

We are the only PARKINSON'S FOUNDATION CENTER OF EXCELLENCE in the region with comprehensive care including doctors specialized in the diagnostics, treatment, research, and education of Parkinson's disease. We have a large multi-disciplinary team including healthcare professionals specialized in Parkinson's disease in the areas of psychology, speech, physical therapy, occupational therapy, dietetics, social work, pharmacy, neuropsychology, and neurosurgery, including a large deep brain stimulation program.

The KUMC Parkinson's Disease Symposium Live This Year!

[Click Here to REGISTER NOW!](#)

We are excited to announce that our annual Parkinson's Disease Symposium will be live this year on August 13th, 2022, at the Overland Park Marriott located at 10800 Metcalf, Overland Park, KS 66210. There is no charge to attend but registration is required. The doors will open at 8:00am to visit the informational exhibits and get settled and the program will begin at 9:00am and end at 1:00pm. Light snacks, coffee and water will be provided. Parking will be available free of charge outside the Marriott. The program is being finalized and will feature the Parkinson's Disease experts from the KUMC PD Center of Excellence. Details will be provided in future newsletters.

[Click HERE to REGISTER NOW!](#)

or visit: <https://redcap.kumc.edu/surveys/?s=AFRANPWJL4778DPJ>

or email: PDETcenter@kumc.edu or call 913-588-7159



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TREMOR CORNER

ET Studies Ongoing!

JZP385 – ET with moderate to severe arm/hand tremor. Cannot be taking ET medications

PRAX-944 – ET for at least 3 years with at least moderate arm/hand tremor. Cannot be taking primidone.

SAGE-324 – ET for at least 3 years with at least moderate arm/hand tremor. Cannot be taking other medications for ET.

If you are interested in participating in a research study or would like more information, please email pdetcenter@kumc.edu or call 913-588-7159.

CLINICAL STUDIES RECRUITING

We have multiple ongoing and upcoming studies for PD. We are currently enrolling for the following studies:

1. Newly diagnosed PD patients

- K0706** – PD patients diagnosed within the last 3 years and not taking any PD medications
- CVL-751** – PD patients diagnosed for < 3 years and taking no PD medications except for an MAO-B inhibitor

2. Stable PD patients

- PADOVA** – PD patients taking only an MAO-B inhibitor OR levodopa diagnosed within the last 3 years

3. PD patients experiencing OFF time (poor control of symptoms) during waking hours

- CVL-751** – PD patients with at least 2.5 hours of OFF time per day

4. PD patients experiencing troublesome dyskinesia (wiggling movements from levodopa)

- ADX-301** – PD patients with at least 1 hour of dyskinesia between 9 a.m. and 4 p.m. daily and not currently taking amantadine or willing to discontinue
- BK-JM-201** – PD patients with at least 1.5 hours of troublesome dyskinesia daily and not taking or willing to stop amantadine

5. PD Generation Mapping the Future of Parkinson's Disease –

Testing for 7 genes associated with Parkinson's disease. Anyone diagnosed with Parkinson's disease in our region can participate.

6. The Parkinson's Progression Markers Initiative (PPMI)

- Parkinson's Disease cohort (PD diagnosed within the last 2 years, not on or expected to need meds for 6 months)
- Prodromal cohort (1st degree relative with PD, REM sleep behavior disorder (RBD), or known genetic variants; 60+ years),
- Healthy Controls (30+ years).

If you are interested or have patients who are interested in learning more about any of these research studies, please contact PDETcenter@kumc.edu

NEW FORM OF CARBIDOPA/LEVODOPA AVAILABLE

The FDA recently approved a new, fractionated form of carbidopa/levodopa. The brand name of this formulation is Dhivy. It is immediate release 25/100 carbidopa/levodopa that is scored with 4 fractionated segments each containing 6.25/25 mg of carbidopa/levodopa. This formulation allows for more precise dosing to individualize the dose of carbidopa/levodopa, avoiding the difficulty of trying to break a standard 25/100 mg tablet. With more precise dosing, it is now possible to more accurately adjust the dose of carbidopa/levodopa to avoid OFF time or dyskinesia. For example, if one tablet of 25/100 3 times a day results in OFF time, but 2 tablets 3 times a day causes dyskinesia, with this formulation you can use 1.25, 1.5 or 1.75 tablets to find the best option for each person.



Living With Parkinson's: Beyond the Diagnosis – Surgical Options

Presented by Dr. Kelvin Au and Crystal Cramer, BSN from the KU PD Center of Excellence. Click on the link below to watch now:

<https://youtu.be/67wW-0VUaNY>

We welcome any feedback, questions, or comments at PDETcenter@kumc.edu.

Visit our website: KUMC.EDU/PARKINSON