



Natural History Project

Joel Perlmutter Jo Wright

Washington University in St. Louis

Sponsored by the NINDS and ORDR-NCATS at NIH, PAG, Industry, Professional Societies, and/or other sources.

Natural History Project

Goal: Collect clinical and exam data to better understand:

> phenotypic spectrum of all dystonias

 \succ how symptoms change over time

 \succ if other family members are affected

≻researchers to use data for research

Natural History Recruitment Goals

(isolated dystonia): 200 cases/year

New cases

Focal Multifocal Segmental Generalized Hemidystonia

Must have started in: Face (Craniofacial/Blepharospasm/Oromandibular) Larynx (Laryngeal) Limbs (Limb dystonia)

Follow-up cases

Focal Multifocal Segmental Generalized Hemidystonia Must have started in:

Neck (Cervical Dystonia)

Face (Craniofacial/Blepharospasm/Oromandibular) Larynx (Laryngeal) Limbs (Limb dystonia)

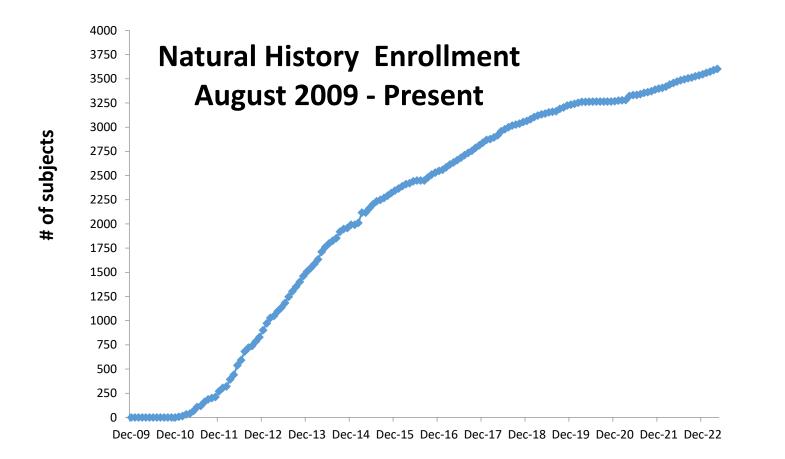
Natural History: To Date

> The Natural History Study began recruitment in 2010

- Natural History/Biorepository
- ➢ Natural History Early Stage/Late Stage, 2016
- > DCP3, 2020 to present
- Minimal changes to data collection and video protocols
- ➢ No change for sample NINDS Coriell collection
 - ➢ Biobank at WUSM (2020)
- > Follow-up visits, determined by a sliding scale

If onset of symptoms was	Subsequent follow-up visit should be
0 to < 3 years ago	1 year from last visit
3 to < 5 years ago	2 years from last visit
5 to < 7 years ago	3 years from last visit
At least 7 years ago	4 years from last visit

Natural History Enrollment: 2010-2022



42 Sites recruited 3607 cases, 1396 follow-ups

Distribution of Isolated Dystonia (March 2023)

Types of Isolated Dystonias enrolled	
Туре	Amount
Focal Dystonia	2563
Generalized	165
Hemidystonia	15
Multifocal	296
Segmental	858

Distribution of Focal Dystonia Subtypes

	Affected at	Affected at
Body Site	onset of illness	time of study
Foot	123	20
Hand	527	83
Jaw	189	304
Larynx	406	64.
Lower Face	316	72
Neck	2081	246
Pelvis	15	4
Shoulder	199	74
Tongue	59	144
Trunk	62	22
Upper Arm	164	354
Upper Face	729	95
Upper Leg	56	9

Natural History Available Data

Completed by Neurologist

- Global Dystonia Rating Scale (GDRS)
- Burke-Fahn Marsden Dystonia Scale (BFM)

Completed by participant

- Short Form Health Survey 36 (SF-36)
- Beck Depression Inventory II (BDI-II)
- Hospital Anxiety and Depression Scale (HADS)
- Liebowitz Social Anxiety Scale (LSAS)
- Patient Health Questionnaire 9 (PHQ-9)

