

#### Kiel Woodward, MD

Assistant Professor of Neurology, Movement Disorders Division Comprehensive Parkinsons Disease Care, 3/26/2023



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# **Objectives**

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- 1. [Briefly] describe the pathophysiology and pathogenesis of Parkinsons Disease
- 2. Recognize environmental risk factors and protective factors
- 3. Identify the genetic causes of PD

## **Disclosures**

Clinical Deep Brain Stimulation training - Medtronic - 2021

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#### **What Causes Parkinsons Disease?**

Long story short: It's very complicated and we don't know!



# **Epidemiology – Who Gets PD?**

Incidence: 6-35/100,000 new cases annually

• Increases significantly with age: 9th decade 5-10x higher than 6th decade

Prevalence: Estimated 6.2 million cases globally in 2015

45-55 years of age: <1%</li>

• >85 years: ~4% of men, ~2% of women

Average age of onset: 65

Affects men greater than women, 3:2

Primarily sporadic: only 10-15% of cases have a family history (1st degree relative)

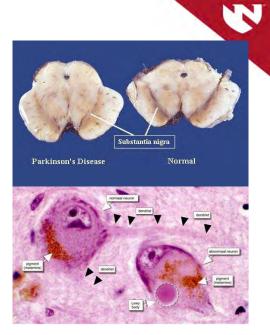
Simon DK, Tanner CM, Brundin P. Clin Geriatr Med. 2020 Feb

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## **Neuropathology**

PD is classically pathologically characterized as:

- Degeneration of dopaminergic neurons in the substantia nigra
- Presence of intraneuronal aggregates called Lewy Bodies and Lewy Neurites



Kon T, Tomiyama M, Wakabayashi K. Neuropathology of Lewy body disease. Neuropathology. 2020 Feb

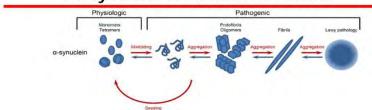
## **Neuropathology**

Lewy bodies are primarily composed of a protein called alpha-synuclein

α-synuclein is heavily expressed in neuronal tissue. Thought to be integral for vesicular trafficking and neurotransmitter release

In PD, protein misfolding results in abnormal aggregation that becomes insoluble and eventually leads to build-up in neurons to toxic effect

#### α-synuclein in Parkinson's disease



Kalia . Parkinsonism Relat Disord 2019;59:215

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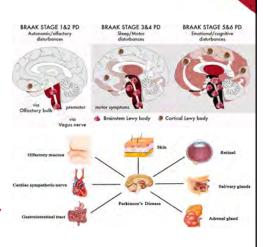
## **Widespread Lewy Body Deposition**

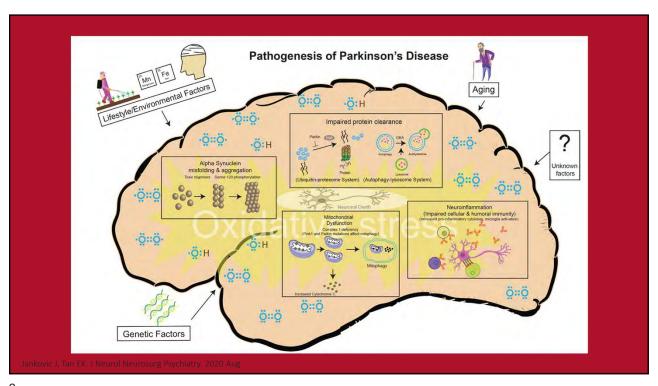
In 2003, pathologist Helios Braak demonstrated widespread cerebral Lewy Body deposition in PD patients, roughly correlating with disease severity

An unknown pathogen is inhaled and swallowed, leading to α-synuclein misfolding in nose and gut neurons, which spreads to the brainstem via the olfactory and vagal nerves

Alpha-synuclein aggregation has also been demonstrated throughout the body in peripheral nerves

Braak H, et al. Neurobiol Aging. 2003 Mar-Apr Ma LY, et al. ACS Chem Neurosci. 2019 Feb







## First, a word about risk factors...

Many studies over the years investigating environmental risk factors, <u>often</u> with conflicting results.

