, L. Wang, E.K. Tan, R. Peng (Chengdu, China)

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- 1185 Modulation of dystonia during sleep E. Antelmi, R. Ferri, K. Bhatia, F. Mignani, C. Scaglione, F. Provini, P. Martinelli, R. Liguori (Bologna, Italy)
- 1186 Implementing a Delphi panel to improve understanding of patient characteristics of advanced Parkinson's disease A. Antonini, P. Odin, L. Kleinman, A. Skalicky, T. Marshall, K. Sail, K. Onuk (Venice, Italy)
- 1187 Levodopa responsive Parkinsonism in a subject affected by facioscapulohumeral muscular dystrophy 1S. Beniaminov, M. Paucar, P. Svenningsson (Stockholm, Sweden)
- 1188 Assessment of dose failure and delayed-ON with the timeto-ON questionaire (TOQ) and Parkinson's KinetiGraph in PD patients with motor fluctuations S. Brillman, S.H. Isaacson (Boca Raton, FL, USA)
- 1189 Hyperkinetic prehension in patients with Parkinson's disease and levodopa-induced dyskinesias
 M.A. Burack, C. Geraci, J. Mink (Rochester, NY, USA)
- 1190 A posturography analysis while dual task differentiates Parkinson's disease patients from healthy controls B. De la Casa-Fages, F. Alonso-Frech, F. Grandas (Madrid, Spain)
- 1191 A simple approach to monitoring of Parkinson's disease state using a Smart phone platform

 J.M. Dean, M. Silverman (Boulder, CO, USA)

- 1192 The utilization of smartphone devices to enhance clinical interventions
 - J.M. Dean, M. Silverman (Boulder, CO, USA)
- 1193 Withdrawn by Author
- Physical activity correlates with disease severity among new onset Parkinson's disease patients
 P. Gonzalez-Latapi, J.D. Ciolino, T. Simuni (Boston, MA, USA)
- 1195 New observations in the Fragile-X associated tremor/ataxia syndrome (FXTAS) phenotype D.A. Hall, A.Y. Fraint, P. Vittal, A. Szewka, B. Bernard, E. Berry-Kravis (Chicago, IL, IISA)
- 1196 4-year longitudinal changes in clinical rating, medication and quantitative motor assessment in mild and moderate Parkinson's disease: Results from the MODEP study
 S. Heinzel, F. Bernhard, M. Maechtel, T. Heger, S. Nussbaum, W. Maetzler, D. Berg (Tuebingen, Germany)
- 1197 Primary familial brain calcification (PFBC) with known gene mutations A systematic review
 M. Kasten, V. Tadic, A. Domingo, D. Alvarez Fischer, A. Westenberger, C. Klein (Lübeck, Germany)
- 1198 Movement disorder emergencies Experience of tertiary care Neuropsychiatry Center in North India S. Kushwaha. A. Anthony. S. Maheswari (Delhi, India)
- 1199 Dysphagia in PD: Response to continuous dopaminergic stimulation
 A. López, J.P. Cabello, R. Ibáñez, J. Olmedo, J. Vaamonde (Ciudad Real, Spain)
- 1200 Two patients with radiographic NPH and idiopathic Parkinson's disease
 H.S. Lee, M.F. Lew (Los Angeles, CA, USA)
- 1201 Psychogenic movement disorders in veterans:
 Phenomenology and psychiatric comorbidity
 J.D. Mack, J. Quinn, S. O'Connor, B. Lobb, C. Murchison (Portland, OR, USA)
- 1202 Impact of different baseline motor features on prognosis in Parkinson's disease
 A.D. Macleod, C.E. Counsell (Aberdeen, United Kingdom)
- 1203 Voluntary control of facial musculature in Parkinson's disease M. Marneweck, G. Hammond (New York, NY, USA)
- 1204 The "Whack-a-Mole" sign in functional movement disorders J.E. Park, C.W. Maurer, M. Hallett (Bethesda, MD, USA)
- 1205 Postural movement strategy for maintaing balance in early Parkinson's disease with mild postural instability

 J.H. Park, Y.J. Kang, T.K. Lee, K.B. Sung (Bucheon-si, Korea)
- 1206 Velopharyngeal dystonia: An unusual focal task-specific dystonia
 A. Patel, L. Sulica, S. Frucht (New York, NY, USA)
- Learning more from finger tapping in Parkinson's disease: Up and down from dyskinesia to bradykinesia
 M. Picillo, G.B. Vincos, D.S. Kern, S.H. Fox, A.E. Lang, A. Fasano (Toronto, ON, Canada)



- 1208 Clinical features of late-stage early-onset Parkinson's disease: 38 years of follow-up
 - B. Pinter, A. Diem-Zangerl, G.K. Wenning, W. Oberaigner, K. Seppi, W. Poewe (Innsbruck, Austria)
- 1209 Falls in ambulatory non-demented patients with Parkinson's disease
 - O. Rascol, S. Perez-Lloret, P. Damier, A. Delval, P. Derkinderen, A. Destée, W.G. Meissner, F. Tison, L. Negre-Pages (Toulouse, France)
- 1210 Movement quantification for evaluation of gait in Parkinson's disease using a RGB-D camera system M.J. Rosas, J.P. Cunha, A. Rocha, H. Choupina, J.M. Fernandes, R. Vaz (Porto, Portugal)
- 1211 Non-motor symptoms profiles of different ethnic groups with Parkinson's disease: A study comparing the UK, Thailand, Nigeria and Kuwait
 - A. Sauerbier, O. Jitkritsadakul, R. Bhidayasiri, J.Y. Al-Hashel, W.A. Kamel, A. Kilany, T. Farombi, P. Martinez-Martin, R. Brown, M. Parry, A. Martin, R. Inniss, L. Perkins, D. Trivedi, L. Klingelhöfer, A. Rizos, P. Zis, K. Ray Chaudhuri (London, United Kingdom)
- 1212 Unawareness of hyposmia in elderly people with and without Parkinson's disease
 H.A. Shill, J.G. Hentz, J.N. Caviness, E. Driver-Dunckley, S. Jacobson, C. Belden,

M.N. Sabbagh, T.G. Beach, C.H. Adler (Sun City, AZ, USA)

- 1213 Variability of motor symptoms assessments in Parkinson's disease and levodopa's effect
- L. Sid-Otmane, M. Panisset (Montreal, QC, Canada)

 1214 The clinical spectrum of PARKIN disease (PARK2) and heterozygous gene mutation carriers
 - R. Stark, J. Walch, B. Tettenborn, G. Kägi (St. Gallen, Switzerland)
- 1215 Clinical characteristics of Parkinson's disease with and without family history of essential tremorB. Tserensodnom (Ulaanbaatar, Mongolia)
- 1216 Stiff-limb syndrome affecting the arm; case report E. Urrea-Mendoza, E. Dornoff, F.J. Revilla (Cincinati, OH, USA)
- 1217 Identification of freezing of gait in Parkinson's disease using waist mounted accelerometry
 H. Zach, A.M. Janssen, A.H. Snijders, A. Delval, M.U. Ferraye, E. Auff,
 - V. Weerdesteyn, B.R. Bloem, J. Nonnekes (Vienna, Austria)
- 1218 Improving mobility assessment of Parkinson's patients using the WIMuGPS system

 1. 5. 7hu & Paissy C. Lavinge Polletier M. log R. Edwards C. Duval M. Speechley
 - L.F. Zhu, P. Boissy, C. Lavigne-Pelletier, M. Jog, R. Edwards, C. Duval, M. Speechley (London, ON, Canada)
- 1219 Comparing wearable activity sensors and self-report measures of mobility L.F. Zhu, P. Boissy, C. Lavigne-Pelletier, M. Jog, R. Edwards, C. Duval, M. Speechley (London, ON, Canada)
- Do distribution and co-existent myoclonus and dystonia aid in the identification of SGCE mutations?
 R. Zutt, J.M. Dijk, K. Peall, H. Speelman, Y.E.M. Dreissen, M.F. Contarino, M.A.J. Tijssen (Groningen, Netherlands)