Natural History Available Data

Completed by Coordinator

DCP Data Collection Form demographic, medical history, medications, exam, family history

Neurological Exam Video over 3,000 videos available

Data Accessibility - Who

- Enrolling Sites
 - Access to site data and videos
- > New Research Projects
 - ➢ IRB approval
 - Data Access Agreement form
 - Executive Committee approval
 - > Data
 - Videos (restricted access)
 - > Biospecimens
- REDCap Data Interface / Chiron Interface Publically available non-PHI data Full research data, de-identified

Data Accessibility - Where

- Washington University in St. Louis
 - ≻ REDCap
 - Video Repository
 - ≻ REDCap
 - \succ Full data set for research
- > NINDS Coriell Institute for Medical Research, *New Jersey*
 - > DNA samples
 - De-identified data
- Data Management and Coordinating Center (DMCC), *Cincinnati Children's Hospital Medical Center*
 De-identified data for public (Chiron)
 De-identified data for research (Chiron)

Data Accessibility – Video Repository

Restricted access

Washington University in St.Louis • School of Medicine

DYSTONIA COALITION

- Search by site

 Search by diagnosis
 Search by project
 Search by Comments
- Site _DC Video Protocols_

 Search

Data Sharing/Access

Public Access: Chiron (DMCC)

Full Data or Video Access

- > Application
- Data access agreement
- ➤ IRB approval
- Executive Committee approval
- > Only project specific data release
- Video: only streaming, not downloading

Investigator Responsibilities

≻Use data for proposed studies only

≻No secondary release

>No attempt to identify participants

≻Adequate staff training

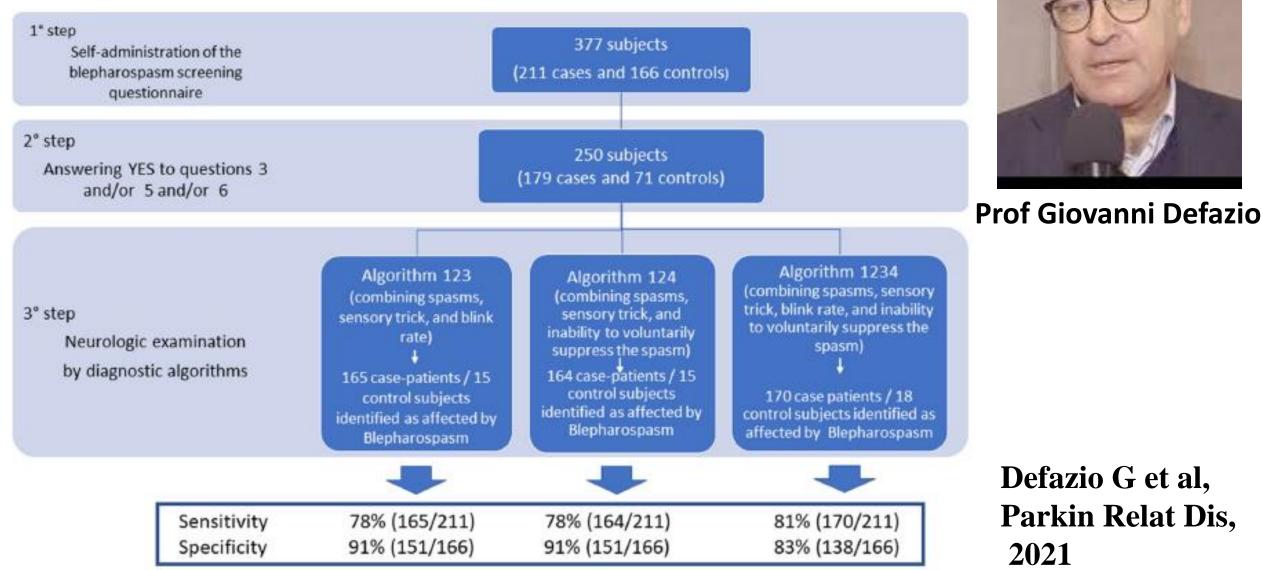
Share findings with Dystonia Coalition and publish data