## Statistical risk ≠ cause



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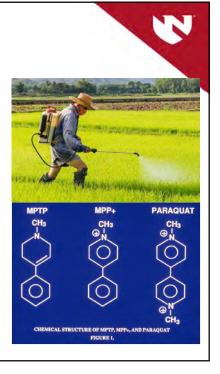
#### Pesticides/Solvents

A 2013 meta-analysis of 104 studies found that exposure to ANY pesticide, herbicide, or solvent raises risk, OR 1.8 overall

Thought to lead to mitochondrial dysfunction
Certain pesticides and solvents have higher risk, and some have been shown to induce
Parkinsonism in animal models. PPE (gloves, mask) use modifies risk

- Paraguat OR 2.2
- Rotenone
- 2,4 Dichlorophenoxyacetic acid (Agent Orange) OR 1.0-1.8
- Organochlorides
- · Dithiocarbamates Maneb/mancozeb OR 2.2

Pezzoli G, Cereda E. Neurology. 2013 May Furlong M, et al. Environ Int. 2015 Feb

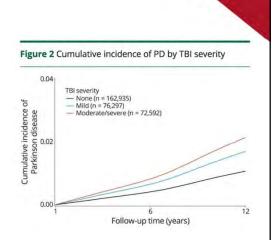


## **Head Injury**

Meta-analysis of 22 studies in 2013 showed a pooled OR 1.57

Consortium study in 2018 of 325,870 patients confirmed an association between PD and TBI

- Mild OR 1.56
- Moderate/severe OR 1.83



Jafari S, et al. Mov Disord. 2013 Aug Gardner RC, et al. Neurology. 2018 May

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## **Heavy Metal Exposure**

Manganese-induced Parkinsonism has been known for many years, affecting welders and manganese miners

A 2017 study found a correlation between estimated manganese exposure and severity of PD symptoms

Characteristic MRI finding of T1 hyperintense basal ganglia. Often results in a characteristic phenotype with high-stepping gait, symmetric symptoms, and less tremor



Racette BA, et al. Neurology. 2017 Jan

#### Estrogen exposure

Multiple studies show bilateral salpingooopherectomy increases PD risk Increased risk of developing PD with esterified estrogen use OR 6.9 No risk with conjugated estrogen use



Parker WH, et al. Obstet Gynecol. 2017 Jan Lundin JI, et al. Mov Disord. 2014 Nov.

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## **High Dairy Intake**

Associated with modest risk Meta-analysis in 2017 found:

- Total dairy intake no risk
- Low fat dairy intake >3 servings/day -OR 1.34



Hughes KC, et al. Neurology. 2017 Jul

#### **Protective Factors**

Cigarette use – OR 0.39

- Consistent inverse dose-response
- Not explained by selective survival of non-smokers

#### Caffeine

- High coffee intake RR 0.43
- Tea OR 0.85

Ibuprofen – RR 0.62. No effect with other NSAIDs

Exercise – HR 0.66, comparing >6 hours/week of activity to <2 hours/week

Belvisi D, et al. Neurobiol Dis. 2020 Feb



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#### **Genetics of Parkinsons Disease**

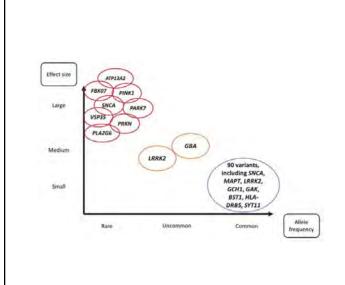
Long-thought to be a strictly acquired condition Now thought to be complex disease with both genetic and environmental contributions

- Discovery of the first pathogenic mutation in an Italian PD kindred in 1981 (SNCA)
- Long-duration twin studies confirmed higher incidence in monozygotic twins vs. dizygotic twins

Family history confers 3-4x risk of developing PD



Goldman SM, et al. Ann Neurol. 2019 Apr



# **Genetics of Parkinsons Disease**

Only 10-15% of cases of Parkinsons are familial

5-10% of PD patients have an identifiable pathologic genetic mutation that is known to cause/contribute to disease

The presence of a mutation does not necessarily confer disease. Some genes have high penetrance, but most mutations have low-medium penetrance

Day JO, Mullin S. Genes (Basel). 2021 Jun

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# **Monogenic PD**

A group of genes with mutations leading to Parkinsonism with highpenetrance

Often early-onset (age <50) and with atypical features (early dementia, poor response to levodopa, pyramidal signs, severe dystonia)

