

# Pathophysiological activity in Parkinson's disease

Kiel 18.01.23  
Julius Welzel



Christian-Albrechts-Universität zu Kiel

Medizinische Fakultät

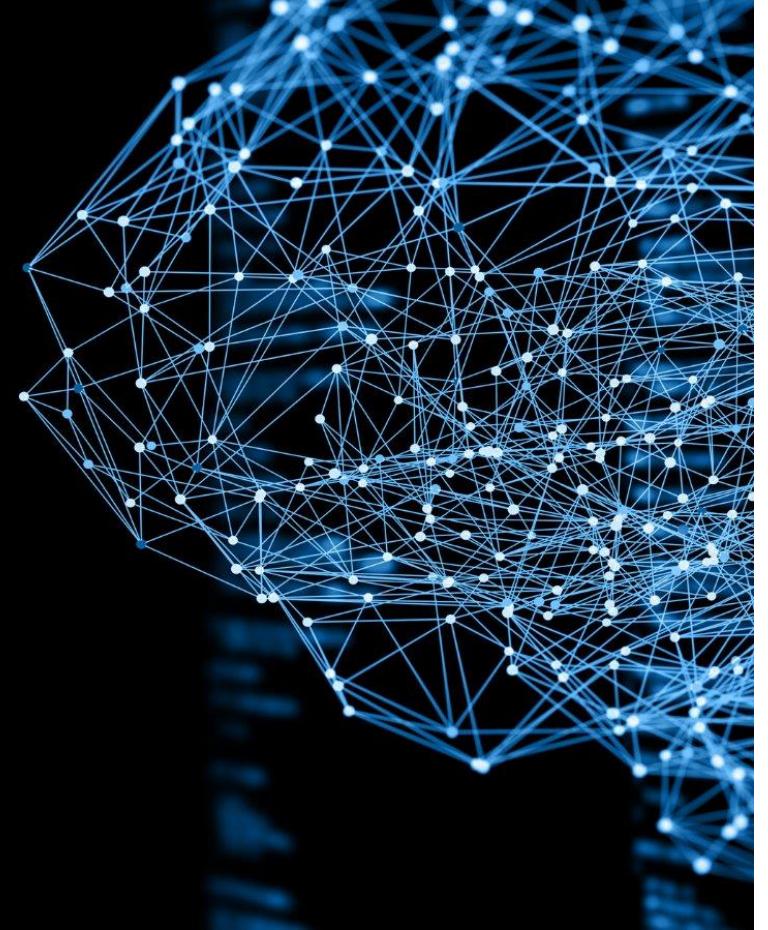


# JPND call

JPND-supported funded projects  
2022 Call Announcement

## UNDERSTANDING THE MECHANISMS OF NON-PHARMACOLOGICAL INTERVENTIONS

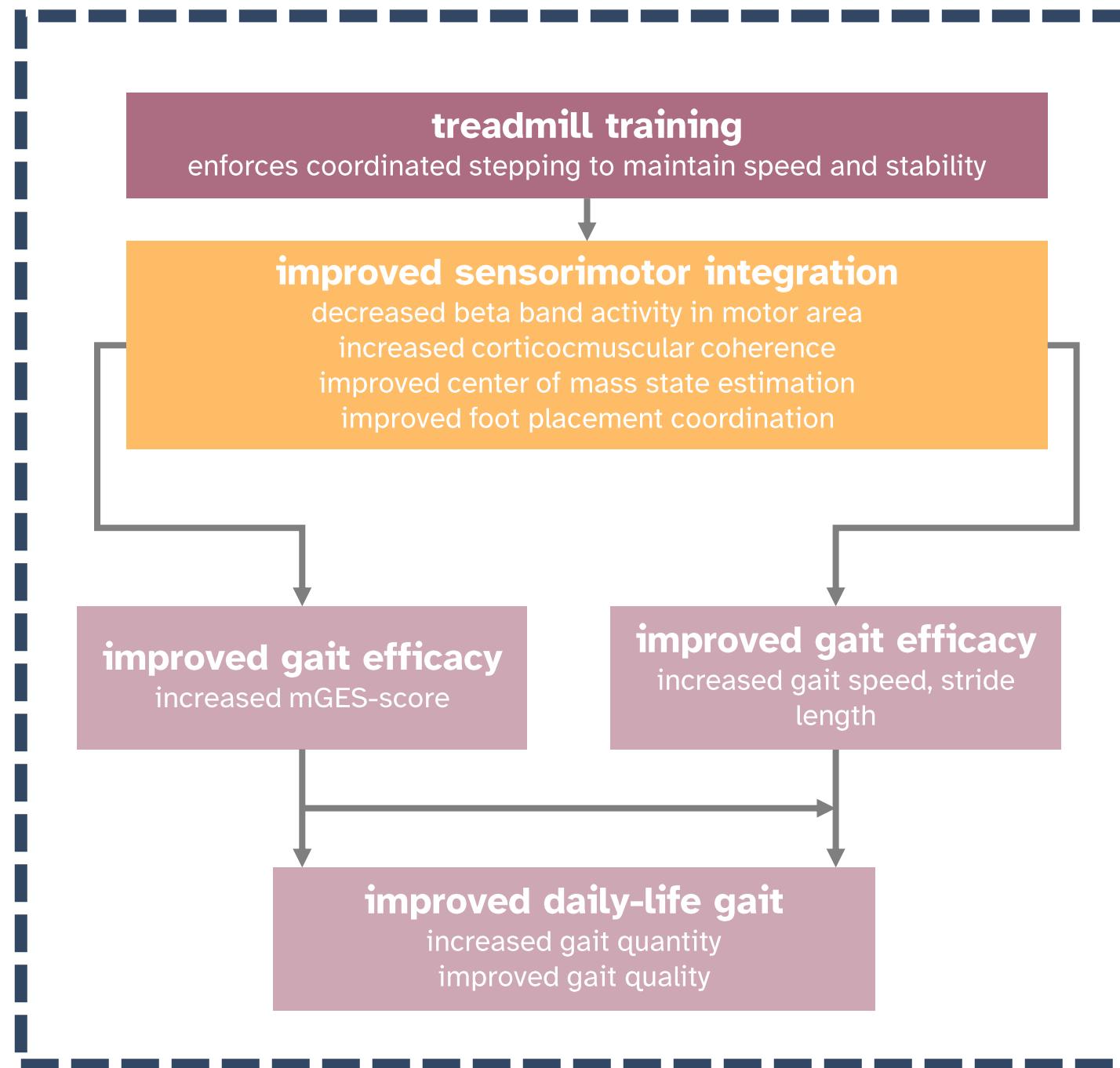
Find out more now!



→ Successful funding for three years with the **Steps** against the burden of Parkinson's Disease (**StepuP**) project

# Overview

## Pathophysiological aspects of mobility a JPND project in Kiel



# StepuP objectives

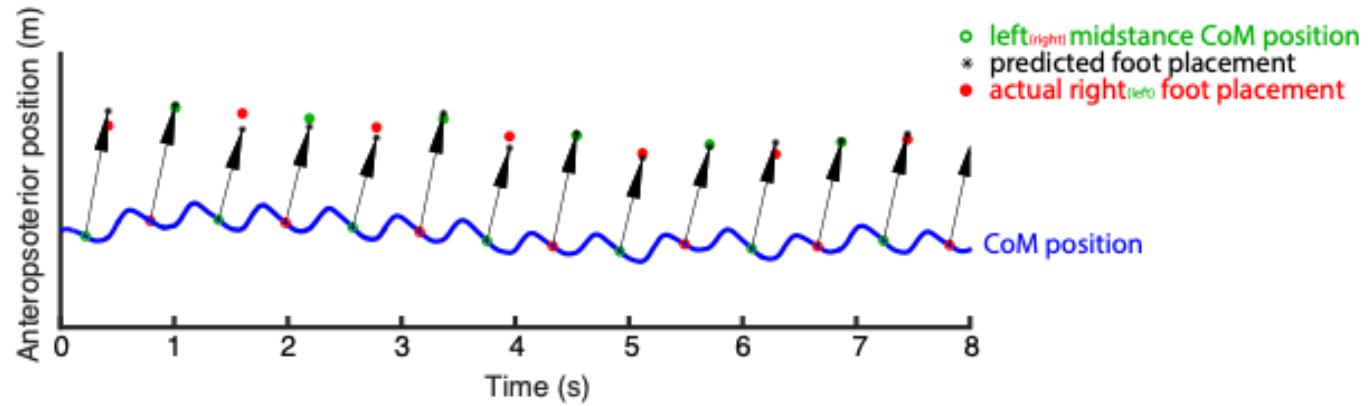


1. Understand the **biomechanical and neural mechanisms that underlie improvements in gait due to training** in people with PD
2. \*Still secret\*
3. \*Still secret\*
4. \*Still secret\*