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- 1221 Replacement therapy with rotigotine in tetrahydrobiopterin deficiency: A case report
 R. Alberto, P. Francesco, A. Serena, D.M. Francesca, A. Carlo Alberto, B. Andrea,
 M. Aristide, Z. Maurizio, S. Marco, L. Leonardo, R. Mario Giorgio (Torino, Italy)
- Dystonic symptoms in child with GNAO1 mutation respond to bilateral GPi deep brain stimulation
 R.D. Bhardwaj, J. Badhiwala, N. Remec, F. Shelley, S. Johan (Phoenix, AZ, USA)
- Drug response to zinc and D-penicillamine in ATP7B mutant hepatic cell linesG. Chandhok, J. Horvath, A. Aggarwal, M. Bhatt, A. Zibert, H.H.J. Schmidt (Münster, Germany)
- 1224 Rapidly progressive Parkinsonism in a patient with incontinentia pigmenti J.Y. Chen, V.S. Oza, R. Gopi, C.W. Christine (San Francisco, CA, USA)
- 1225 Compound heterozygosity (c.352_353delAG and c.3517A>G) for Niemann-Pick type C1 disease presenting as sporadic adult-onset cerebellar ataxia, dystonia and supranuclear ocular paresis
 M. Coelho, A.D. Magalhães, L. Correia-Guedes (Lisbon, Portugal)
- 1226 Neurologic manifestations of Lesch Nyhan syndrome improved with bilateral deep brain stimulation, a case report R.A. Falconer, S.L. Rogers, Y. Yaghi-Torres, K. Grajny, C. Kalhorn, F. Amjad (Washington, DC, USA)
- 1227 Dystonia and seizures as first manifestations of primary hypoparathyroidism in children: Report of two cases J. Gonzalez Mujica, C. Cosentino Esquerre (Lima, Peru)
- 1228 A novel PANK2 gene mutation in a patient with pantothenate kinase-associated neurodegeneration J.M. Hatcher-Martin, A.R. Rosen, S.A. Factor (Atlanta, GA, USA)
- 1229 Familial Creutzfeldt-Jakob disease: A novel phenotype associated with E200K-129M mutation
 D. Kaul, M. Feldman (Lebanon, NH, USA)
- 1230 Niemann-Pick type C presenting with psychosis S.Y. Lee, H.J. Lee, S.M. Cheon, J.W. Kim (Busan, Korea)
- 1231 A Japanese family of hereditary geniospasm R. Miyamoto, T. Kawarai, R. Oki, Y. Miyazaki, Y. Izumi, R. Kaji (Tokushima, Japan)
- 1232 Triheptanoin dramatically reduces the frequency of paroxysmal movement disorders in GLUT1 deficiency F. Mochel, E. Hainque, D. Gras, I. Adanyeguh, S. Caillet, D. Rinaldi, B. Heron, E. Kaphan, J.Y. Hogrel, L. Servais, E. Roze (Paris, France)
- 1233 Niemann Pick C disease in a 20 year old female V.K. Palmadottir, D. Pratt, K.L. Poston (Stanford, CA, USA)
- 1234 Dystonia-spasticity in a patient with a novel SLC25A12 mutation
 M. Parnes, L. Robak, J.M. Shulman, A. Stocco, J. Jankovic (Houston, TX, USA)
- How a flexible differential yielded an elusive diagnosis: A case report
 K. Ross, J. Axman, A. Harrington, S. Khurana (Miami, FL, USA)



- 1236 Spectrum of movement disorders in mitochondrial cytopathy patients
 - S.R. Schreglmann, G. Kaegi, F. Riederer, C.R. Baumann, D. Waldvogel, H.H. Jung (St. Gallen, Switzerland)
- 1237 Adult onset phenylketonuria with rapidly progressive dementia and Parkinsonism
 Z. Tufekcioglu, A. Cakar, B. Bilgic, H.A. Hanagasi, H.I. Gurvit, M. Emre (Istanbul, Turkev)
- 1238 Progressive myoclonic epilepsy in a case of adult-onset Leigh syndrome due to T14487C mutation M. Velez, C. Cosentino, M. Flores, J. Montoya, D. Segura, L. Torres (Lima, Peru)
- 1239 Investigation of factors affecting respiratory suppression in a patient with Perry syndrome under mechanical ventilation K. Yi, R. Kurisaki, K. Nakahara, H. Koide, T. Yamashita, K. Uekawa, Y. Tsuboi (Uki, Japan)

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- 1240 The prevalence of RLS and severity of symptoms in patients with Idiopatic Parkinson's disease in the Republic of Macedonia
 - A. Doneva, S. Mancevska, V. Donev (Skopje, Macedonia)
- 1241 Acute restless legs syndrome and kleptomania after liposuction surgery
 G. Fabiani, H.A.G. Teive (Curitiba, Brazil)
- Decision making in Parkinson's disease with and without REM sleep behavior disorder
 M.L. Fantini, P. Beudin, M. Figorilli, A.R. Marques, T. Vidal, B. Debilly, P. Derost, U. Miquel, M. Puligheddu, F. Durif (Clermont-Ferrand, France)
- 1243 Unilateral restless legs symptoms in neurosyphilis E.B. George, P. Bansal (Detroit, MI, USA)
- Reflection impulsivity in patients with restless legs syndrome
 B. Heim, L. Zamarian, A. Heidbreder, A. Stefani, M.T. Pertl, E. Brandauer, K. Seppi,
 M. Delazer, W. Poewe, A. Djamshidian, B. Högl (Innsbruck, Austria)
- Deep brain stimulation (DBS) of the subthalamic nucleus (STN) improves restless leg syndrome (RLS) in patients with Parkinson's disease (PD)
 S. Klepitskaya, Y. Liu, S.H. Sillau, J. Tsai, A.S. Walters (Aurora, CO, USA)
- 1246 Optic nerve head, retinal nerve fiber layer and macular thickness measurements in patients with restless legs syndrome
 - A. Koskderelioglu, T. Kusbeci, O. Kusbeci, M. Gedizlioglu (Izmir, Turkey)
- 1247 Frequent causes of misdiagnosis of restless legs syndrome in clinical practice
 - D.Y. Kwon, H.K. Yoon, M.H. Song (Ansan-city, Korea)
- 1248 Restless legs syndrome leads to reduced quality of life in patients with multiple sclerosis
 M. Minár, D. Petrleničová, P. Valkovič (Bratislava, Slovakia)

- 1249 Association between dementia and probable REM sleep behavior disorder (RBD) using the Japanese version of the RBD screening questionnaire in patients with Parkinson's disease
 - T. Nomura, Y. Tajiri, K. Wada, Y. Inoue, K. Nakashima (Yonago, Japan)
- 1250 Restless legs syndrome in end-stage renal disease patients in Aracaju - Sergipe: Preliminary results R.C.P. Prado, L.C. Ferreira, L.C.P. Prado (Aracaju, Brazil)
- 1251 Comparative analysis of restless legs syndrome in end-stage renal disease patients undergoing peritoneal dialysis and hemodialysis in Aracaju Sergipe: Preliminary results R.C.P. Prado, L.C. Ferreira, L.C.P. Prado (Aracaju, Brazil)
- 1252 Familial impulse control disorders associated with dopaminergic agonist therapy for RLS M. Schonberger, C. Sidiropoulos, P. LeWitt (West Bloomfield, MI, USA)
- 1253 Effects of comorbidities on the risk of restless leg syndrome A. Tiltak, F. Genç, F. Kurtulus, N. Uzun, Y.B. Gömceli, A. Yaman (Antalya, Turkey)
- 1254 Periodic leg movements of sleep under general anesthesia N. Vanegas, M. Hallett, K.A. Zaghloul, C. Lungu (Bethesda, MD, USA)
- 1255 Post-stroke restless leg syndrome and periodic limb movement disorder
 H.G. Woo, D. Lee, T.B. Ahn (Seoul, Korea)

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- 1256 Goal-directed and habitual behaviour systems in Gilles de la Tourette syndrome
 C. Delorme, A. Salvador, S. Palminteri, S. de Wit, E. Roze, A. Hartmann, Y. Worbe (Paris. France)
- Differential responsiveness of attention, OCD, and tics to medications for Tourette syndrome
 D.D. Duane, S. Leblang, M.A. Tokuyama (Scottsdale, AZ, USA)
- 1258 Involuntary movements in adult patients with attention hyperactivity deficit disorder (AHDH) M. Farah, N.T. Mendes, M.M. Moscovich, A. Moro, R.P. Munhoz, H.A.G. Teive (Curitiba, Brazil)
- 1259 Premonitory urge to tic in Tourette's is associated with interoceptive awareness
 C. Ganos, A. Garrido, I. Navalpotro, L. Ricciardi, D. Martino, M.J. Edwards, M. Tsakiris, P. Haggard, K.P. Bhatia (London, United Kingdom)
- 1260 The somatotopy of tic inhibition: Where and how much? C. Ganos, J. Bongert, L. Asmuss, D. Martino, P. Haggard, A. Münchau (London, United Kingdom)
- 1261 Sensory phenomena in tic disorders: Dimensions and clinical associationsD.G. Lichter, S.G. Finnegan (Buffalo, NY, USA)
- 1262 Hand stereotypies in Wilson's disease S.O. Mittal, A. Ranpura, A. Salardini, B. Jabbari (Cleveland, OH, USA)
- 1263 The clinical and morphometric featuresof tic hyperkinesis S.E. Munasipova, Z.A. Zalyalova, S. Munasipova (Kazan, Russia)



- 1264 Tic attacks: Panic disorder in Tourette syndrome? S. Robinson, P. Hindley, T. Hedderly (London, United Kingdom)
- 1265 Neural correlates of Tourette syndrome within the centromedian thalamus, premotor and primary motor cortices
 - J. Shute, P.J. Rossi, C. de Hemptinne, K. Foote, M. Okun, A. Gunduz (Gainesville, FL, USA)

