Cross-Sectional


Prospective - Cross-Sectional

2012.

Peralta, et al.

Supplementary Table 1: A Summary of the Direct Evidence Papers Reporting on the Association between Orthostatic Hypotension and Cognitive Impairment in Alpha-Synucleinopathies

M)

89 PD patients

87 Korean patients
disease duration 5.7 y, mean PD duration 16.1 y, mean H&Y 2.6.

Neuropsych
delayed recall compared to those without OH. There was no difference in postural BP between groups. However, patients with OH + SH had significantly lower postural BP than those without OH.

Ages and disease duration unreported

To investigate motor and cognitive function and to test the hypothesis that motor and cognitive function of stability - 5 cognitive items.

M) with disease duration under 5 years.

32

(27

85

Patients with MMSE <24

(17 M)

(18 M) age-

18 patients with PD M, mean age 61.3 y, mean PD duration 61.3 y, mean H&Y 2.7.

22 patients without OH M, mean age 55.7 y, mean PD duration 11.6 y, mean H&Y 2.2.

22 patients with OH M, mean age 65.4 y, mean PD duration 11.4 y, mean H&Y 2.05.

22 patients with OH M, mean age 55.0 y, mean PD duration 10.3 y, mean H&Y 1.8.

22 patients with OH M, mean age 65.4 y, mean PD duration 11.4 y, mean H&Y 2.4.

22 patients with OH M, mean age 61.3 y, mean PD duration 61.3 y, mean H&Y 2.7.

22 patients without OH M, mean age 60.5 y, mean PD duration 60.5 y, mean H&Y 2.7.

22 patients with OH M, mean age 60.5 y, mean PD duration 60.5 y, mean H&Y 2.7.

22 patients with OH M, mean age 59.5 y, mean PD duration 69.5 y, mean H&Y 2.4.

22 patients with OH M, mean age 65.4 y, mean PD duration 65.4 y, mean H&Y 2.6.

22 patients with OH M, mean age 62.6 y, mean PD duration 62.6 y, mean H&Y 2.6.

22 patients with OH M, mean age 63.4 y, mean PD duration 63.4 y, mean H&Y 2.1.

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Cross-Sectional 79 patients without OH: 41 M, mean age 69.1 y, median PD duration 5 y, median 17.

Cross-Sectional 88 patients without OH: 46 M, mean age 69.2 y, median PD duration 5 y, median UPDRS 17.

Cross-Sectional 87 patients with OH: 63 M, mean age 72.4 y, median PD duration 3.5 y, median UPDRS 18.5.

Allcock, et al. 2006. 175 PD patients (109 M) recruited from community based PD cohort and hospital PD clinic. PD patients w/ dementia included.

To compare the neuropsychological profile of PD patients with OH compared with those without OH and determine if PD patients with OH have evidence of more diffuse Lewy body pathology.

79 patients with OH: 63 M, mean age 72.4 y, median PD duration 3.5 y, median UPDRS 18.5.

88 patients without OH: 46 M, mean age 69.2 y, median PD duration 5 y, median UPDRS 17.

PD patients with OH performed worse on digit vigilance and picture recognition tasks than those without OH, although there was no difference in MMSE scores between these groups. Patients with OH were older and on a higher total levodopa dose.

Cross-Sectional N/A

PD patients with OH were older and more likely male than those without OH. Comparing OH+ to OH- patients, there was no difference in duration of PD, UPDRS, co-morbid vascular disease or medications that cause cognitive impairment. The OH+ group had higher total levodopa equivalent dose. MMSE scores were not different between OH+ and OH- groups.

Adjusted for age and dose of dopamine, OH+ patients were less accurate in digit vigilance test and visual episodic memory worse. These differences persisted when patients with MMSE <24 excluded.

159 PD patients (97 M)

To describe and compare clinical features of patients with PD with and without OH.

MMSE and tests from Cognitive Drug Research computerized assessment (attention, executive function, working memory, verbal memory and visual memory domains assessed).

Postural BP: Measured after 10 minutes supine then 3 minutes standing. OH defined as drop of >/= 20 mmHg in sBP or sBP of <90 mmHg.

Patients with OH were older and more likely male than those without OH. There was no difference in disease duration or severity between groups. Patients with OH were taking higher levodopa dose equivalent than those without OH.

There was no difference in MMSE scores in patients with and without OH. Patients with OH were taking higher levodopa dose equivalent than those without OH.

Allcock, et al. 2006. Yes

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