# Motivation

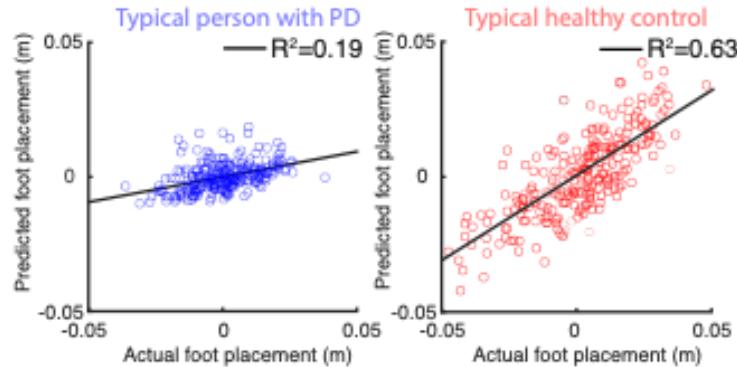
- PD often shows impaired gait (70%) which can cause falls (Allen ea., Parkinsons Dis, 2013)
  - Early stakeholder survey on unmet needs in PD care
- **improving gait and preventing falls**
- 294 people with PD (88% & 88%)
  - 76 family members (91% & 93%), 16 clinicians (88% & 86%) and 29 caregivers (80% & 85%)
- 
- Non-pharmacological interventions can reduce fall risk (Mirelmann ea., Lancet, 2016)
  - Treadmill training (with perturbation) has been proven to improve mobility

# Biomechanical aspects of walking in PD

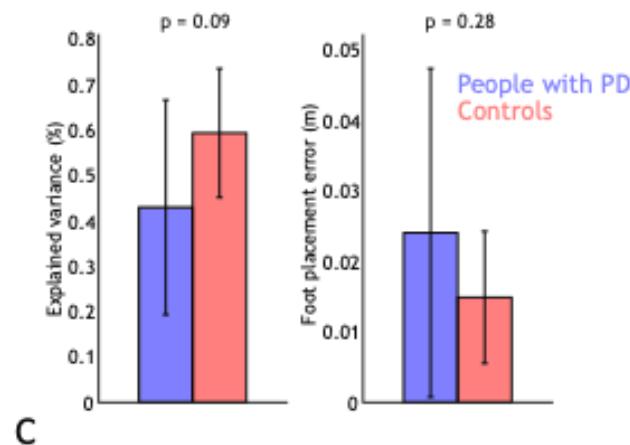


A

$$\text{foot placement} = \beta_1 \cdot P_{\text{CoM}} + \beta_2 \cdot v_{\text{CoM}} + \varepsilon$$



B

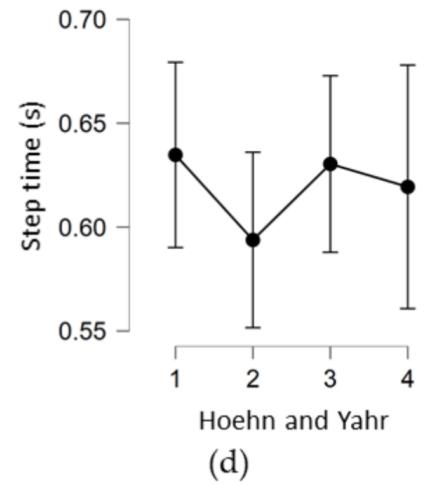
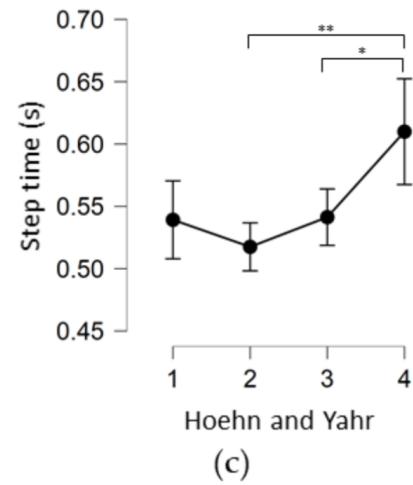
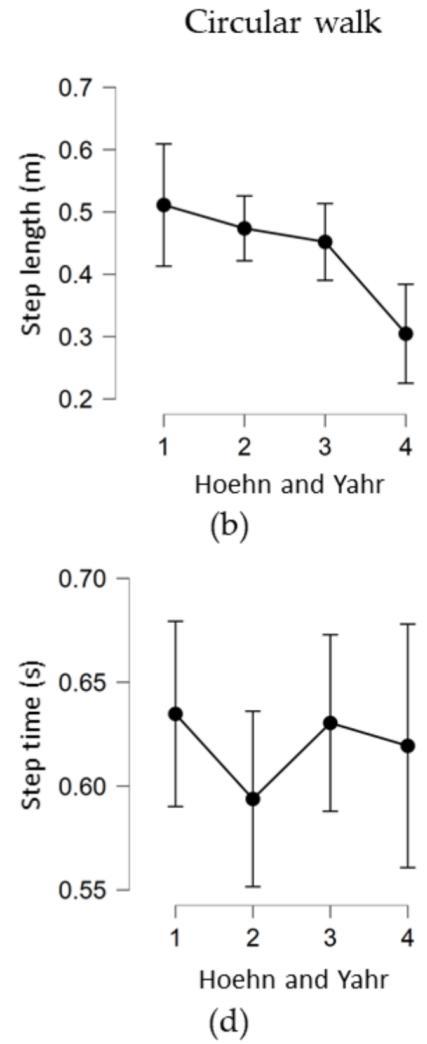
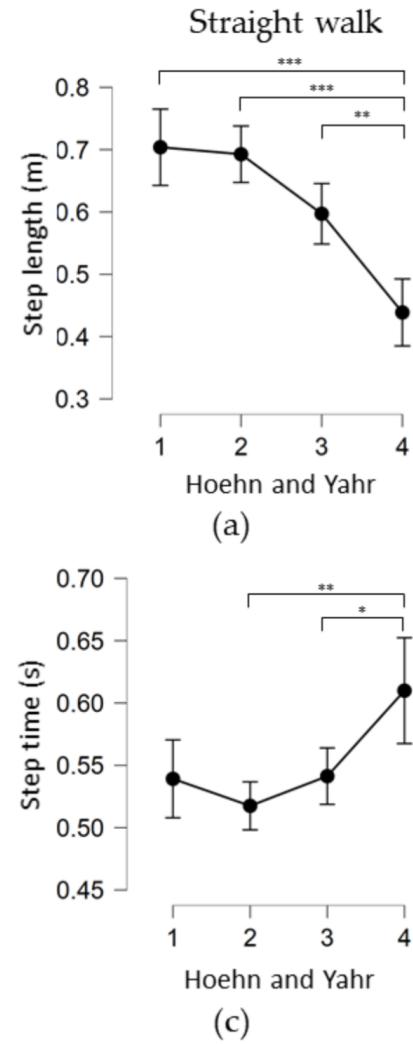


C

- Centre of mass must be repositioned with every step taken
- PD patients show worse adaptation of centre of mass correction while walking

# Gait as a progression marker in PD

- Quantitative gait parameters decrease with more severe PD stages
- Different types of walking are affected differently
- Different aspects of walking show heterogenic results



# Effects of Exercise on Falls, Balance, and Gait Ability in Parkinson's Disease: A Meta-analysis

| Shen ea., Neurorehabilitation and Neural Repair, 2016

- “[...] Determine the effects of exercise training on the enhancement of balance and gait ability and reduction in falls for people with PD and to investigate potential factors contributing to the training effects on balance and gait ability of people with PD [...]”.
- 25 RCTs
- **exercise training** against no intervention and placebo intervention
- Effects on **balance** and **gait** performance and **falls**