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- 1266 Enhancement of lysosomal biogenesis reverse A53T mutant α -synuclein induced toxicity
 - M. Bourdenx, S. Dovero, M. Bastide, G. Porras, N. Dutheil, Q. Li, A. Ballabio, E. Bezard, B. Dehay (Bordeaux, France)
- 1267 From the bedside to the bench: Stem cells from non-familial young-onset patients with Parkinson's disease
 S. Sances, W. Lv, M. Tagliatti, C. Svendsen (Los Angeles, CA, USA)
- 1268 Optogenetic modulation of striatal dopaminergic cell transplants in Parkinsonian rats
 - T. Subramanian, K. Venkiteswaran, T.P. Gilmour, B. Zhang, C.A. Lieu, M. Dawson, Z. Liu, M.P. Subramanian, E. Handly, C. Ramakrishnan, K. Deisseroth (Hershey, PA, USA)

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- 1326 Relationships among reproductive health variables and cervical dystonia
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- 1348 Embouchure dystonia: Phenomenology, natural history and mimicks
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- 1353 Botulinum toxin modulates motor cortical potentiation and depotentiation in focal hand dystonia K. Udupa, N. Phielipp, R.F.H. Cash, C. Gunraj, R. Pellicciari, T. Hoque, R. Chen (Toronto, ON, Canada)
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- 1389 Functional limitations of the upper limb in prodromal and early manifest Huntington's disease
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- 1390 Gait speed modulation in prodromal and early manifest Huntington's disease: Role of internal and external cues A.K. Rao, F. Porciuncula, J. Uddin, K.S. Marder (New York, NY, USA)
- 1391 Design of the LEGATO-HD study: A multinational, randomized, double-blind, placebo-controlled, parallel-group study to evaluate the efficacy and safety of laquinimod (0.5, 1.0 and 1.5 mg/day) as treatment in patients with Huntington's disease

 R. Reilmann, S. Tabrizi, B. Leavitt, J.C. Stout, P. Piccini, K.E. Anderson, A. Feigin, M. Hayden, M. Grozinski-Wolff, E. Eyal, A. Wickenberg (Tuebingen, Germany)
- Longitudinal assessment of PDE10 in Huntington disease (HD) using [18F]MNI-659 PET imaging
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 T.J. Morley, C. Papin, J.P. Seibyl, K.L. Marek (New Haven, CT, USA)
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- 1394 A genetically-proven case of Huntington's disease in the Philippines
 M.L.D. Supnet, A.F. Diaz (Manila, Philippines)
- 1395 Abnormal electrophysiological motor responses in Huntington's disease: Evidence of premanifest compensation L.M. Turner, R. Croft, A. Churchyard, J.C.L. Looi, D. Apthorp, N. Georgiou-Karistianis (Canberra, Australia)
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 C. Fitzer-Attas, A. Varrone, P. Fazio, M. Schain, L. Mrzljak, J. Bronzova,
 B. Landwehrmeyer, N. Al-Tawil, S. Martinsson, C. Halldin, C. Sampaio, EHDN Recruting sites (Stockholm, Sweden)
- Callosal thickness progressively changes in Huntington disease: 30 month IMAGE-HD data
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- 1401 Parkinson's and parenting: The impact on children, teens and young adultsE.S. Book (Vancouver, BC, Canada)
- 1402 Quality of life, motor symptoms and subthalamic deep brain stimulation in Parkinson's disease. How do they interact with each other?

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 S. De Jesus, L. Shahgholi, S.S. Wu, Q. Pei, A. Hassan, P. Schmidt, M. Okun (Gainesville, FL, USA)
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 C. Duval, L. Zhu, P. Boissy, C. Lavigne-Pelletier, M. Jog, R. Edwards, M. Speechley (Montréal, QC, Canada)
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- (Cracow, Poland)

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- LBA 04 Clinical outcomes in Parkinson's disease for asleep deep brain stimulation with electrodes placed using intraoperative imaging versus awake deep brain stimulation with microelectrode recording
- LBA 05 Genome-wide expression profiling identifies potential molecular pathways involved in X-linked dystonia-parkinsonism (XDP, DYT3)
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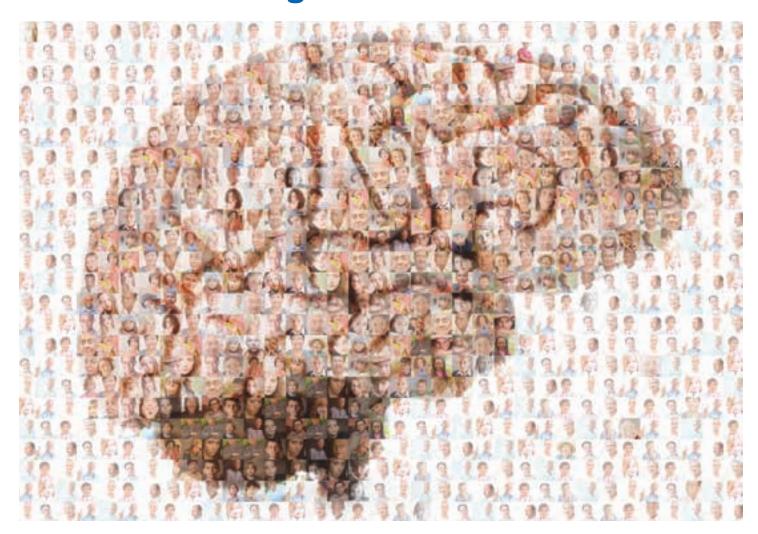


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Consult Summary of Product Characteristics before prescribing. Uses Treatment of motor fluctuations ("on-off" phenomena) in patients with Parkinson's disease which are not sufficiently controlled by oral anti-Parkinson medication Dosage and Administration Apomorphine hydrochloride is administered subcutaneously either as an intermittent bolus injection or by continuous subcutaneous infusion. Its rapid onset (5-10 mins) and duration of action (about 1 hour) may prevent an "off" episode which is refractory to other treatments. Apomorphine should be initiated in the controlled environment of a specialist clinic. The patient should be supervised by a physician experienced in the treatment of Parkinson's disease (e.g. neurologist). Please refer to the Summary of Product Characteristics for full details before initiating therapy. Treatment with domperidone (typical dosage 20mg three times a day) before and during apomorphine HCl therapy is essential. The optimal dosage of apomorphine HCl that be determined on an individual patient basis; individual bolus injections should not exceed 10mg and the total daily dose should not exceed 10mg. Do not use if the solution has turned green. The solution should be inspected visually prior to use. Only clear, colourless and particle free solution should be used. Contraindications Children and adolescents (up to 18 years of age). Known sensitivity to apomorphine or any other ingredients of the product. Respiratory depression, dementia, psychotic disease or hepatic insufficiency. Intermittent apomorphine HCl treatment is not suitable for patients who have an "on" response to levodopa which is marred by severe dyskinesia or dystonia. Pregnancy and lactation Apomorphine should not be used in pregnancy unless clearly necessary. Breast-feeding should be avoided during apomorphine HCl treatment is not suitable for patients who have an gomorphine is used with other medications that have a narrow therapeutic window. It should be noted that there is potential for interval. Apomorphine is u

disease, or who are prone to nausea or vomiting. Extra caution is recommended during initiation of therapy in elderly. and/or debilitated patients. Since apomorphine may produce hypotension, care should be exercised in patients with cardiac disease or who are taking vasoactive drugs, particularly when pre-existing postural hypotension is present. Neuropsychiatric disturbances are common in Parkinsonian patients. APO-go should be used with special caution in these patients. Apomorphine has been associated with somnolence and episodes of sudden sleep onset, particularly in patients with Parkinson's disease. Patients must be informed of this and advised to exercise caution whilst driving or operating machines during treatment with apomorphine. Haematology tests should be undertaken at regular intervals as with levodopa with given concomitantly with apomorphine. Patients should be regularly monitored for the development of impulse control disorders. Patients and carers should be made aware that behavioural symptoms of impulse control disorders including pathological gambling, increased libido, hypersexuality, compulsive spending or buying, binge eating and compulsive eating can occur in patients treated with dopamine agonists including apomorphine. Dose reduction/tapered discontinuation should be considered if such symptoms develop. Since apomorphine, especially at high dose, may have the potential for OT prolongation, caution should be exercised when treating patients at risk for torsades de pointes arrhythmia. Apomorphine has been associated with local subcutaneous effects that can be reduced by rotation of injection sites or use of ultrasound on areas of nodularity and induration. Contains sodium metabisulphite which rarely causes severe allergic reactions and broncospasm. Side Effects Local induration and nodules usually symptomatic) often develop at subcutaneous site of injection leading to areas of erythema, tenderness, induration and panniculitus. Irritation, tiching, bruising and pain may also occur. Rarely