#### Rare

Alternative Gene Names Inheritance Pathogenicity PD Phenotype Uncertain (encodes PARKI, PARK4, NCAP Retromer and endosomal trafficking PARK17, MEM3 VPS35 AD PARK6 AR Pathogenic Early-onset Pathogenic PARK7 DJ-1 AR Early-onset PARKZ, PARKIN PARK14. IPLA2 Early-onset, atypical ATP13A2 PARK9 AR Early-onset, atypical

POLG	POLGI, POLGA	AD	Pathogenic	Early-onset, atypical	Mitochondrial DNA maintenance
DNAJC6	PARK19, DJC6	AR	Likely pathogenic	Early-onset	Synaptic vesicle formation and trafficking
DNAJC13	PARK21, RME8	AD	Conflicting reports	Typical	
TMEM230	C20ORF30	AD	Conflicting reports	Typical	
SYNJ1	PARK20	AR	Pathogenic	Early-onset, atypical	
VPS13C	PARK23	AR	Pathogenic	Early-onset	Mitochondrial
CHCHD2	*	AD	Pathogenic	Typical	Uncertain
DCTNI	-	AD	Pathogenic	Atypical	Microtubule

Day JO, Mullin S. Genes (Basel). 2021 Jun

#### LRRK2

Physiologic role of *LRRK2* is thought to be related to autophagy, mitochondrial function, and microtubule stability

The most common "monogenic" cause of PD

- Most common variant: 5-6% of all familial cases, and 2% of all sporadic cases
- · Expressed most highly in Ashkenazi Jew and North African Berber populations

The highest penetrant variant has a 25-75% risk of developing PD by age 80

Phenotype is very similar to typical, idiopathic Parkinsons Disease

Simpson C, et al. Parkinsonism Relat Disord. 2022 May

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#### **GBA**

Function of *GBA* is essential to lysosomal function and glycosphingolipid homeostasis

The most common genetic risk factor for PD

- Present in 5-15% of all PD patients
- Does NOT cause a Mendelian form of inheritance, raises lifetime risk by 2-4x

Phenotype is similar to typical, sporadic PD Homozygous GBA mutation causes Gaucher Disease

Smith L, Schapira AHV. Cells. 2022 Apr.





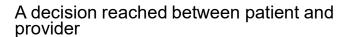
## **Genetic Testing**

When should I consider an underlying genetic Parkinsons Disease?

- Strong family history (1st degree relatives, multiple 2nd degree relatives in an AR pattern of inheritance)
- Young-onset (<50 years old)</li>
- Atypical features: early dementia, severe dystonia, upper motor neuron signs (hyperreflexia, weakness, spasticity)

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# **Genetic Testing – Should I Get it?**



Things to consider:

- Outcome rarely affects treatment, no gene-specific therapies (for now)
- May help determine a more accurate prognosis for future life planning
- May facilitate participation in research trials
- Risk to next generation

Consider a referral to a genetic counselor before committing to testing



## **Ordering Genetic Testing**

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PDGeneration – Free genetic testing for PD patients and family members. Research study through Indiana University. [PDGeneration.com]

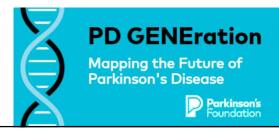
• Only tests for variants in 7 genes: GBA, LRRK2, PRKN, SNCA, PINK1, PARK7 (DJ-1) and VPS35.

Invitae – Hereditary Parkinsons Disease and Parkinsonism Panel

26 genes. Works well with insurance. Max OOP cost \$250

GeneDx – Parkinsons Disease Panel

46 genes



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#### Summary



Parkinsons Disease is a complex disease with both genetic and environmental contributions

The underlying cause is thought to be related to toxic accumulation of proteins leading to mitochondrial dysfunction and neuroinflammation that ultimately leads to neuronal death

Modifiable risks factors: pesticide/solvent exposure, head trauma, heavy metal exposure, estrogen use and possibly low-fat dairy

Protective factors: cigarette use, caffeine use, exercise, possibly ibuprofen

PD is primarily sporadic, only 10-15% of cases have family history

Pure genetic causes of PD are uncommon

- LRRK2 has the most common genetic variant causing familial PD
- GBA mutations are the most common genetic risk factor for PD