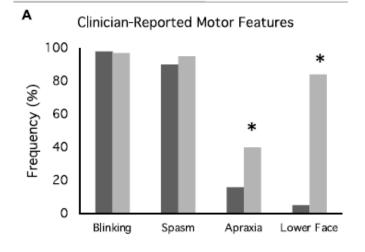
≻Acknowledge source

Data Utilization

- ≻Use data for proposed studies only
- ≻No secondary release
- ≻No attempt to identify participants
- Adequate staff training
- Share findings with Dystonia Coalition and publish data
- ➢Acknowledge source

Blepharospasm Diagnostic Criteria: (bleph: n =211; control: 166)



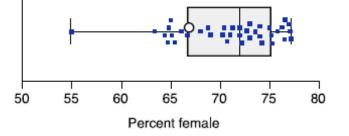


Subject-Reported Motor Symptoms

в

Blepharospasm: Clinical features

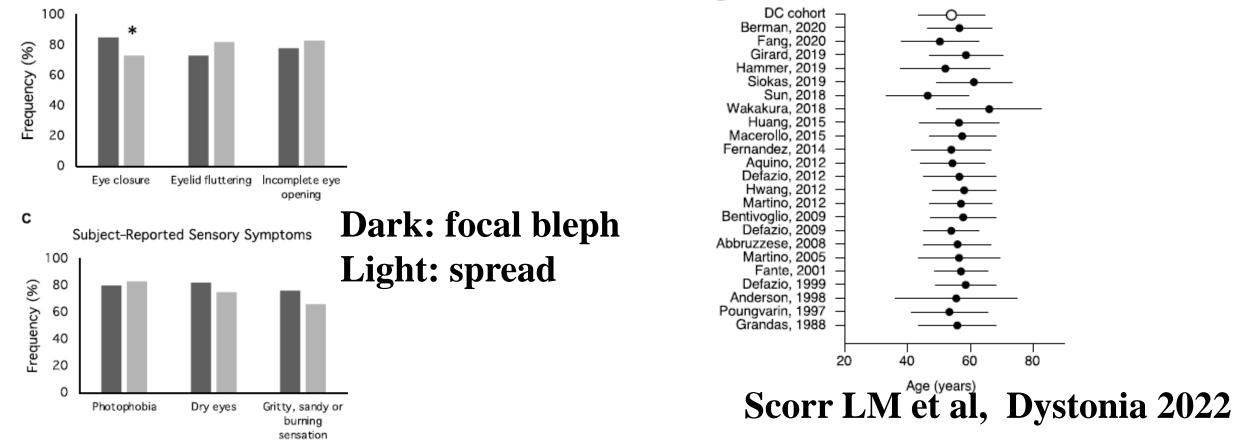
N =884



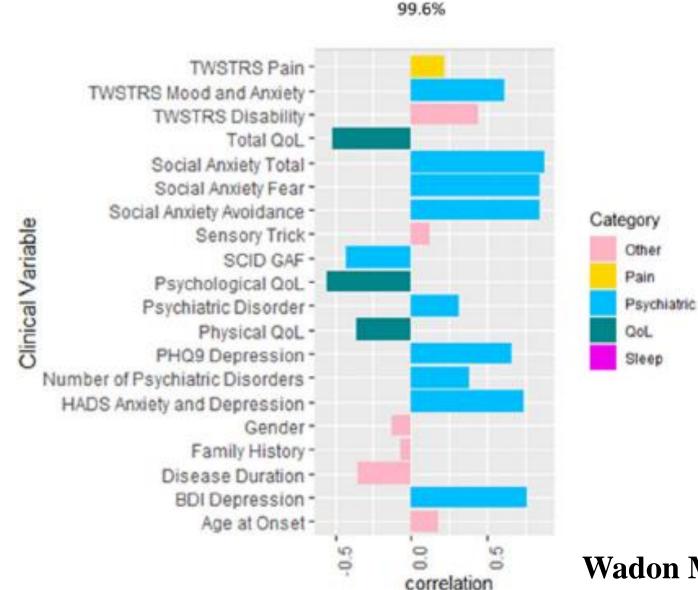
80

60

в



CD: Non-motor phenotypic subgroups (N = 183 (DC), 114 dystonia wales)