few weeks of treatment. Dizziness and light-headedness have also been reported. Nausea and vomiting may occur, particularly when APO-go treatment is initiated, usually as a result of the omission of domperidone. Neuropyschiatric disturbances (including transient mild confusion and visual hallucinations) have occurred during apomorphine therapy and neuropsychiatric disturbances may be exacerbated by apomorphine. Positive Coombs' tests and haemolytic anaemia and thrombocytopenia have been reported in patients receiving apomorphine and levodopa. Local and generalised rashes have been reported. Eosinophilia has occurred in only a few patients during treatment with apomorphine HCI. Patients treated with dopamine agonists, including apomorphine, have been reported as exhibiting signs of pathological gambling, increased libido and hypersexuality (especially at high doses). Apomorphine is associated with somnolence. Yawning and breathing difficulties have been reported as has peripheral oedema. Prescribers should consult the Summary of Product Characteristics in relation to other side effects Presentation and Basic NHS Cost APO-go ampoules contain apomorphine hydrochloride Inomg/ml, as follows: 20mg in 2ml – basic NHS cost £37.96 per carton of 5 ampoules. 50mg in 3ml – basic NHS cost £73.11 per carton of 5 ampoules. APO-go pens (disposable multiple dosage injector system) contain apomorphine hydrochloride 5 mg/ml, as follows: 50mg in 10ml – basic NHS cost £73.11 per carton of 5 per per lilled syringes contain apomorphine hydrochloride 5 mg/ml, as follows: 50mg in 10ml – basic NHS cost £73.11 per carton of 5 per per lilled syringes. Marketing Authorisation Numbers: APO-go Ampoules: PL 06831/0245 APO-go Pens: PL 06831/0246 APO-go Pre filled syringes. PL 06831/0246 APO-go Pre filled syringes. Plarketing Authorisation Numbers: APO-go Pre fi

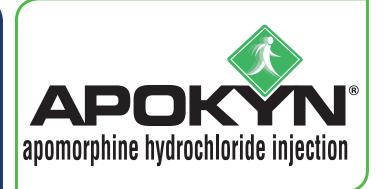
Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard.
Adverse events should also be reported to Medical Information on 0870 851 0207 or dso@britannia-pharm.com

Version Number: APG.PI.V22

Date of preparation: January 2015 Item code: APO1-0115-0551

APOKYN has new options for patient access.

In-home initiations are now available!*



Stop by

BOOTH 701



to Learn More.

*In accordance with applicable state regulations.

Indication

APOKYN is indicated for the acute, intermittent treatment of hypomobility, off episodes (end-of-dose wearing-off and unpredictable on-off episodes) associated with advanced Parkinson's disease. APOKYN has been studied as an adjunct to other medications.

Important Safety Information

Contraindication: Concomitant use of APOKYN with 5HT, antagonists is contraindicated based on reports of profound hypotension and loss of consciousness when apomorphine was administered with ondansetron.

Contraindication: APOKYN is contraindicated in patients who have demonstrated hypersensitivity to the drug or its ingredients (notably sodium metabisulfite).

SC Injection: APOKYN should be administered by subcutaneous injection, NOT intravenously, because serious adverse events like thrombus formation and pulmonary embolism may occur. Patients and care partners must receive detailed instructions in the preparation and injection of doses, with particular attention paid to the correct use of the dosing pen.

Nausea and Vomiting: At recommended doses of apomorphine, severe nausea and vomiting can be expected. Therefore, trimethobenzamide hydrochloride should be started 3 days prior to the initial dose of APOKYN and continued for at least 2 months. In clinical trials, 50% of patients (262/522) discontinued trimethobenzamide hydrochloride after 2 months

Falling Asleep During Activities of Daily Living (ADL): There have been reports of patients treated with apomorphine subcutaneous injections who suddenly fell asleep while engaged in ADL. Patients should be advised not to drive or participate in potentially dangerous activities until it is known how APOKYN affects them. Patients should be continually reassessed for daytime drowsiness or sleepiness.

Symptomatic Hypotension: Dopamine agonists, including APOKYN, can cause hypotension, orthostatic hypotension, and syncope. Alcohol, antihypertensive medications, and vasodilating medications may potentiate the hypotensive effect of apomorphine. These adverse events occurred with initial dosing and long-term treatment. Whether hypotension contributes to other significant events seen (e.g., falls)

Falls: Patients wth Parkinson's disease (PD) are at risk of falling due to the underlying postural instability and concomitant autonomic instability seen in some patients with PD, and from syncope caused by the blood pressure lowering effects of the drugs used to treat PD.

Hallucinations / Psychotic-Like Behavior: APOKYN has been associated with new or worsening mental status and behavioral changes, which may be severe, including psychotic-like behavior. This abnormal thinking and behavior can consist of paranoid ideation, delusions, hallucinations, confusion, disorientation, aggressive behavior, agitation and delirium.

Dyskinesias: APOKYN may cause dyskinesia or exacerbate pre-existing

Intense Urges: Some people with PD have reported new or increased gambling urges, increased sexual urges, and other intense urges, while taking PD medicines, including APOKYN. Because patients may not recognize these behaviors as abnormal, it is important for prescribers to specifically ask patients or their care partners about the development of new or increased gambling urges, sexual urges, uncontrolled spending or other urges while being treated with APOKYN. Physicians should consider dose reduction or stopping the medication if a patient develops such urges while taking APOKYN.

Cardiac Events: Coronary Events—APOKYN reduces resting systolic and diastolic blood pressure and has the potential to exacerbate coronary (and cerebral) ischemia. Therefore, exercise caution when prescribing APOKYN for patients with known cardiovascular and cerebrovascular disease.

QT Prolongation—Caution is recommended when administering APOKYN to patients with increased risk of QT prolongation, such as those with hypokalemia, hypomagnesemia, bradycardia, or a genetic predisposition, or who use other drugs that prolong the QT/QTc interval.

Melanoma: Patients with Parkinson's disease have a higher risk of developing melanoma than the general population. Patients should be monitored for melanomas frequently when using APOKYN.

Adverse Events: The most common adverse events seen in controlled trials were yawning, drowsiness/somnolence, dyskinesias, dizziness/ postural hypotension, rhinorrhea, nausea and/or vomiting, hallucinations/ confusion and edema/swelling of extremities. Injection-site reactions, including bruising, granuloma, and pruritus, have been reported.

To report SUSPECTED ADVERSE REACTIONS or product complaints, contact US WorldMeds at 1-877-727-6596 (1-877-7APOKYN). You may also report SUSPECTED ADVERSE REACTIONS to the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see booth representative for full Prescribing Information and Pen Instructions for Use/Patient Information.

All trademarks are the property of their respective owners.



US WorldMeds, LLC is the exclusive licensee and distributor of APOKYN in the United States and Its territories.

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WHAT ARE YOUR PATIENTS WITH PD PSYCHOSIS HOLDING BACK?

Join ACADIA Pharmaceuticals Inc. for a virtual reality experience that will transform how you see PD psychosis.

See what they see

For more information, visit PDpsychosis.com.

Parkinson's disease (PD).





Corporate Therapeutic Symposia

The following company-based information sessions will provide delegates with non-CME educational opportunities to learn the latest in therapeutics.

SUNDAY, JUNE 14, 2015

Lundbeck US

13:15-14:15

Location: Harbor B-C, 2nd Level, Harbor Tower

Advances in the treatment of symptomatic Neurogenic Orthostatic Hypotension (nOH)

Chair: Rajesh Pahwa

Kansas City, KS, USA

Orthostatic hypotension in the movement disorder

patient

Horacio Kaufmann New York, NY, USA

Evaluating cardiovascular health in the patient with nOH

-TBD

Droxidopa for the treatment of symptomatic neurogenic orthostatic hypotension

Stuart Isaacson

Miami, FL, USA

Case study discussion

Daniel Claassen Nashville, TN, USA

MONDAY, JUNE 15, 2015

Britannia Pharmaceuticals, Ltd. and US WorldMeds

14:00-15:00

Location: Harbor D-F, 2nd Level, Harbor Tower

Subcutaneous apomorphine for Parkinson's disease motor fluctuations: Emerging treatment strategies

Introduction to the fluctuating response of levodopa &

the role of Apomorphine

Peter LeWitt Detroit, MI, USA

Apokyn® (apomorphine hydrochloride injection): Rapid

& Reliable Turning "ON"

Stuart Isaacson Miami, FL, USA

APO-go® infusion in the treatment of motor fluctuations:

Continuous Reliable "ON"

K. Ray Chaudhuri London, United Kingdom

MONDAY, JUNE 15, 2015

Teva Pharmaceutical

14:00-15:00

Location: Seaport G-H, 2nd Level, Seaport Tower

Designing Huntington's disease trials to address

unmet patient needs

Chair: Karl Kieburtz

Rochester, NY, USA

Unmet needs in Huntington's disease

Karl Kieburtz Rochester, NY, USA

Novel markers in Huntington's disease

Bernhard Landwehrmeyer

Ulm, Germany

Clinical scales used in interventional HD Trials

Tiago Mestre Ottawa, ON, Canada

TUESDAY, JUNE 16, 2015

Zambon

13:45-15:00

Location: Harbor D-F, 2nd Level, Harbor Tower

Parkinson's disease 2015: Advances in

understanding disease pathways and progression

Chairs: C. Warren Olanow

New York, NY, USA Paolo Barone Napoli, Italy

Unmet needs in Parkinson's disease: from

pathophysiology to treatments

José Obeso Madrid, Spain

Dopamine and glutamate alterations in Parkinson's

disease: new insights

Stella Papa Atlanta, GA, USA

Moving forward in Parkinson's disease: Advances in therapy for motor and non-motor complications

K. Ray Chaudhuri London, United Kingdom



Corporate Therapeutic Symposia

TUESDAY, JUNE 16, 2015

lpsen

14:00-15:00

Location: Seaport G-H, 2nd Level, Seaport Tower

Management of patients with cervical dystonia:

A step forward

Chair: Joseph Jankovic

Houston, TX, USA

Listening to patients perspectives

Janet Hieshetter Chicago, IL, USA

How could abobotulinum toxin A increase patient's and

physician' satisfaction?