# Effects of Exercise on Falls, Balance, and Gait Ability in Parkinson's Disease: A Meta-analysis

| Shen ea., Neurorehabilitation and Neural Repair, 2016

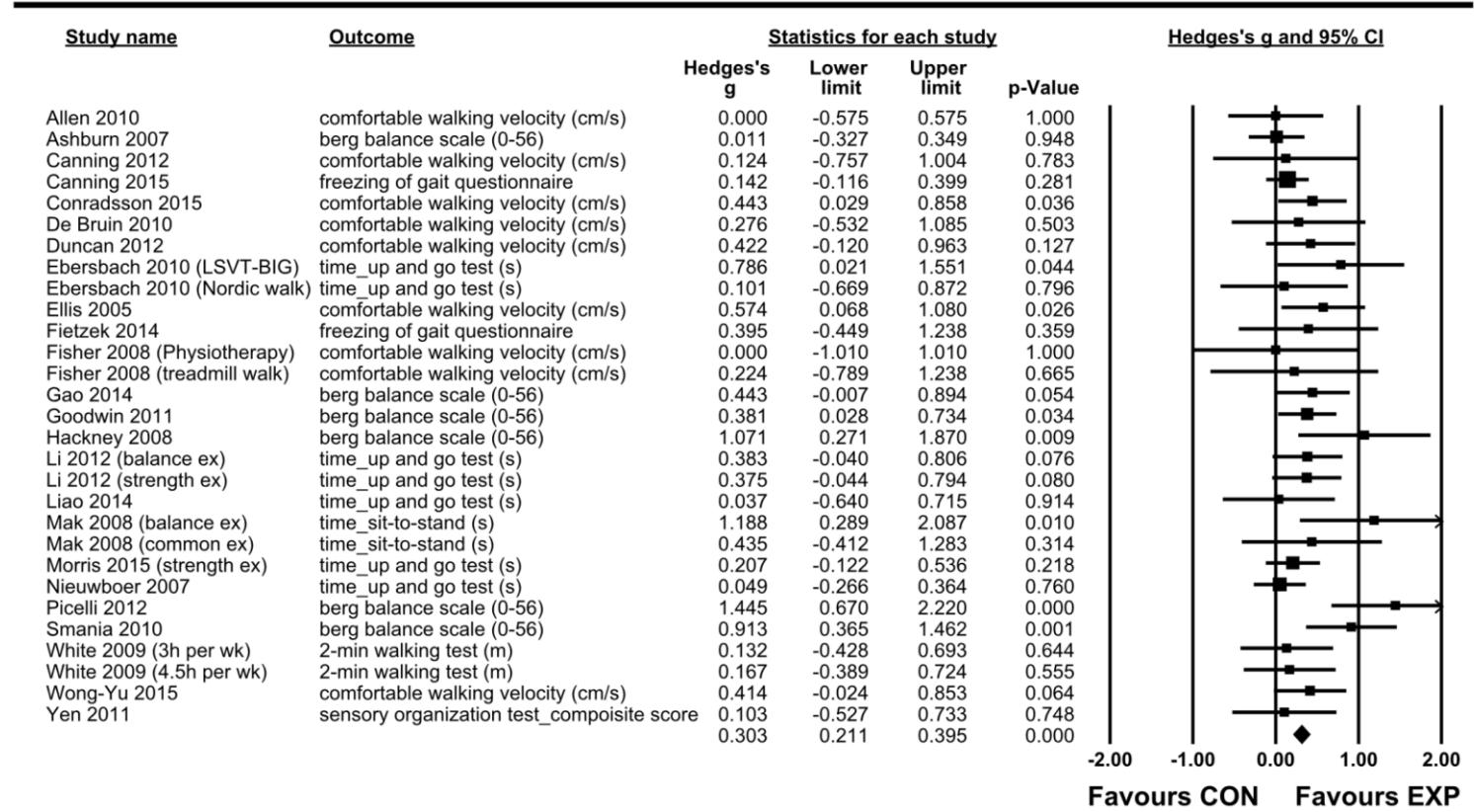
## Balance training:

- control of the body's centre of mass with destabilizing movements and/or while standing on an unstable or small base of support

## Gait training:

- walking exercises over ground or on a treadmill

## A. Effects on postural stability in short-term (n=1881)

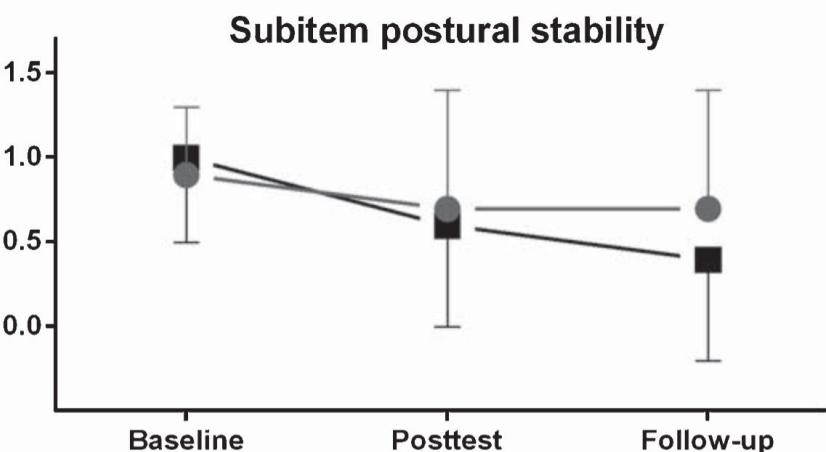
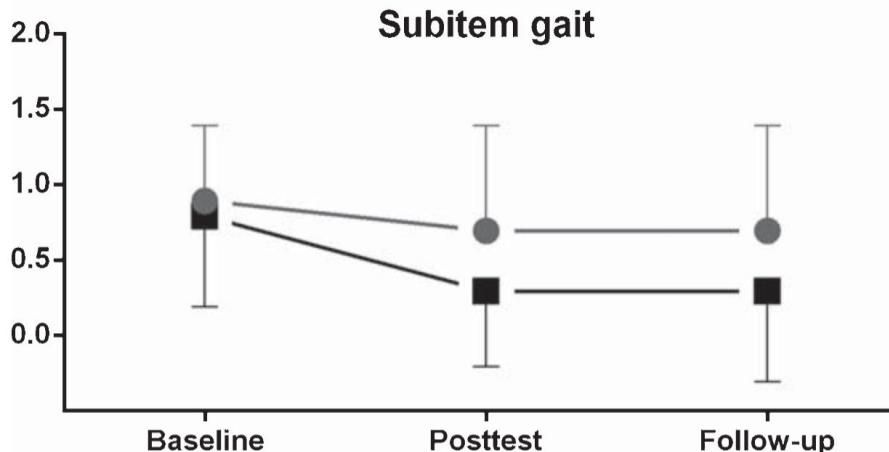
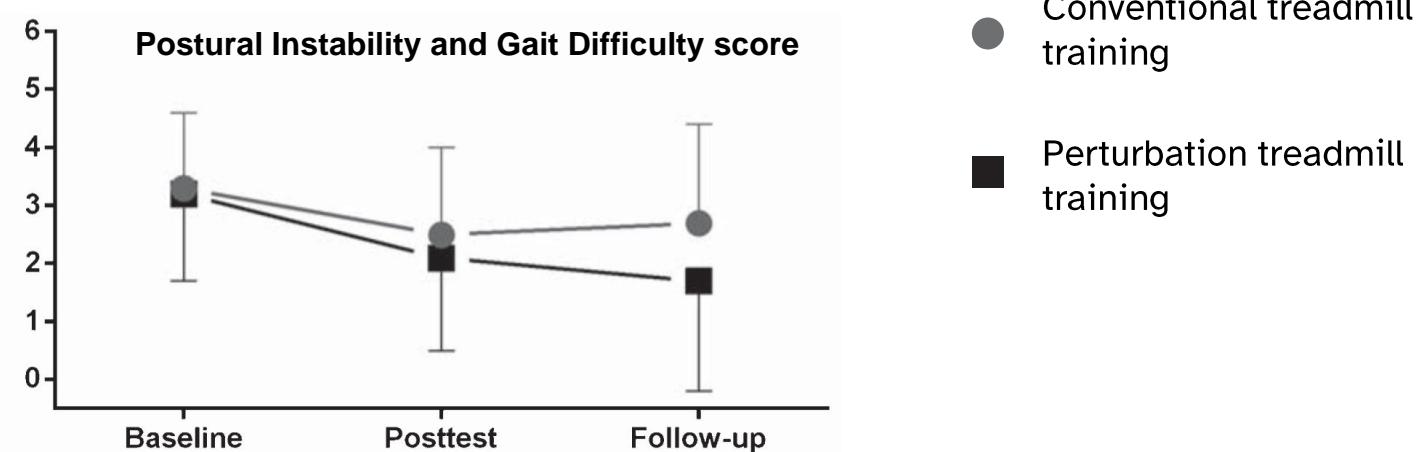
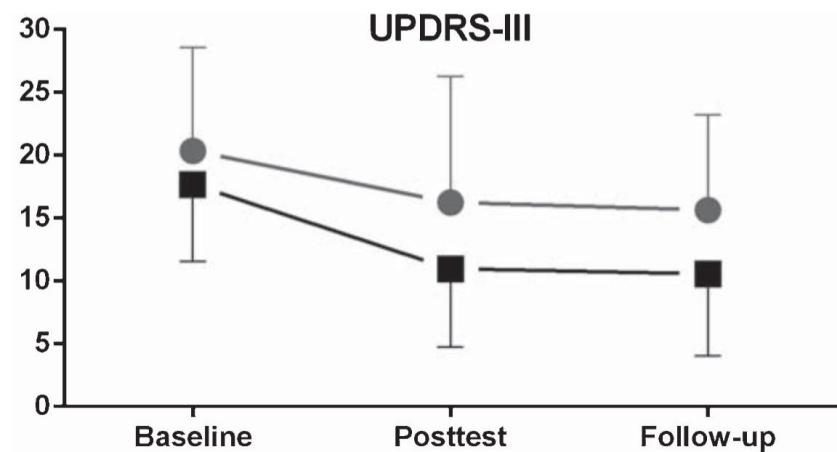


