THERAPY TO REDUCE DEMENTIA RISK IN PARKINSON’S DISEASE (TRIP): PROOF-OF-CONCEPT PROTOCOL

INTRODUCTION

Parkinson’s disease (PD) dementia is associated with a significant reduction in quality of life, increase in carer burden, and early institutionalisation.¹ Prior to the dementia syndrome, many patients pass through a transitory stage of Mild Cognitive Impairment (MCI). The presence of memory impairment in this stage, termed amnestic MCI (aMCI), is predictive of a rapid trajectory toward dementia.² While there are some approved, albeit temporary – no known effective treatments – treatments for dementia, there are currently no known effective treatments to treat or reduce the risk of dementia in PD.

OBJECTIVES

PD patients will develop dementia²

METHOD

Describing the proposed proof-of-concept study is a critical first step to evaluate a repurposed indication for low-dose levetiracetam in patients with PD who are at risk of developing dementia, and establishing key outcome measures for future clinical trials. We are uniquely positioned to perform this study – with a multidisciplinary team of local and international experts in PD, dementia, neuroimaging and clinical trials, including investigators from a completed levetiracetam trial in Alzheimer’s disease from the USA.

RESULTS


PROCEDURE

Baseline (T1) Stage 1 2 weeks Drug Post assessment (T2) Washout 4 weeks Placebo End washout (T3) Stage 2 2 weeks Placebo Drug Post assessment (T4)