Mark Lew

Los Angeles, CA, USA

Reshaping the toxins world for patients

Keith Foster

Salisbury, United Kingdom

UCB

19:45-20:45

Location: Harbor D-F, 2nd Level, Harbor Tower

The path of Parkinson's disease patients in an

evolving era William Ondo

Chair:

Houston, TX, USA

Is there a need for pharmacotherapy in newly diagnosed

parkinson's patients?

Larry Elmer

Toledo, OH, USA

Managing parkinson's disease patients in an electronic

era with mobile devices

Kevin Biglan Rochester, NY, USA WEDNESDAY, JUNE 17, 2015

ACADIA Pharmaceuticals

13:30-14:30

Location: Seaport G-H, 2nd Level, Seaport Tower

Beyond motor symptoms of Parkinson's disease

Neuropsychiatric complications of Parkinson's disease:

focus on parkinson's disease psychosis

David John Burn

Newcastle upon Tyne, United Kingdom

Sleep disturbance in Parkinson's disease

Alon Y. Avidan Los Angeles, CA, USA

Caregiver burden: Challenges in Parkinson's disease

psychosis Jennifer Goldman *Chicago, IL, USA*

Medtronic

13:30-14:30

Location: Harbor D-F, 2nd Level, Harbor Tower

Long-term outcomes & therapeutic optimization

of DBS for Parkinson's disease

William J. Marks, Jr. San Francisco, CA, USA Jens Volkmann Würzburq, Germany

THURSDAY, JUNE 18, 2015

Cynapsus Therapeutics

13:30-14:30

Location Harbor D-F, 2nd Level, Harbor Tower

Waiting to turn ON: The impact and importance of OFF episodes in Parkinson's disease patients

and the need for turning ON therapies

Chair: C. Warren Olanow

New York, NY, USA Stuart Isaacson Miami, FL, USA Robert Hauser Tampa, FL, USA Russell Katz

USA
Med Learning Group

13:30-14:30

Location Seaport G-H, 2nd Level, Seaport Tower

Evolving role of personalized strategies and patient-centered approaches in the management of Parkinson's disease from clinical data to

individualized care

Michele Tagliati Los Angeles, CA, USA Mayela Rodriguez-Violante Mexico City, Mexico



Science and Technology Pavillion

Science and Technology Pavilion

Location: Regatta, 4th Level, Harbor Tower

Through the Science and Technology Pavilion, MDS' industry partners provide delegates the opportunity to learn about the latest science in an interactive session. CME credit is not given for any activities in the Science and Technology Pavilion. All Congress participants are encouraged to visit the Pavilion.

Lundbeck US Monday, June 15 10:00-17:00

The Lundbeck Medical Affairs Science and Technology Pavilion will showcase an overview of Symptomatic Neurogenic Orthostatic Hypotension (NOH) via interactive kiosk/media, and will be presented by key clinical experts/study investigators and Lundbeck Medical Affairs representatives.

AbbVie Wednesday, June 17 10:00-17:00

The Abbvie-sponsored Science and Technology Pavilion will provide an educational platform to learn more about Advanced Parkinson's disease, Multidisciplinary Care and carbidopa and levodopa enteral suspension. In addition to information displays throughout the day, delegates have an opportunity to attend medical presentations by clinical experts involved in multidisciplinary care and Advanced Parkinson's disease at 12:30 and 16:00.



For Patients with Parkinson's Disease

藤本製薬グループ **エフ ピー**

FP Pharmaceutical Corp. is

pleased to be a supporter of the 19th International Congress of Parkinson's Disease and Movement Disorders.

SAN DIEGO, CA, USA June 14 - 18, 2015

We dedicate ourselves to distribution of Selegiline in Japan.

Fujimoto Pharmaceutical Group
FP Pharmaceutical Corp.

1-3-40 Nishiotsuka, Matsubara, Osaka, 580-0011 JAPAN

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PEOPLE. PASSION. POSSIBILITIES.



PLEASE JOIN US!

ADVANCES IN POTENTIAL NEW THERAPIES FOR HYPERKINETIC MOVEMENT DISORDERS

Sponsored by Auspex Pharmaceuticals

Heavy hors d'oeuvres and cocktails will be served at 7:30pm

EVENT DATE AND TIME:

Tuesday, June 16, 2015, from 8pm to 9pm Location: Seaport GH, Manchester Grand Hyatt

PRESENTERS

JOSEPH JANKOVIC, MD Professor of Neurology Distinguished Chair in Movement Disorders Director, Parkinson's Disease Center

Director, Parkinson's Disease Center and Movement Disorders Clinic Department of Neurology Baylor College of Medicine

HUBERT H. FERNANDEZ, MD

Professor of Medicine (Neurology)
Cleveland Clinic Lerner College of Medicine
Case Western Reserve University
Co-Chair, Parkinson's Study Group

DAVID STAMLER, MD
Chief Medical Officer, Auspex Pharmaceuticals



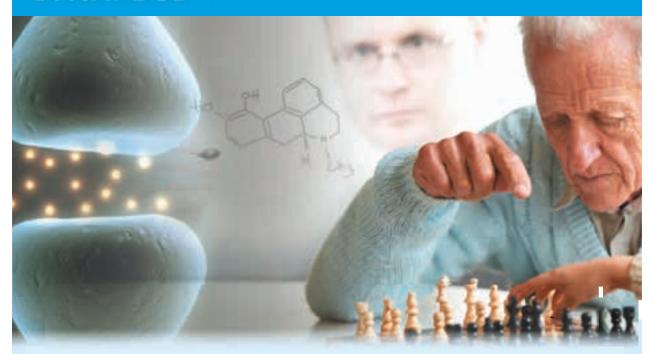
At Adamas, we share the International Parkinson and Movement Disorder Society's commitment to advancing the treatment of central nervous system disorders.





Adamas Pharmaceuticals, Inc. is a specialty pharmaceutical company driven to improve the lives of those affected by chronic disorders of the central nervous system.

www.adamaspharma.com



Cynapsus is proud to be a supporter of the 19th International Congress of Parkinson's Disease and Movement Disorders.

Cynapsus is a specialty pharmaceutical company developing a convenient and easy to use sublingual (oral mucosal) thin film strip which provides a rapid, reliable and sustained "ON" in Parkinson's disease patients suffering all types of "OFF" episodes.

Cynapsus' drug candidate, APL-130277, is an easy-to-administer, fast-acting reformulation of apomorphine, which is the only approved drug (in the United States, Europe, Japan and other countries) for the acute, intermittent treatment of "OFF" episodes in Parkinson's disease patients.

Cynapsus is focused on completing the clinical, regulatory development and commercialization of APL-130277 such that it might provide patients, their care givers and neurologists a convenient and safe means of achieving a fast "ON".



Exhibitor Information

EXHIBIT HALL

Location: Grand Hall, Lobby Level

Please allow adequate time in your daily schedule to visit the Exhibit Hall. The exhibition is an integral component of your International Congress experience, offering you the opportunity to speak with representatives of companies providing services or marketing products directly related to Movement Disorders.

Exhibit Hall hours are as follows:

Monday, June 15	9:00 - 18:00
Tuesday, June 16	9:00 - 18:00
Wednesday, June 17	9:00 - 18:00
Thursday, June 18	9:00 - 16:00

EXHIBITOR REGISTRATION

Location: Palm Foyer, 2nd Level

Exhibitors must register and pick up their badge at the Exhibitor Registration Desk.