Fixed-effects model of meta-analysis:  $I^2=22\%$ ,  $df=28$ ,  $P>0.05$

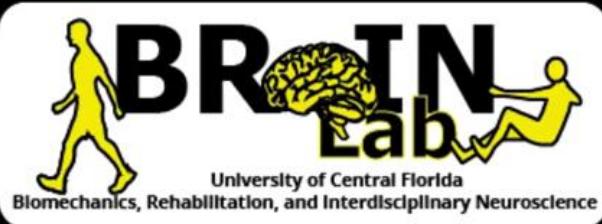
Perturbation Treadmill Training Improves Clinical Characteristics of Gait and Balance in Parkinson's Disease  
| Gaßner ea., Journal of Parkinson's Disease, 2019

- RCT with 43 PD's
- Perturbation Treadmill Training vs conventional Treadmill Training
- Outcomes at Baseline, 8 and 12 weeks after intervention
- Exercise vs. best medical treatment

Perturbation Treadmill Training Improves Clinical Characteristics of Gait and Balance in Parkinson's Disease  
| Gaßner ea., Journal of Parkinson's Disease, 2019



# Treadmill training



## **treadmill walking “slip” perturbations**

**the right belt accelerates from 1.0 m/s to 1.4 m/s at  
right leg mid-stance**

**during adaptation block, perturbations applied each  
stride, except 1 out of 5 is an unperturbed "catch" stride**

**created 05/2020 | Helen J. Huang**

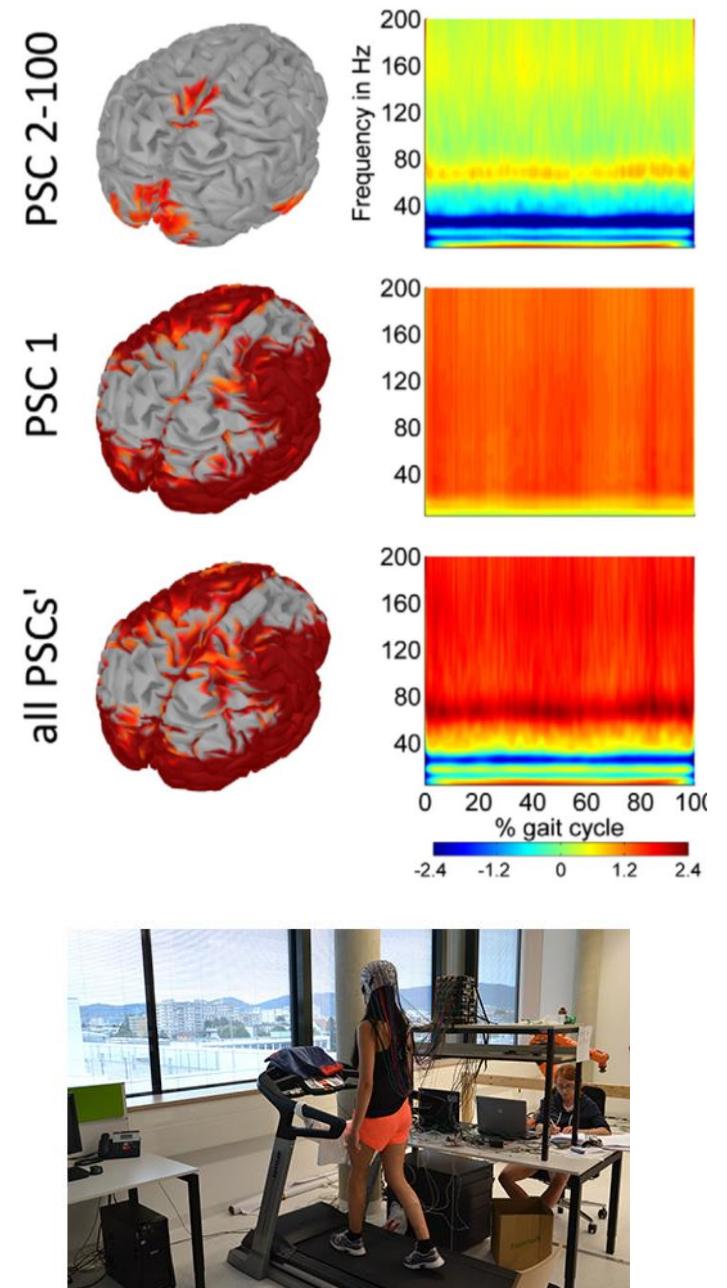
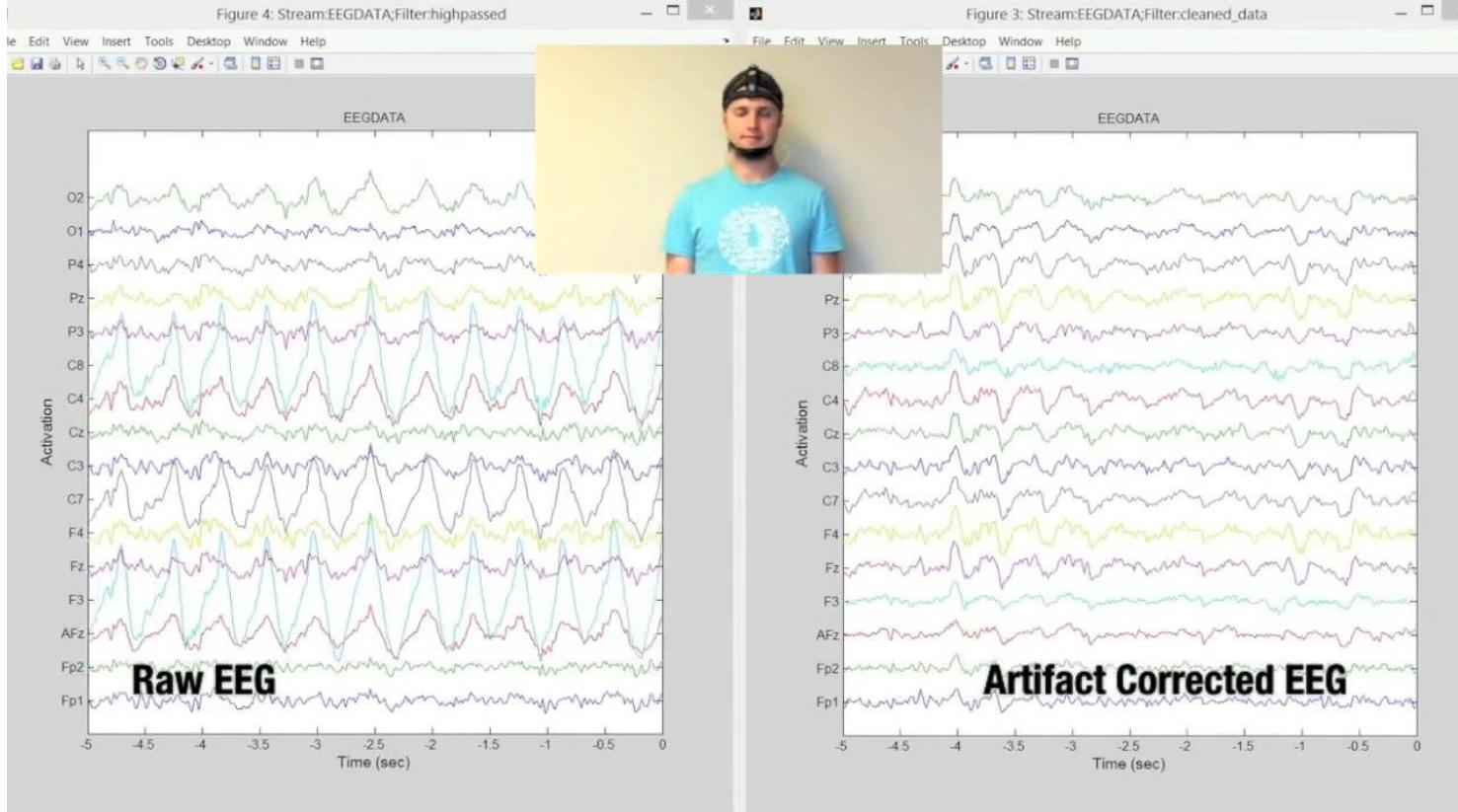
# Recap



- PD patients show impaired gait
- Can be trained → Feedback mechanisms improve
- Treadmill-training holds promising results
- Adding perturbations might be even more effective

