

Differences between dopa-responsive and dopa-resistant Parkinson's tremor

No registrations found.

Ethical review	Positive opinion
Status	Recruiting
Health condition type	-
Study type	Interventional

Summary

ID

NL-OMON20997

Source

NTR

Brief title

TREMOR-DOPA

Health condition

Parkinson's disease; tremor; fMRI; GABA

Sponsors and support

Primary sponsor: Radboud University Nijmegen

Donders Institute for Brain, Cognition and Behaviour, Centre for Cognitive Neuroimaging

Source(s) of monetary or material Support: Dutch Brain Foundation

Intervention

Outcome measures

Primary outcome

- fMRI activity (cerebral activity related to the onset and the amplitude of each patient's tremor episodes).
- GABA concentration in the ventrolateral thalamus contralateral to the tremulous arm.

- structural integrity of the mesencephalon contralateral to the tremulous arm.

Secondary outcome

- Cognitive performance on dopamine-dependent and dopamine-independent behavioural tasks.
- Electrophysiological markers of dopa-responsive and dopa-resistant tremor (EMG).

Study description

Study objective

We hypothesize that PD patients with dopa-responsive and dopa-resistant tremor have different tremor-related brain activity, different inter-regional functional connectivity, and different GABA-ergic tone in the thalamus.

Study design

not applicable. Comparison of 2 sessions (intervention vs. placebo).

Intervention

Levodopa-Benserazide (Madopar) 200-50 mg + Domperidone 10 mg.

Contacts

Public

Department of Neurology, Radboud University Medical Center,

Helmich
PO Box 9101,

Nijmegen
The Netherlands

Scientific

Department of Neurology, Radboud University Medical Center,

Helmich
PO Box 9101,

Eligibility criteria

Inclusion criteria

PHASE 1 (polymography):

- Idiopathic Parkinson's disease according to UK brain bank criteria.
- Mild to moderate disease severity (Hoehn and Yahr 1-3).
- Presence of a clear resting tremor of at least one arm (UPDRS tremor-score ≥ 2).

PHASE 2 (neuroimaging):

- Dopaminergic therapy with a clear clinical response of non-tremor symptoms (improvement of total limb bradykinesia on the UPDRS $\geq 20\%$ after 250 mg levodopa-benserazide).
- Dopamine-responsive tremor (improvement of total limb resting tremor score on the UPDRS $\geq 60\%$ after 250 mg levodopa-benserazide) OR dopamine-resistant tremor (improvement of total limb resting tremor score on the UPDRS $\leq 20\%$ after 250 mg levodopa-benserazide).

Exclusion criteria

- Neurological or psychiatric co-morbidity (e.g. stroke, depression).
- Severe head tremor or dyskinesias.
- Cognitive impairment (MMSE < 26).
- Neurological or psychiatric co-morbidity (e.g. stroke, depression).
- Severe head tremor or dyskinesias.
- Cognitive impairment (MMSE < 26).

Study design

Design

Study type:	Interventional
Intervention model:	Crossover
Allocation:	Non-randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Placebo

Recruitment

NL	
Recruitment status:	Recruiting
Start date (anticipated):	23-01-2015
Enrollment:	50
Type:	Anticipated

Ethics review

Positive opinion	
Date:	21-01-2015
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

ID: 40810
Bron: ToetsingOnline
Titel:

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL4940
NTR-old	NTR5042
CCMO	NL47614.091.14
OMON	NL-OMON40810

Study results