Exhibitor Registration Desk hours are as follows:

Saturday, June 13:	16:00 - 20:00
Sunday, June 14:	7:00 - 20:00
Monday, June 15:	7:00 - 18:00
Tuesday, June 16:	7:00 - 18:00
Wednesday, June 17:	7:00 - 18:00
Thursday, June 18:	7:00 – 16:00

EXHIBITOR BADGE POLICY

Admission to the Exhibit Hall will be by name badge only. Security guards will monitor Exhibit Hall entrances for proper identification. Exhibit stand personnel must show an official MDS exhibitor name badge in order to gain access to the Exhibit Hall during installation, show, or dismantlement hours.

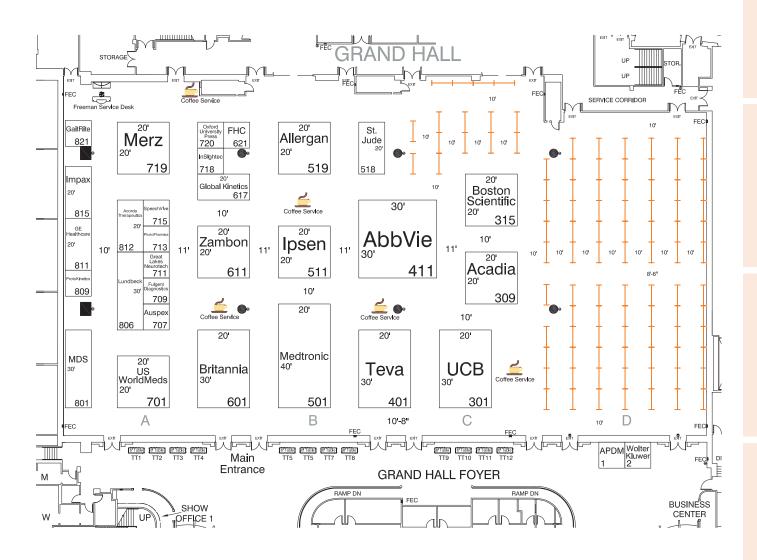
Exhibitor Personnel Badge (Yellow): Allows admittance to the Exhibit Hall only.

ENDORSEMENT DISCLAIMER

Products and services displayed in the Exhibit Hall or advertised in the program occur by contractual business arrangements between MDS and participating companies and organizations. These arrangements do not constitute nor imply an endorsement by MDS of these products and services.

Exhibitor Information

EXHIBIT AND POSTER HALL FLOOR PLAN



Exhibitor Information



ABBVIE

1 North Waukegan Road North Chicago, IL 60064 USA

Telephone: +1 800-255-5162 Website: www.abbvie.com

Booth #: 411

AbbVie is a global, research-based biopharmaceutical company which combines the focus of a leading-edge biotech with the expertise and structure of a long-established pharmaceutical leader. AbbVie is committed to using unique approaches to innovation to develop and market advanced therapies that address some of the world's most complex and serious diseases.

ACADIA PHARMACEUTICALS

11085 Torreyana Road, Suite 100 San Diego, CA 92121

USA

Telephone: +1 858-320-8655 Website: www.acadia-pharm.com

Booth #: 309

ACADIA Pharmaceuticals is a biopharmaceutical company focused on the development and commercialization of innovative medicines to address unmet medical needs in neurological and related central nervous system disorders.

ACORDA THERAPEUTICS, INC.

420 Saw Mill River Road Ardsley, NY 10502 USA

Telephone: +1 914-347-4300 Website: www.acorda.com

Booth #: 812

Acorda Therapeutics develops therapies that restore function and improve the lives of people with neurological disorders. Acorda markets three FDA-approved therapies, including AMPYRA® (dalfampridine) Extended Release Tablets, 10 mg. The Company has a pipeline of novel therapies that addresses a range of disorders, including post-stroke walking deficits, Parkinson's disease, epilepsy and MS.

ALLERGAN, INC.

2525 Dupont Drive Irvine, CA 92612

USA

Telephone: +1714-246-4500 Fax: +1714-246-4971 Website: www.allergan.com

Booth #: 519

Allergan is a multi-specialty healthcare company established more than 60 years ago with a commitment to uncovering the best of science and helping people reach their life's potential. With approximately 11,400 employees worldwide, we are committed to discovering new therapies to treat unmet medical needs in eye care, neurosciences, medical aesthetics, medical dermatology, breast aesthetics and urology. APC55PQ14

AMERICAN PARKINSON DISEASE ASSOCIATION

135 Parkinson Avenue Staten Island, NY 10305

USA

Telephone: +1718-981-8001, ext 125

Fax: +1718-981-4399

Website: www.apdaparkinson.org

Table #: 7

The American Parkinson Disease Association (APDA) was founded in 1961 to Ease the Burden – Find the Cure for Parkinson's disease. APDA provides patient services and education serving more than 1 million American's with Parkinson's disease and their families and research opportunities for new scientists in the field of PD research as well as continued funding for established senior investigators.

AUSPEX PHARMACEUTICALS

3333 North Torrey Pines Court, Suite 400

La Jolla, CA 92037

USA

Telephone: +1 858-558-2400 Fax: +1 858-558-2401

Website: www.auspexpharma.com

Booth #: 707

Auspex is a late stage biopharmaceutical company dedicated to developing innovative medicines for movement disorders. Auspex's lead product candidate SD-809 is in the final stages of development for the treatment of chorea associated with Huntington's disease. Auspex is also evaluating SD-809 for the treatment of tardive dyskinesia and tics associated with Tourette syndrome.

BENIGN ESSENTIAL BLEPHAROSPASM RESEARCH FOUNDATION, INC.

P.O. Box 12468

Beaumont, TX 77726-2468

USA

Telephone: +1 409-832-0788 Fax: +1 409-832-0890

Website: www.blepharospasm.org

Table #: 5

The purpose of BEBRF is to promote, develop and carry on the search for the cause and cure for Benign Essential Blepharospasm/Meige and other related disorders.

BOSTON SCIENTIFIC

25155 Rye Canyon Loop Valencia, CA 91355

USA

Telephone: +1 661-949-4000 Website: www.vercise.com

Booth #: 315

Boston Scientific is a worldwide developer, manufacturer and marketer of medical devices whose products are used in a broad range of interventional medical specialties. As an innovation leader in Neuromodulation and implantable Deep Brain Stimulation Technology, Boston Scientific is committed to transforming lives through innovative medical solutions that improve the health of patients.

BRITANNIA PHARMACEUTICALS LTD.

200 Longwater Avenue Green Park, Reading RG2 6GP United Kingdom

Telephone: +44 011 892 15900 Website: www.britannia-pharm.com

www.apo-go.com

Booth #: 601

Britannia Pharmaceuticals Limited is a UK based pharmaceutical company specializing in niche innovative products for chronic and serious medical conditions, and in particular, the treatment of patients with Parkinson's disease.

The need for apomorphine as a treatment option for Parkinson's disease has led to the development of APO-go and other associated brands around the globe, which are available in many countries through our Distribution or Licensing Partners.

CIR SYSTEMS/GAITRITE

376 Lafayette Road, Suite 202 PO Box 899 Sparta, NJ 07871

USA

Telephone: +1 973-862-6151 Fax: +1 973-862-6451 Website: www.gaitrite.com

Booth #: 821

GAITRite is a truly portable pressure sensitive walkway with a quick 5 minute setup measuring temporal spatial parameters, providing easy identification of gait anomalies, comes in various lengths. Our new wider SURFACE System allows instrumentation of an entire room and is Wi-Fi based. All GAITRite Systems provide reporting publishing options.

FHC, INC.

1201 Main Street Bowdoin, ME 04287

USA

Telephone: +1 207-666-8190 Fax: +1 207-666-8292 Website: www.fh-co.com

Booth #: 621

Innovating through collaboration with the neuroscience community, FHC presents its latest and signature offerings: Distance Expert®—
Neurophysiology for telemedical DBS-surgical assistance; neuroCase for onsite DBS case support; STarFix™ for patient-specific, "no capital" stereotaxy; WayPoint™ Navigator for planning and visualizing; and STar™ Drive for neurosurgical positioning (24/7 technical support available).

FULGENT DIAGNOSTICS

4978 Santa Anita Avenue, Suite 205 Temple City, CA 91780

USA

Telephone: +1 626-350-0537 Fax: +1 626-454-1667

Booth #: 709

Fulgent Diagnostics provides a wide array of genetic testing ranging from 4,600+ single gene tests, 170+ preset panels, rearrangement testing, and All-in-One reflex test. Fulgent Diagnostics provides flexibility. We tailor our tests to your unique requirements at the most competitive pricing available compared to any CLIA lab in the industry.

Exhibitor Information



GE HEALTHCARE

35c Campus Drive, 5th Floor Marlborough, MA 01752 USA

Telephone: +1 508-683-2368 Website: www.gehealthcare.com

Booth #: 811

GE Healthcare provides transformational medical technologies and services to meet the demand for increased access, enhanced quality and more affordable healthcare around the world. GE (NYSE: GE) works on things that matter - great people and technologies taking on tough challenges. From medical imaging, software & IT, patient monitoring and diagnostics to drug discovery, biopharmaceutical manufacturing technologies and performance improvement solutions, GE Healthcare helps medical professionals deliver great healthcare to their patients.