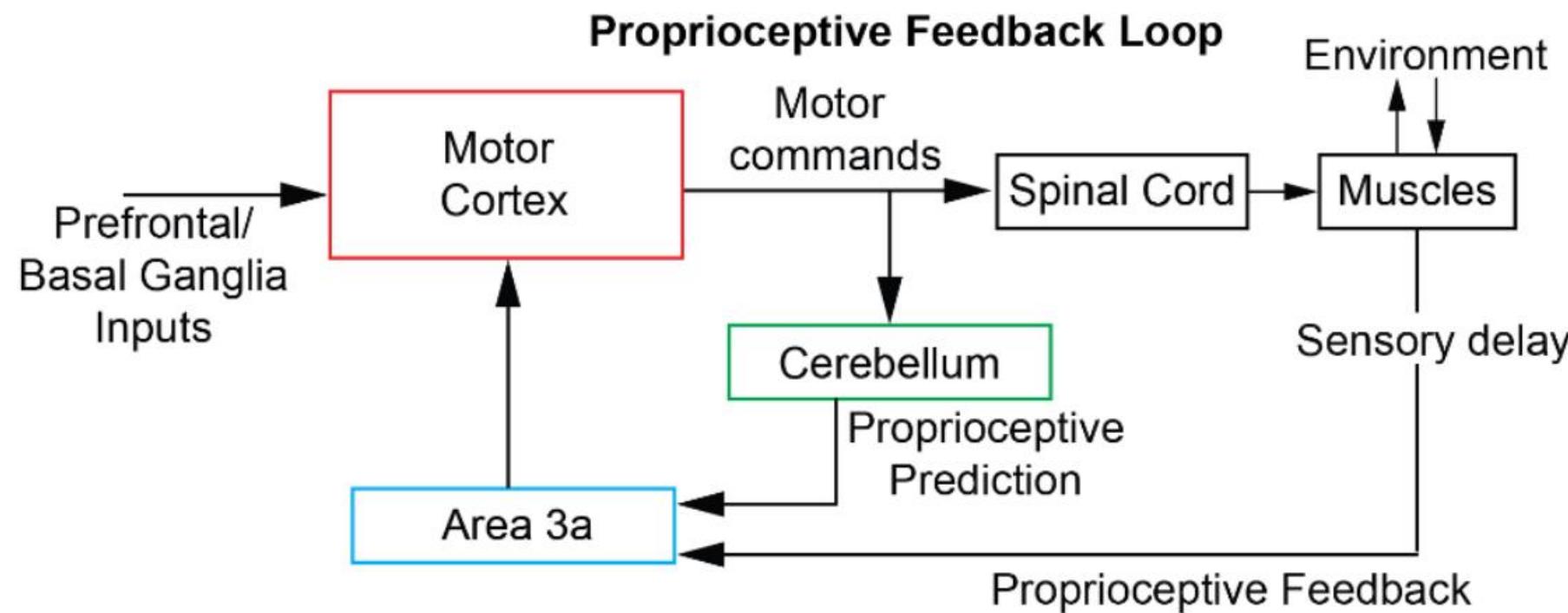
But: How does training work on a neural level?

# "Mobile EEG"



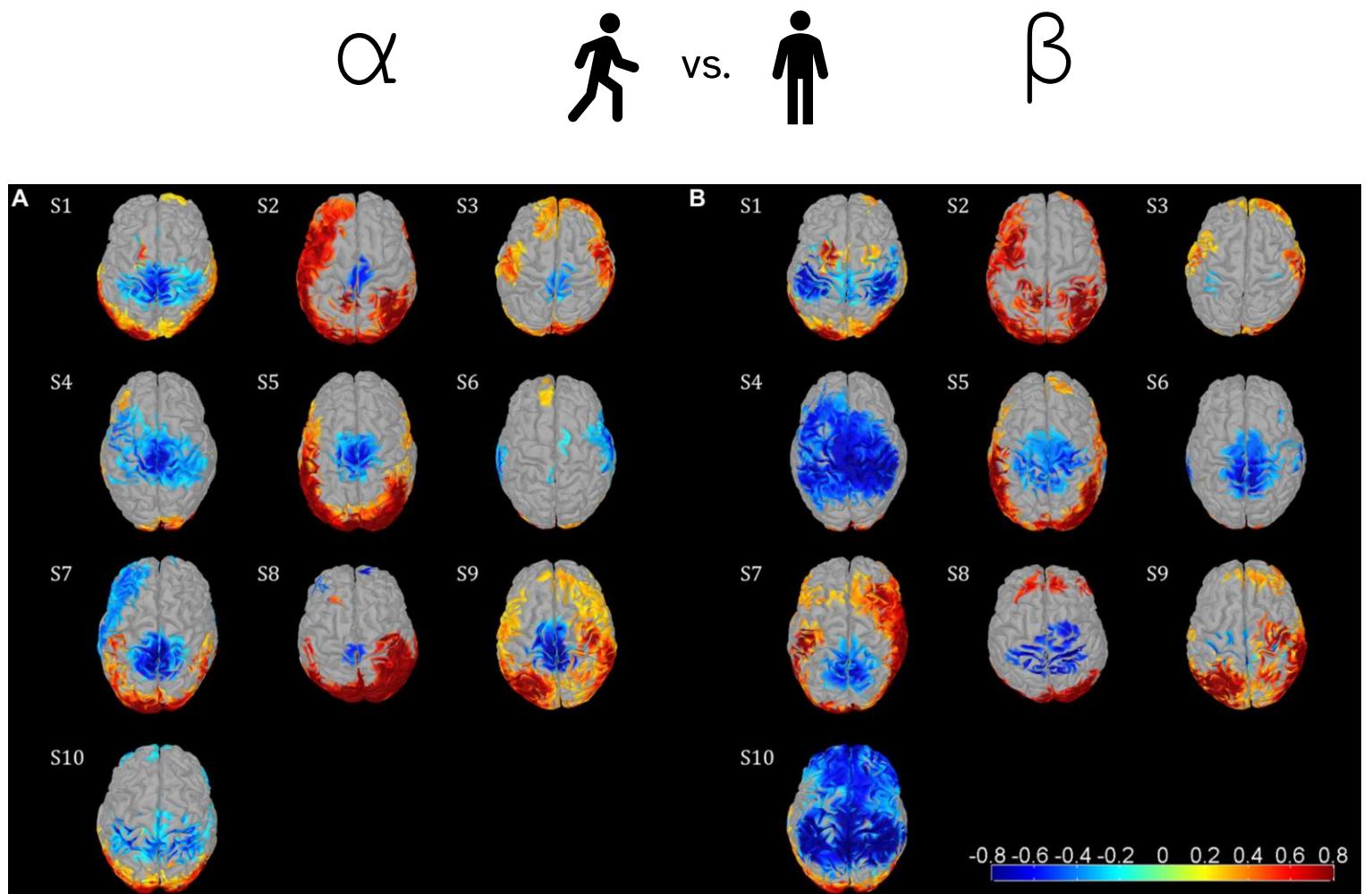
# Dynamical Feedback Control: Motor Cortex as an Optimal Feedback Controller Based on Neural Dynamics |Versteeg ea., bioarXiv, 2022

- M1 as main feedback controller in motor control



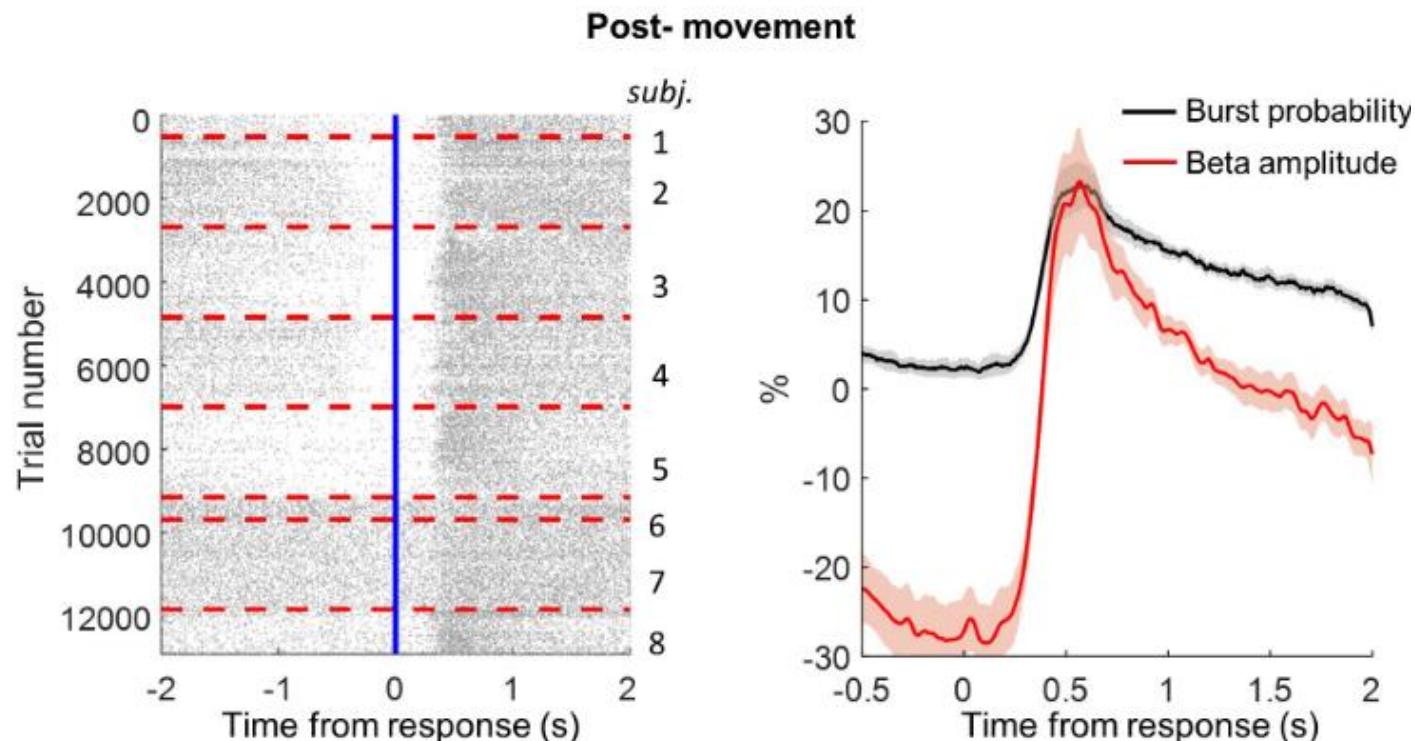
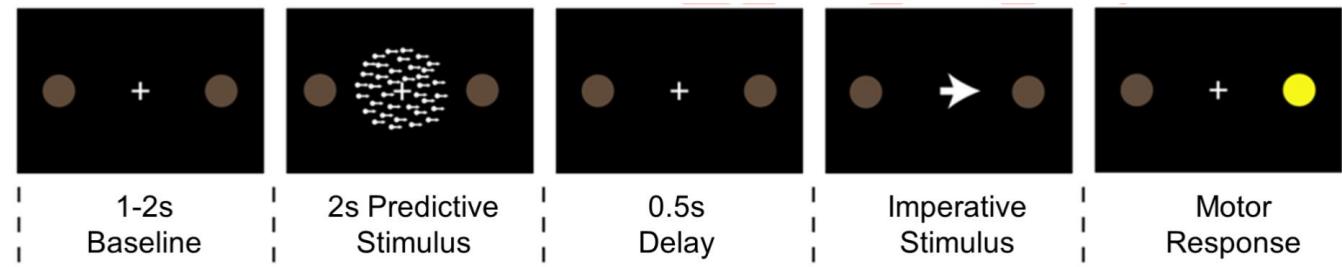
# EEG beta suppression and low gamma modulation are different elements of human upright walking | Seeber ea., Frontiers, 2014

