

The 1st Queen Square Movement Disorders Short Course

Learning objectives

| Learning Objectives | |
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| | On completion of this session the participant will be able to |
| Parkinson's disease – What is it and what causes it? | <ol style="list-style-type: none"> 1. Apply basic understanding of PD pathogenesis to clinical and research setting 2. Understand how to modify progression in PD |
| How to manage early PD? | <ol style="list-style-type: none"> 1. Diagnose a patient presenting with symptoms suggestive of PD in the clinic or on the ward using clues of clinical presentation, and differential diagnosis. To be able to plan investigations for patients with PD 2. Choose management options (including oral Levodopa) for early PD 3. Recognise common non-motor features in PD and advise symptomatic treatment. |
| How to manage advanced PD? | <ol style="list-style-type: none"> 1. Select a patient for appropriate medical therapy, DBS, Duo-dopa and Apomorphine 2. Diagnose fluctuations, dyskinesia, freezing, falls, and motor fluctuations and adjust medication 3. Recognise cognitive decline, sleep problems, behavioural abnormalities and other non-motor features and make appropriate referrals |
| Atypical Parkinsonism | <ol style="list-style-type: none"> 1. Identify atypical parkinsonism 2. Diagnose MSA, PSP and CBD with reasonable confidence and understand common red flags and red herrings. |
| What is Dystonia and how to manage it? | <ol style="list-style-type: none"> 1. Diagnose patient with dystonia and classify the phenotype (using the new axis-based classification scheme) |

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| | <ol style="list-style-type: none"> 2. Identify unusual presentations in dystonia 3. Plan investigations for a case with Dystonia 4. Initiate medical treatment for dystonia 5. Discuss Botulinum toxin treatment and options of DBS in suitable cases |
| Neurogenetics of Movement disorders | <ol style="list-style-type: none"> 1. Take a good family history in a patient with movement disorders 2. Plan correct genetic tests for specific presentation 3. Apply an understanding of neurogenetics to clinical setting |
| How to diagnose and manage tremor? | <ol style="list-style-type: none"> 1. Diagnose patient with tremor and classify the phenotype (using the new classification scheme) 2. Identify unusual tremors 3. Plan investigations and initiate medical treatment for tremor 4. Discuss Botulinum toxin treatment and options of DBS in suitable cases |
| Movement disorders video session | <ol style="list-style-type: none"> 1. Assess a patient with movement disorders in clinic or on wards 2. Examine and look for relevant signs in a case with movement disorders 3. Identify clinical clues and apply them to the diagnosis 4. Formulate a differential diagnosis for a specific combination of clinical features (e.g. Dystonia and deafness) |
| How to diagnose and manage Hereditary ataxias | <ol style="list-style-type: none"> 1. Approach a patient with ataxia in clinic and classify the phenotype 2. Diagnose common hereditary ataxias and send appropriate genetic tests 3. Make an investigation plan for ataxia including investigations for secondary and unusual ataxias |

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| Neuropathology of Parkinsonism | <ol style="list-style-type: none"> 1. Apply an understanding of pathological differences and similarities in parkinsonism to clinical practice 2. Make appropriate and timely referrals to the brain bank |
| Tics and Tourette's | <ol style="list-style-type: none"> 1. Diagnose patient with Tics and identify Tourette's and other causes of tics 2. Plan investigations for a case with tics 3. Initiate a treatment plan for tics with medication and behavioural therapy |
| Functional Movement Disorders | <ol style="list-style-type: none"> 1. Diagnose a patient with functional movement disorders in clinic and wards 2. Discuss the diagnosis of FMD and discuss management with a patient and their family |
| Workshop 1 DBS planning – identifying the patients to refer and initial programming in PD for beginners | <ol style="list-style-type: none"> 1. Identify the correct PD patients for DBS 2. Set up initial programming of DBS in a specialist DBS unit setting (only) 3. Assess a patient who has had DBS in neurology clinic and answer specific queries about malfunctions and complications related to DBS and delegate appropriately to nurse/ DBS service |
| Workshop 2 Botulinum toxin injections workshop | <ol style="list-style-type: none"> 1. Identify the correct patients for Botulinum toxin injections 2. Formulate injection plan for a patient with dystonia 3. Identify and try to prevent complications related to injections |