GLOBAL KINETICS CORPORATION

530 Collins Street, Level 6 Melbourne, VIC 3000

Australia

Telephone: +61 3 9605 0034

Website: www.globalkineticscorporation.com

Booth #: 617

GKC has developed the Parkinson's KinetiGraph (PKG). The PKG provides an objective, ambulatory assessment of Parkinson's patients during activities of daily living, via a simple wristwatch-like device worn continuously for 6-10 days. It reports their clinical state including scaled measures of bradykinesia & dyskinesia, fluctuation severity, a one-number fluctuation score, self-reported concordance and periods of daytime sleepiness.

GREAT LAKES NEUROTECHNOLOGIES

10055 Sweet Valley Drive Valley View, OH 44125

USA

Telephone: +1 216-361-5410 Fax: +1 216-361-5420

Website: www.GLNeuroTech.com

Booth #: 711

Kinesia technology provides continuous Parkinson's monitoring for in-clinic and home applications. Intelligent remote sensing technology increases sensitivity and reliability of outcome measures for pharmaceutical trials, DBS measurement, and patient care. Kinesia is validated in over 60 publications and is successfully used in pharmaceutical and medical device trials around the globe.

IMPAX PHARMACEUTICALS

31047 Genstar Road Hayward, CA 94544

USA

Telephone: +1 510-240-6042 Website: www.impaxpharma.com

Booth #: 815

Impax Pharmaceuticals™ is a branded product division of Impax Laboratories™, Inc. Impax Pharmaceuticals is focused on targeting significant unmet needs, with a primary focus on developing treatments for neurological disorders.

INSIGHTEC

Nachum Chet 5 Street Haifa 39120 Israel

Telephone: +972 4 8131380 Website: www.insightec.com

Booth #: 718

INSIGHTEC is the global leader in MR-guided Focused Ultrasound (MRgFUS) and developer of the ExAblate therapeutic platform. The first company to successfully focus ultrasound through the cranium, INSIGHTEC offers a noninvasive treatment option for the treatment of essential tremor, Parkinson's tremor and neuropathic pain and has CE mark for these treatments. The ExAblate Neuro is presently an Investigational Device undergoing FDA clinical evaluation in the US. INSIGHTEC is actively pursuing research and development to expand the applications for its technology with a goal of becoming a non-invasive standard of care in medicine.



IPSEN

65 Quai Georges Gorse Boulogne Billancourt 92100 France

Telephone: +33 1 58 33 5000 Website: www.ipsen.com/en/

Booth #: 511

Ipsen is a global specialty-driven pharmaceutical company with total sales exceeding €1.2 billion in 2014. Ipsen's ambition is to become a leader in specialty healthcare solutions for targeted debilitating diseases. Its development strategy is supported by 3 franchises: neurology, endocrinology and uro-oncology. Moreover, the Group has an active policy of partnerships. Ipsen's R&D is focused on its innovative and differentiated technological platforms, peptides and toxins. In 2014, R&D expenditure totaled close to €187 million, representing about 15% of Group sales. Ipsen also has a significant presence in primary care. The Group has more than 4,500 employees worldwide.

INTERNATIONAL ESSENTIAL TREMOR FOUNDATION

P.O. Box 14005 Lenexa, KS 66285-4005

USA

Telephone: +1 913-341-3880

Table #: 3

The International Essential Tremor Foundation (IETF) funds essential tremor research to find a treatment and cure for people with ET, increases awareness, and provides educational materials and tools for healthcare providers, the public, and those affected by ET.

LUNDBECK

Four Parkway North Deerfield, IL 60015 USA

Telephone: +1 847-282-1000 Website: www.lundbeckus.com

Booth #: 806

Lundbeck, a global pharmaceutical company based in Copenhagen, Denmark, was founded in 1915. As one of the world's leading companies specializing in brain disorders, Lundbeck's key focus is to address disorders such as depression, anxiety, schizophrenia, epilepsy, and Huntington's, Alzheimer's and Parkinson's disease.

MEDTRONIC

710 Medtronic Parkway Minneapolis, MN 55432-5604 USA

Telephone: +1 763-514-4000

Website: www.professional.medtronic.com

Booth #: 501

At Medtronic, we're committed to innovating for life by pushing the boundaries of medical technology and changing the way the world treats chronic disease. It's the reason we've developed an unprecedented breadth and depth of innovative therapies over the past 60 years. This includes Medtronic Deep Brain Stimulation (DBS), with over 125,000 people worldwide having received our therapy.

MERZ NEUROSCIENCES A DIVISION OF MERZ N. AMERICA

6501 Six Forks Road Raleigh, NC 27615

USA

Telephone: +1 919-582-8000 Fax: +1 919-615-4851 Website: www.merzusa.com

Booth #: 719

Merz North America is a specialty healthcare company that develops and commercializes innovative treatment solutions in aesthetics, dermatology and neurology in the U.S. and Canada. Our ambition is to become a recognized leader in the treatment of movement disorders, and in aesthetics and dermatology.

MULTIPLE SYSTEM ATROPHY COALITION

9935-D Rea Road, #212 Charlotte, NC 28277

USA

Telephone: +1 866-737-4999

Website: www.multiplesystematrophy.org

Table #: 2

The MSA Coalition is dedicated to supporting patients and educating healthcare professionals about Multiple System Atrophy. Educational pamphlets and DVDs available.



NATIONAL SPASMODIC TORTICOLLIS ASSOCIATION

9920 Talbert Avenue Fountain Valley, CA 92708

USA

Telephone: +1714-378-9837 Website: www.torticollis.org

Table #: 8

The NSTA is dedicated to supporting Spasmodic Torticollis patients by providing information, answering questions, and providing hope and moral support. NSTA educates the public and the medical community about Spasmodic Torticollis, advocate for patients' rights, and support research aimed at understanding, treating, and ultimately curing this painful and debilitating neurological disorder.

OXFORD UNIVERSITY PRESS

198 Madison Avenue New York, NY 10016

USA

Telephone: +1 800-445-9714 Website: www.oup.com/us

Booth #: 720

OUP proudly announces the launch of OxfordMedicalOnline as well as "Cognitive Impairment and Dementia in Parkinson's Disease," the "Handbook of Neurological Therapy," the "Video Protocols in Movement Disorders," Klein's "Movement Disorders," the Oxford Textbook of Movement Disorders," and "Hyperkinetic Movement Disorders" and other classics.

PARKINSON'S WELLNESS RECOVERY

140 West Fort Lowell Road Tucson, AZ 85705

USA

Telephone: +1 520-591-5346 Fax: +1 888-780-0154 Website: www.pwr4life.org

Table #: 1

PWR! is a 501(c)(3) nonprofit founded by Becky Farley PT, MS, PhD to develop and implement worldwide access to Parkinson disease-specific neuroplasticity-principled programming. PWR! subsidizes cutting edge Exercise4BrainChange* programs for people with PD in a Model Community Center (PWR!Gym) in Tucson, AZ; and trains therapists and fitness professionals worldwide.

PHOTOPHARMICS, INC.

6222 West 10480 North Highland, UT 84003

USA

Telephone: +1 801-494-7804 Fax: +1 801-609-7055

Website: www.photopharmics.com

Booth #: 713

PhotoPharmics, Inc. is conducting a DBPC clinical trial to establish the safety and efficacy of a non-invasive, specialized, ocular light therapy lamp for Parkinson's disease.

PROTOKINETICS

60 Garlor Drive Havertown, PA 19083

USA

Telephone: +1 610-449-4879 Fax: +1 610-853-2925

Website: www.protokinetics.com

Booth #: 809

The ProtoKinetics Zeno Walkway and PKMAS program quickly and easily produces pressure, temporal and spatial parameters over a variety of testing protocols. The equipment offers easy output of objective measures during the evaluation and clinical research of individuals with central nervous system disorders, peripheral neuropathy, stroke, etc.

SPEECHVIVE

603 Wexford Drive Lafayette, IN 47905

USA

Telephone: +1 612-723-7200 Website: www.speechvive.com

Booth #: 715

SpeechVive is a behind the ear device which helps people with Parkinson's disease speak more loudly and communicate more effectively. Clinical data over four years demonstrated SpeechVive to be effective in 90% of the people using the device.

ST. JUDE MEDICAL

6300 Bee Cave Road Building 2 Suite 100 Austin, TX 78746 USA

Telephone: +1 512-286-4050 Website: www.sjm.com

Booth #: 518

St. Jude Medical is dedicated to transforming the treatment of some of the world's most expensive epidemic diseases by creating cost-effective medical technologies that save and improve lives of patients around the world. For more information, please visit sim.com.

TEVA CNS

11100 Nall Avenue Overland Park, KS 66211 USA

Telephone: +1 800-221-4026 Website: www.tevausa.com

Booth #: 401

Teva CNS invites you to visit booth #401 in the MDS exhibit hall to discuss our dedication to supporting and improving the lives of individuals with neurological disorders.