- Mu and beta in M1
- Less event related desynchronisation in more challenging task

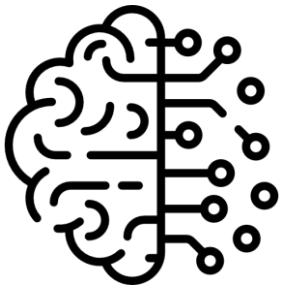


# Human motor cortical beta bursts relate to movement planning and response errors | Little ea., PLOS Biology, 2019

- Error processing on a neural basis
- Beta as significant predictor post movement for error
- Beta bursts are associated with delayed motor initiation and correct responses

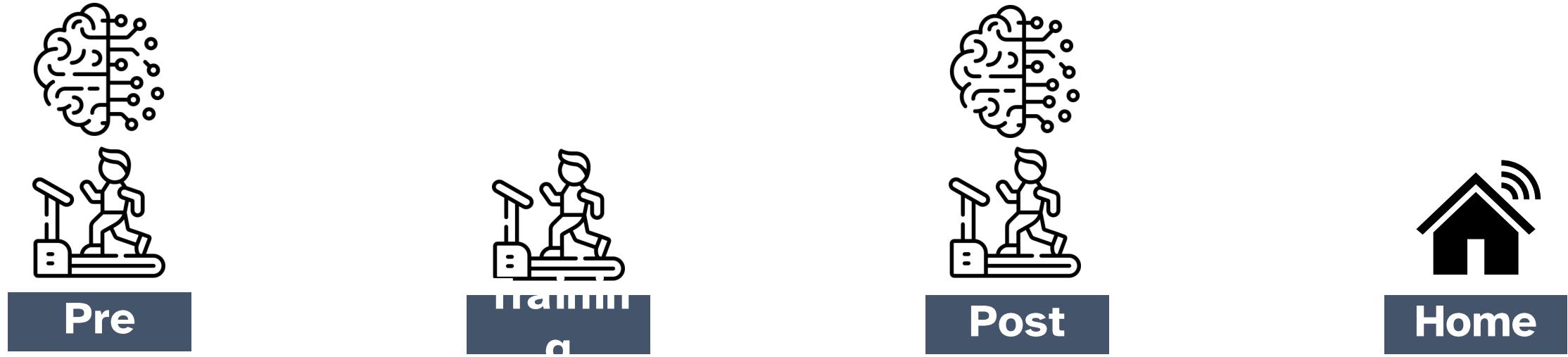


# Recap



- Mobile EEG is very possible
  - Cortical involvement in motor control (M1) as feedback controller
  - Beta band is involved in motor tasks like walking and error processing
- Unclear how unsuccessful walking looks like in the brain and what changes after training

# What is the best treadmill training

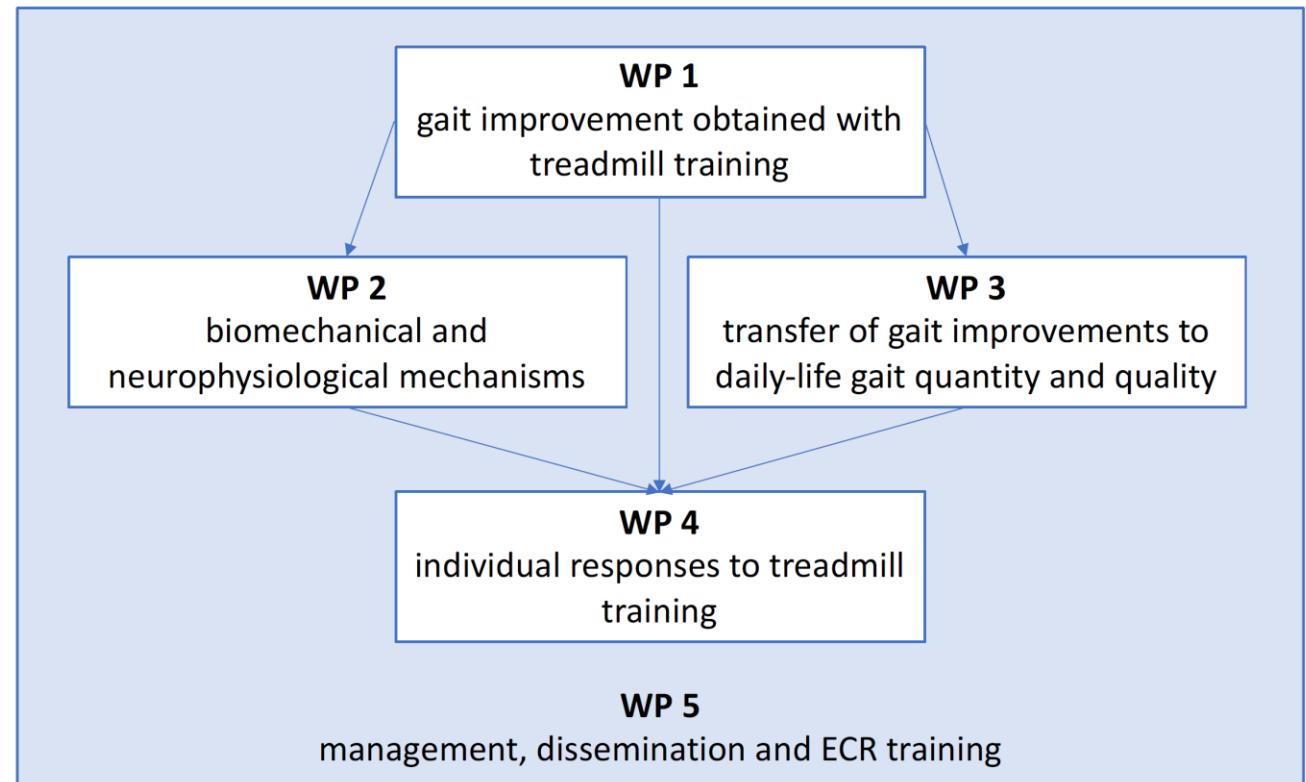


Center	Training intervention	control	duration
Bologna	Speed-dependent treadmill training (SDTT)	Placebo	4 weeks
Tel Aviv	SDTT + VR-triggered perturbations	SDTT	4 weeks
Sydney	SDTT + multi-directional perturbations	SDTT	4 weeks
Kiel	<b>SDTT + anterior-posterior perturbations</b>	<b>SDTT</b>	<b>2-3 weeks</b>

# StepuP overview

## Secret objectives:

2. Assess to what extent improvements in gait due to treadmill training **transfer to daily life** mobility
  
3. Understand the mechanisms that underpin transfer from improvements in gait to **improvements of mobility in daily life** in people with PD
  
4. Understand **for whom treadmill training does improve lab-based gait characteristics** and for whom it does not and understand for whom treadmill training does **improve mobility in daily life** and for whom it does not.