Wadon ME et al, Brain Behav 2021

CD: classification & Diagnosis:

Cases with CD

Body region affected on exam	Cases with dystonia	Cases with tremor
Neck	1245	720
Shoulder	226	8
Hand	69	157
Larynx	36	21
Upper face	51	10
Lower face	37	5
Upper arm	28	38
Trunk	23	10
Jaw	16	7
Foot	5	5
Upper leg	4	6
Tongue	4	5
Pelvis	0	0

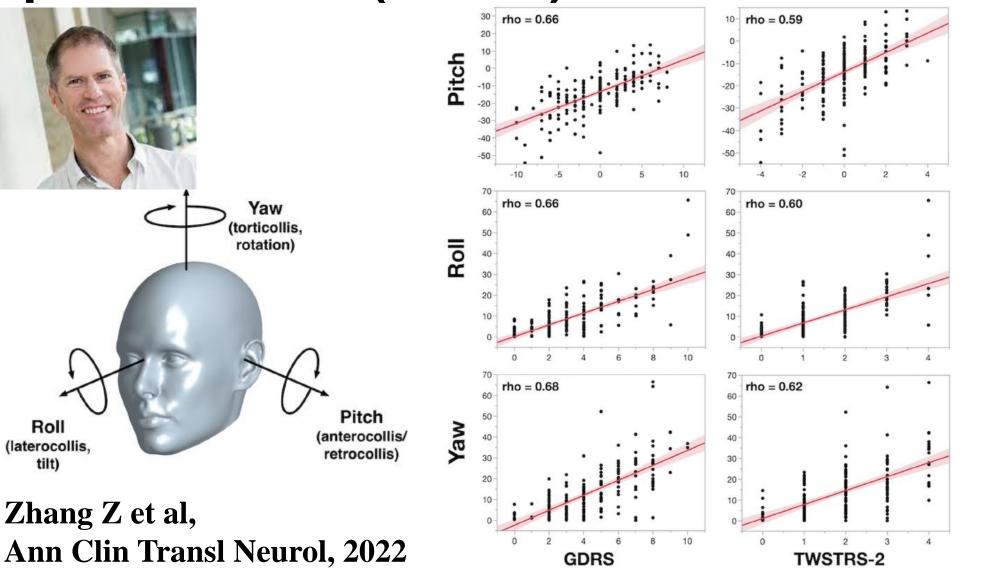
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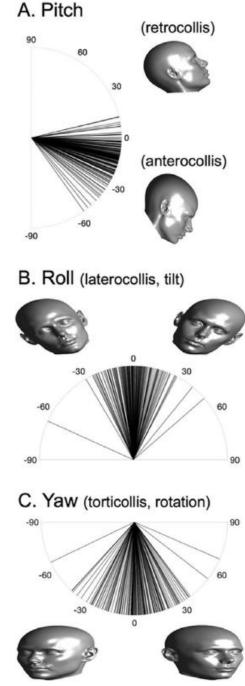
TABLE 4 Recommendations for diagnosis of cervical dystonia according to body regions affected

Diagnosis	Body regions involved
Focal cervical dystonia	Neck only
	Neck plus shoulder
	Neck plus platysma
Segmental dystonia with neck involvement	Neck plus shoulder and upper arm
	Neck plus shoulder and whole arm/hand
	Neck plus jaw/tongue
	Neck plus lower face
	Neck plus larynx
	Neck plus trunk

Kilic-Berkmen G t al, Mov Clin Pract 2022

Cervical Dystonia: Objective Video quantification (CMOR): n=185





Bleph subtypes (motor/psych): cluster analysis (n=188)

• 3 subtypes: mild, moderate & severe motor

depression/anxiety: bleph > controls

severity of depression/anxiety: moderate > severe > mild



Prof Giovanni Defazio

Defazio G et al, Parkin Relat Disord, 2022

Q & A

Natural History (NH) Project

Project Management Center: Washington University in St. Louis Project Leader: Joel Perlmutter, MD (<u>perlmutterjoel@wustl.edu</u>) Data Manager: Jo Wright (<u>laurajwright@wustl.edu</u>)