THE MICHAEL J. FOX FOUNDATION FOR PARKINSON'S RESEARCH

Grand Central Station P.O. Box 4777 New York, NY 10163

USA

Telephone: +1 212-509-0995 Fax: +1 212-509-1107 Website: www.micaheljfox.org

Table #: 10

MJFF aims to accelerate Parkinson's research toward improved therapies and a cure through an aggressively funded, highly targeted research program coupled with global collaboration of Parkinson's community stakeholders. Connect with staff movement disorder specialists to discuss the latest research, funding opportunities and our new physician offerings.

THE PARKINSON'S ASSOCIATION

8555 Aero Drive, Suite 308 San Diego, CA 92123-1745

USA

Telephone: +1 858-273-6763

Website: www.ParkinsonsAssociation.org

Table #: 9

The Parkinson's Association is a 501(c)3 non-profit that helps improve the quality of life for those living with Parkinson's disease. We partner with the medical community and offer vital programs and services that ease the burden of Parkinson's by supporting patients, their families and friends who see life change as the Parkinson's disease progresses.

TREMOR ACTION NETWORK

P.O. Box 5013

Pleasanton, CA 94566-0513

USA

Telephone: +1 510-681-6565 Fax: +1 925-369-0485

Website: www.tremoraction.org

Table #: 6

Tremor Action Network, acronym TAN, is a 501(c)(3) public benefit organization dedicated to providing boutique services that include one-on-one support and guidance. TremorAction.org connects the bench to the Tremor patient. TAN videos in English and Español provide a better understanding of movement disorders.

UCB

Allée de la Recherche 60 Brussels 1070

Belgium

Telephone: +32 2 559 9427 Website: www.ucb.com

Booth #: 301

UCB, Brussels, Belgium is a global biopharmaceutical company focused on the discovery and development of innovative medicines and solutions to transform the lives of people living with severe diseases of the immune system or of the central nervous system. With about 9000 people in approximately 40 countries, the company generated revenue of EUR 3.4 billion in 2012. UCB is listed on Euronext Brussels (symbol: UCB).

Exhibitor Information



US WORLDMEDS

4441 Springdale Road Louisville, KY 40241 USA

Telephone: +1 502-815-8100 Website: www.usworldmeds.com

Booth #: 701

US WorldMeds holds a fundamental belief that our science has the potential to improve patients' lives. Our portfolio of products and development projects reflects our commitment to bring innovative therapies to patients with unmet medical needs. Please visit our US WorldMeds booth to learn more.

WORLD PARKINSON COALITION

1359 Broadway, Suite 1509 New York, NY 10018

USA

Telephone: +1 212-923-4700 Fax: +1 212-923-4778

Website: www.worldpdcoalition.org

Table #: 4

The 4th World Parkinson Congress will take place from September 20-23, 2016 in Portland, OR, USA. By bringing some of the world's most respected movement disorder specialists, neuroscientists, nurses, rehab specialists together with people with Parkinson's and care partners, WPC 2016 will provide a vibrant international forum to learn about the latest scientific discoveries, medical practices, and care initiatives for PD. Visit www. WPC2016.org for more information.

ZAMBON SPA

Via Lillo del Duca 10 Bresso (Milan) 20091

Italy

Telephone: +39 02 6652401 Website: www.zambongroup.com www.zambonpharma.com

Booth #: 611

Zambon is a leading Italian pharmaceutical and fine-chemical multinational company. Zambon is well-established in 3 areas: respiratory, pain, woman care; it is also strongly committed in CNS area with Xadago® (safinamide) for PD. Zambon is headquartered in Milan and was established in 1906 in Vicenza. Zambon is present in 15 countries.

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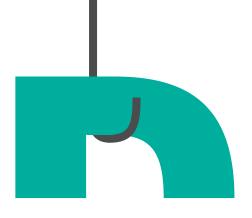
Reference: 1. Statistics on Parkinson's. Parkinson's Disease Foundation website. http://pdf.org/en/parkinson_statistics. Accessed December 31, 2014.

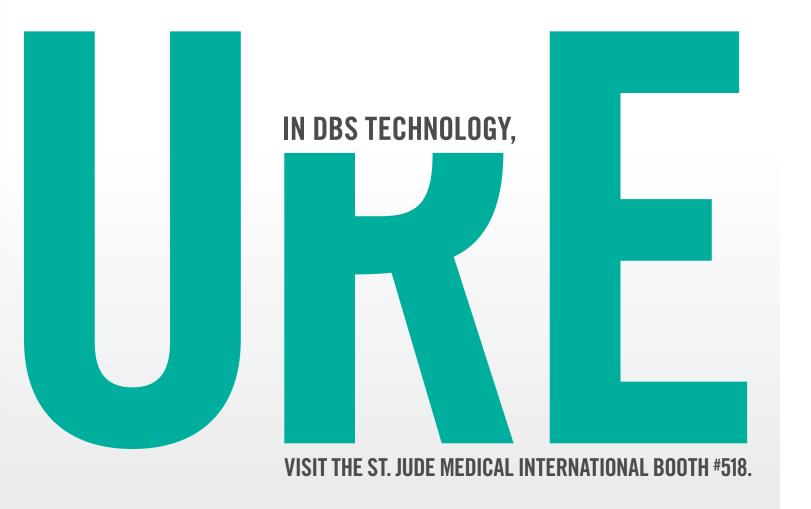
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TURNING WHAT IF INTO WHY NOT."





Education Grant Supporters

MDS acknowledges the supporters of the following 2015 International Congress activities through unrestricted educational grants:

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Managing Parkinson's disease: Past, present and future, supported by BIAL - Portela & Ca., S.A.

Therapeutic Plenary Session 1102:

Treatment of dystonia, supported by Merz North America

Therapeutic Plenary Session 1103:

Therapeutic options for mood, cognition and psychosis in Parkinson's disease, supported by ACADIA Pharmaceuticals

Plenary Session 2102:

25 years of Movement Disorders — Movement Disorders Grand Rounds, supported by GE Healthcare

Parallel Session 2208:

New technologies in evaluation of treatment of movement disorder patients, supported by UCB

Skills Workshop 2412:

DBS for non-parkinsonian movement disorders, supported by Medtronic

Skills Workshop 3412:

Practical issues in using neuroimaging in Movement Disorders: What, when, why, supported by GE Healthcare

Plenary Session 4102:

Breaking news in movement disorders, supported by Boston Scientific

Parallel Session 4206:

Electrophysiological, morphological and molecular basis of levodopa-induced dyskinesias and their therapeutic implications, supported by Adamas Pharmaceuticals

Skills Workshop 4412:

Managing acute and chronic post-operative issues following DBS in Parkinson's disease, supported by Medtronic

Plenary Session 5101:

Emerging paradigms for functional surgery for movement disorders, supported by Medtronic

Plenary Session 5102:

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Plenary Session 5103:

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Acknowledgements

The International Congress Oversight Committee of the 19th International Congress of Parkinson's Disease and Movement Disorders wishes to acknowledge and thank the following companies for their support:

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Above companies are confirmed as of April 24, 2015



Notes			



Movement Disorder Society International Parkinson and

CERTIFIES THAT

19th International Congress of Parkinson's Disease and Movement Disorders on has attended the International Parkinson and Movement Disorder Society's June 14-18, 2015 in San Diego, CA, USA

President, International Parkinson and Movement Matthew Stern

Disorder Society, 2013-2015

Victor Fung Chair, Congress Scientific Program Committee, 2013 - 2015

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Irene Litvan Co-Chair, Congress Scientific Program Committee, 2015





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Analysis of Vantage Study



62.6% Mean Improvement in UPDRS III Scores (Meds OFF)¹ at 6 months post implant vs. baseline.





1. References: Timmerman L., Alesch, A., et.al. VANTAGE trial: A prospective, multi-center trial evaluating Deep Brain Stimulation with a new multiple-source, constant-current rechargeable system (Vercise™) in Parkinson's disease. Movement Disorder Society, Poster June 2013.

CAUTION - Investigational Device. Limited by Federal (or United States) law to investigational use.

Results from clinical studies are not predictive of results in other studies. Results in other studies may vary

The Vercise" Deep Brain Stimulation (DBS) System is indicated for use in unilateral or bilateral stimulation of the subthalamic nucleus (STN) or internal globus pallidus (GPi) for treatment of levodopa-responsive Parkinson's disease which is not adequately controlled with medication and also for treatment of intractable primary and secondary dystonia, for persons 7 years of age or older. Thalamic stimulation using the Boston Scientific Vercise" DBS System is indicated for the suppression of tremor not adequately controlled by medications in patients diagnosed with Essential Tremor Parkinson's disease. All cited trademarks are the property of their respective owners. CAUTION: The law restricts these devices to sale by or on the order of a physician. Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device. Information for the use only in countries with applicable health authority product registrations.

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