# Why Kiel?



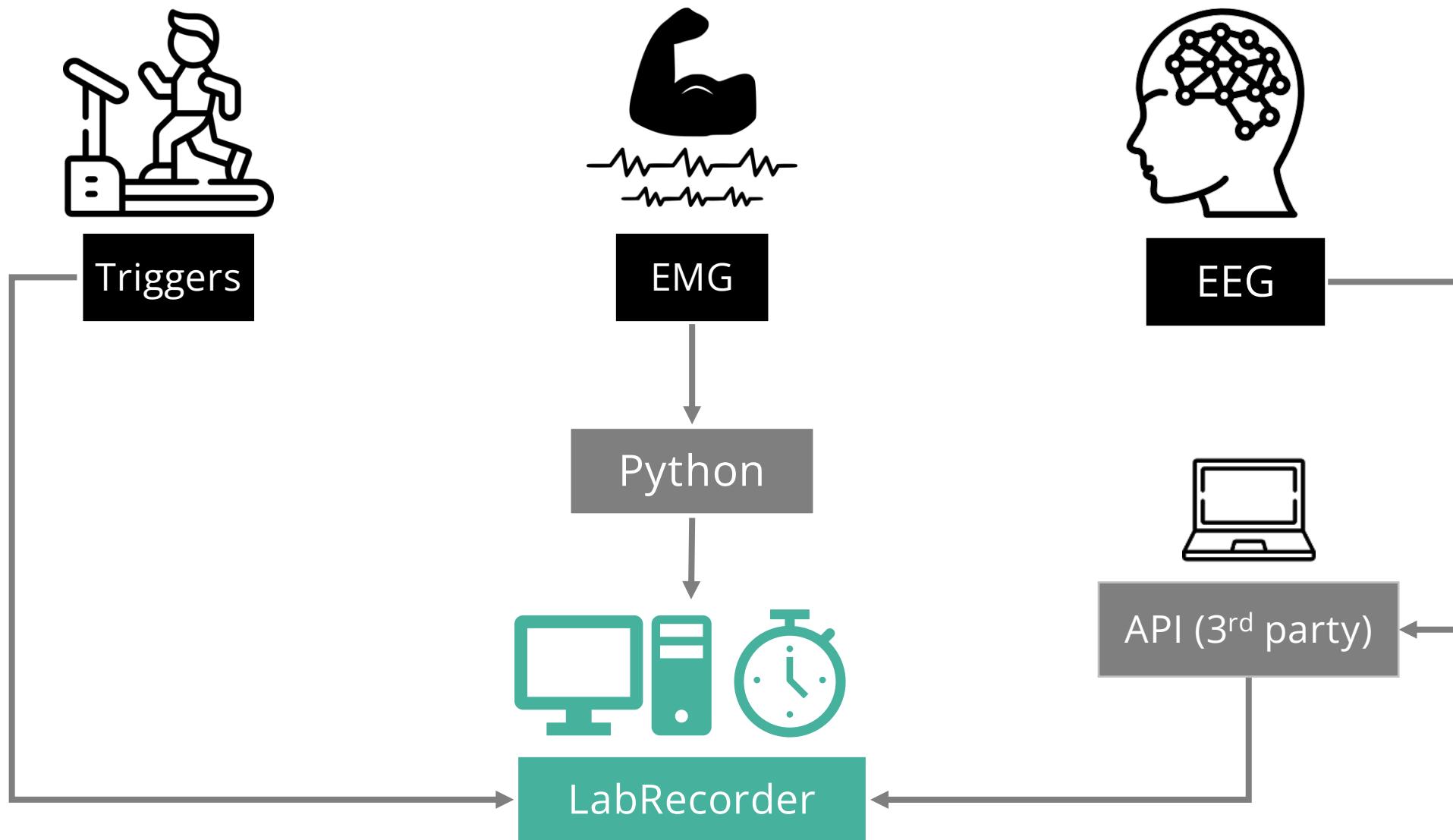
# Building a sustainable lab environment



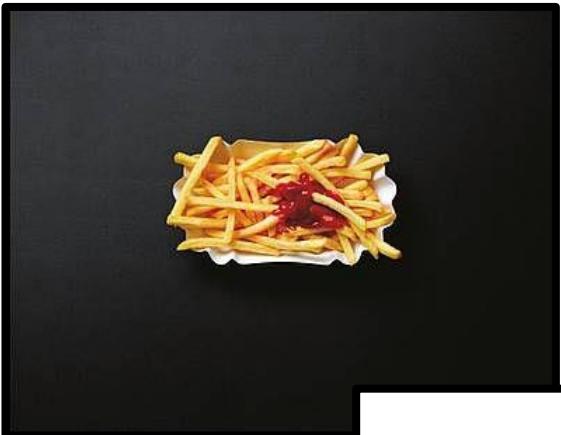
## Open science

- Open software (Lab streaming layer architecture)
- Open data (BIDS)
- Open source (GitHub)

# Open software | Lab streaming layer



# Open data | BIDS



## Example1/

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  ├──eeg/

  ...

  └─motion/

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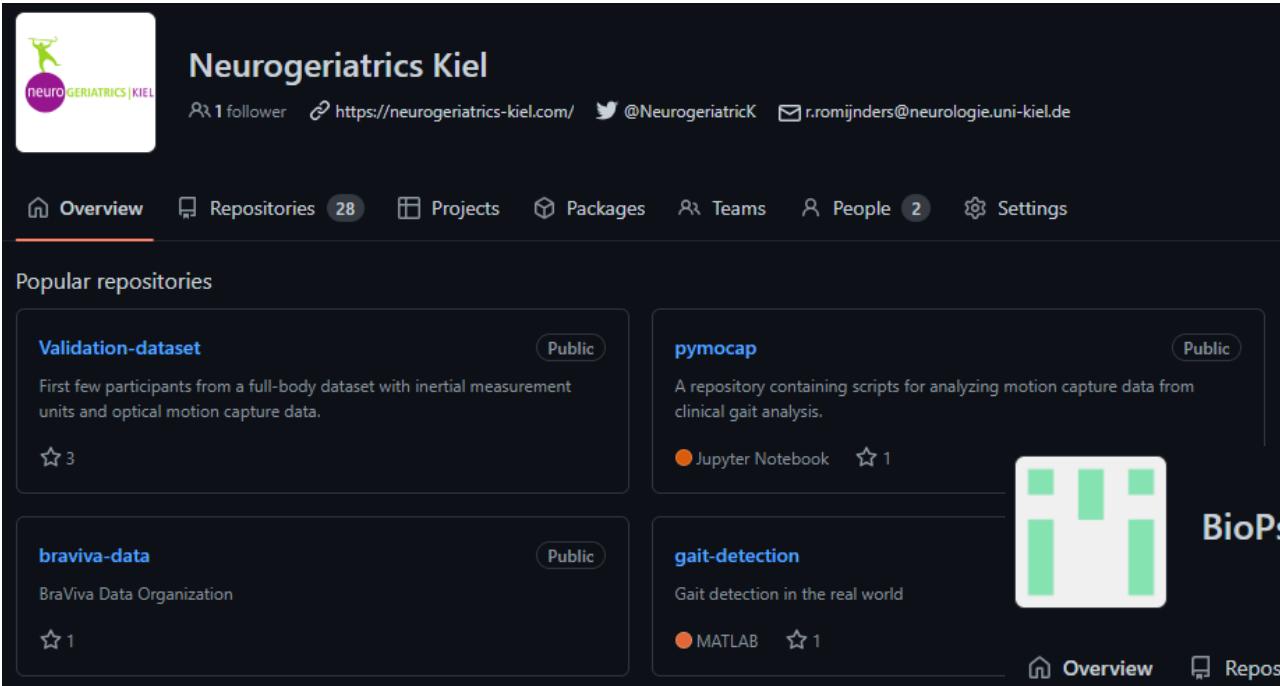
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0,076633595	0,258720111	0,547534792	0,282283781	0,27890791	0,232620594
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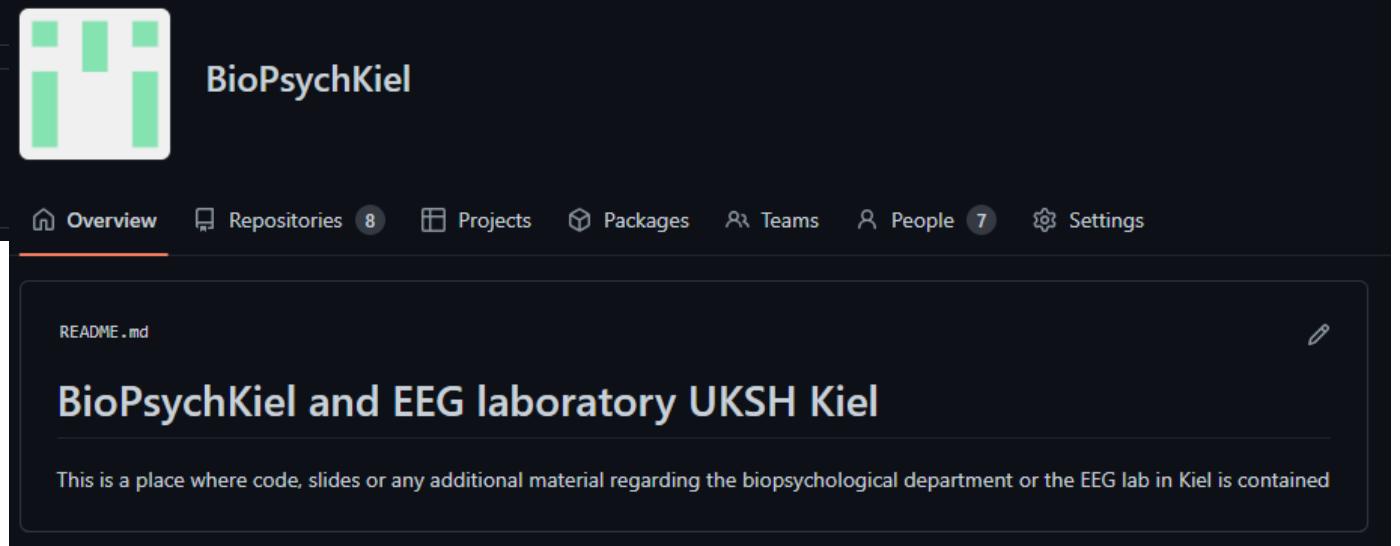
name	type	units	srate	tracked_point	component	placement
imu1_lf_acc_x	ACCEL	m/s^2	222	lf	x	left_foot
imu1_lf_acc_y	ACCEL	m/s^2	222	lf	y	left_foot
imu1_lf_acc_z	ACCEL	m/s^2	222	lf	z	left_foot
imu1_lf_gyro_x	GYRO	rad/s	222	lf	x	left_foot
imu1_lf_gyro_y	GYRO	rad/s	222	lf	y	left_foot
imu1_lf_gyro_z	GYRO	rad/s	222	lf	z	left_foot

# Open source | GitHub



The screenshot shows the GitHub organization page for Neurogeriatrics Kiel. The header includes the organization's logo, name, 1 follower, and contact information. Below the header, there are tabs for Overview, Repositories (28), Projects, Packages, Teams, People (2), and Settings. The Overview tab is selected. A section titled "Popular repositories" displays four repositories:

- Validation-dataset** (Public): First few participants from a full-body dataset with inertial measurement units and optical motion capture data. 3 stars.
- pymocap** (Public): A repository containing scripts for analyzing motion capture data from clinical gait analysis. 1 star. Includes a Jupyter Notebook icon.
- braviva-data** (Public): BraViva Data Organization. 1 star.
- gait-detection**: Gait detection in the real world. MATLAB icon. 1 star.



The screenshot shows the GitHub repository page for BioPsychKiel. The header includes the repository's logo, name, 8 repositories, 7 people, and Settings. Below the header, there are tabs for Overview, Repositories (8), Projects, Packages, Teams, People (7), and Settings. The Overview tab is selected. A section titled "README.md" contains the following text:

README.md

## BioPsychKiel and EEG laboratory UKSH Kiel

This is a place where code, slides or any additional material regarding the biopsychological department or the EEG lab in Kiel is contained

Thanks to all ☺



**Kiel:** Neuro-Klinik, Walter, Hanna, Jenni, Markus, Clint, Prof. Berg, Prof. Deuschl, Jos

### StepuP partners

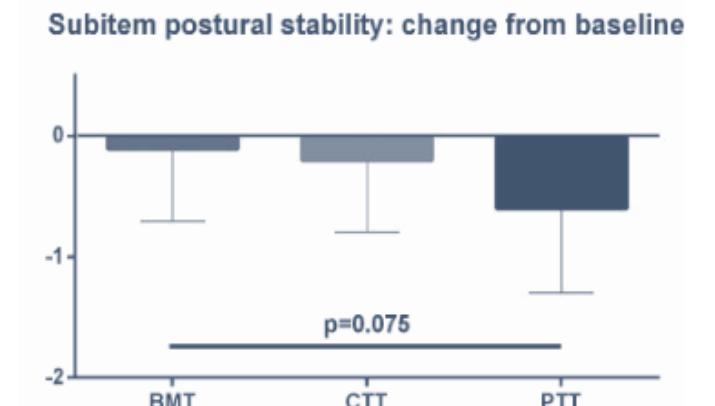
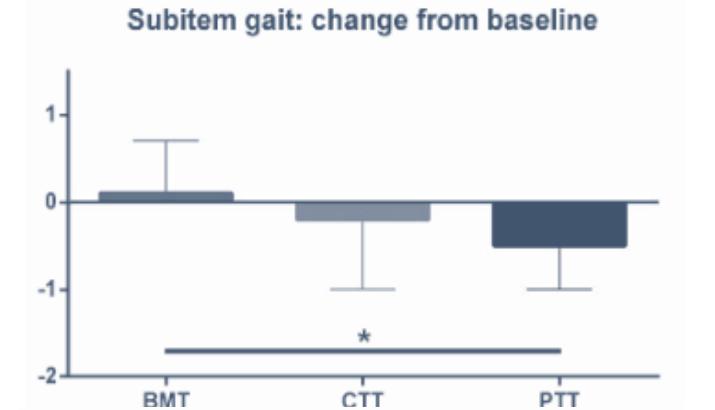
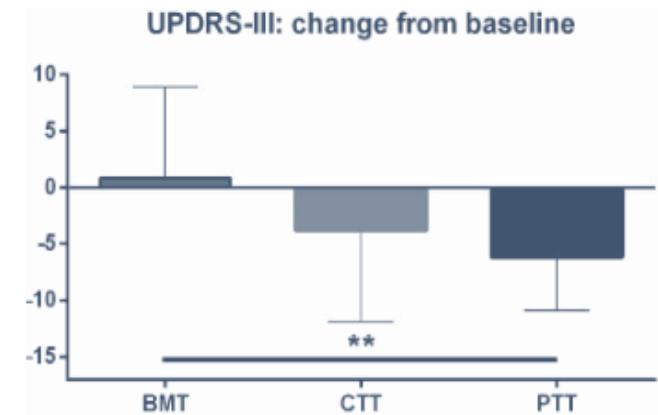
- **Amsterdam** team: Prof. Jaap van Dieën (coordinator), Dr Bernadette van Wijk and Dr Sjoerd Bruijn
- **Sydney** team: Dr Matthew Brodie, Prof. Nigel Lovell, Dr Martin Ostrowski, Prof. Daniel Chan
- **Tel Aviv** team: Prof. Jeff Hausdorff, Prof. Nir Giladi, Dr Talia Herman
- **Bologna** team: Dr Fabio La Porta, Prof. Pietro Cortelli, Prof. Giovanna Calandra Buonaura, Prof. Lorenzo Chiari and Dr Luca Palmerini
- **Zürich** team: Dr Navrag Singh and Dr Deepak Ravi

Additional slides

# Perturbation Treadmill Training Improves Clinical Characteristics of Gait and Balance in Parkinson's Disease

| Gaßner ea., Journal of Parkinson's Disease, 2019

- Significant overall symptom improvement
  - Gait and Balance might be different training
- Translation to everyday life



# Studies on treadmill training (with perturbations)

- Mak MK, Wong-Yu IS, Shen X, Chung CL. **Long-term effects of exercise and physical therapy in people with Parkinson disease.** Nat Rev Neurol 2017
- Shen X, Wong-Yu IS, Mak MK. **Effects of Exercise on Falls, Balance, and Gait Ability in Parkinson's Disease: A Meta-analysis.** Neurorehabil Neural Repair 2016
- Gassner H, Steib S, Klamroth S, Pasluosta CF, Adler W, Eskofier BM, Pfeifer K, Winkler J, Klucken J. **Perturbation Treadmill Training Improves Clinical Characteristics of Gait and Balance in Parkinson's Disease.** J Parkinsons Dis 2019

# Studies on cortical oscillations (during walking)

- Link between sensorimotor integration during gait and cortical activity in the sensorimotor and pre-motor areas  
→ (Seeber, M., Scherer, R., Wagner, J., Solis-Escalante, T., & Müller-Putz, G. R. **EEG beta suppression and low gamma modulation are different elements of human upright walking.** Front Hum Neurosci 2014.)
- Motor cortex plays a key role in feedback control of gait  
→ (Bruijn SM, van Dieën JH, Daffertshofer A. **Beta activity in the premotor cortex is increased during stabilized as compared to normal walking.** Front Hum Neurosci 2015)
- Increased beta band activity during gait in people with PD suggests compromised cortical control of gait  
→ (Allali G, Blumen HM, Devanne H, Pirondini E, Delval A, Van De Ville D. **Brain imaging of locomotion in neurological conditions.** Neurophysiol Clin 2018) & (Tosserams A, Weerdesteyn V, Bal T, Bloem BR, Solis-Escalante T, Nonnekes J. **Cortical Correlates of Gait Compensation Strategies in Parkinson Disease.** Ann Neurol 2022)

