GOPI YOPD Data Form

Section 1 of 10

GOPI YOPD Data Collection

A PRAI - MEDGENOME Research Initiative

Untitled Title

Description (optional)

After section 1

Section 2 of 10

Continue to next section

Institute Details

Description (optional)

Questions Responses 778

Section 3 of 10

Demographics of the Subject

Description (optional)

Subject ID (Give a sequential number as per collection at your center, start from 001

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Short answer text

Type of Case

Other…

Sporadic Parkinson's Disease Familial Parkinson's Disease

Unaffected Relative of Familial Parkinson's Disease

Unaffected Relative of Sporadic Parkinson's disease

Family ID (In case multiple samples belong to one Family)

Short answer text

Date of Birth

Month, day, year

Age

Short answer text

Marital Status

Other…

Single

Married

Contact Address

Long answer text

Native by birth / Family background

Other…

North Indian East Indian South Indian

West Indian

State to which Your Paternal Family belongs

Short answer text

State to Which your Maternal Family Belongs?

Educational Level

No formal Schooling

Primary School (upto 6th Std)

Secondary / High school School (upto 10th std) Upto 10+2

Undergraduate

Post Graduate or Higher Unknown

Consanguineous Parentage

Yes No

Unknown

After section 3

Section 4 of 10

Continue to next section

Clinical Symptoms Details

Description (optional)

Date of Medical History Collection

Month, day, year

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Year of Clinical Diagnosis

Short answer text

Average Duration of Motor Symptoms (in months)

Short answer text

After section 4

Section 5 of 10

Continue to next section

Diagnostic Features

Description (optional)

Age at the Onset of Motor Symptoms

Short answer text

Family History of Parkinson's Disease

Bradykinesia

Present Absent

Unknown

Rigidity

Present Absent

Unknown

Asymmetric Onset

Present

Side of Body of Initial Symptoms

Right Left Bilateral Midline

Unknown

Good Response to Dopaminergic therapy

Present Absent

Unknown



Questions Responses 778

Section 6 of 10

Motor Features

Symptoms status at the time of collection of data. Any symptoms present previously and treated is also considered as present

Tremor

Present Absent

Unknown

Distrubance in Dexterity

Present Absent

Unknown

Dystonia

Present Absent

Stiffness

Present Absent

Unknown

Micrographia

Present Absent

Unknown

Change in Facial expression

Present Absent

Freezing

Present Absent

Unknown

Shuffling Gait

Present Absent

Unknown

Falls

Present Absent

Leg dragging

Present Absent

Unknown

Abnormal Posture

Present Absent

Unknown

Has Patient developed Dyskinesia due to Levodopa

Yes

No

Type of Levodopa Induced dyskinesia

Other…

Peak dose Biphasic

OFF dystonia (early morning)

After section 6

Section 7 of 10

Continue to next section

Non Motor Features

Symptoms status at the time of collection of data. Any symptoms present previously and treated is also considered as present

Apathy

Present

Absent

Unknown

Panic Attacks

Present Absent

Unknown

Depression

Present Absent

Unknown

Hallucinations / Delusions / Illusions

Present

Absent

Unknown

Light Headedness / Dizziness / Blackout

Present Absent

Unknown

Orthostatic hypotension

Present Absent

Unknown

Constipation

Present Absent

Unknown

Absent

Sexual Dysfunction (Abnormal increased/ decreased; Performance issues)

Present Absent

Unknown

Excessive sweating

Present Absent

Unknown

Seborrhea

Present Absent

Unknown

Does Patient Doze off or fall asleep unIntentionally during day time activities

Present Absent

Unknown

Difficulty in Falling asleep or staying asleep?

Present Absent

Unknown

RBD

Present Absent

Unknown

Periodic leg movements in sleep

Present Absent

Unknown

Excessive Day time sleepiness

Present Absent

Unknown

Hyposmia

Present Absent

Unknown

Decreased Visual motion perception

Present Absent

Unknown

Abnormal Sensations

Present Absent

Unknown

Pain

Present Absent

Unknown

After section 7

Section 8 of 10

Continue to next section

Treatment History

Description (optional)

Tick all the Medications Which has been given till date

Levodopa (Regular formulations) Levodopa (CR formulations) Pramipexole

Ropinirole Piribedil Amantadine Trihexyphenidyl Selegiline Rasagiline

Adverse Effect of Medications (Tick all the Medications Which have caused adverse effects till

Levodopa (Regular formulations) Levodopa (CR formulations) Pramipexole

Ropinirole Pirebedinil Amantadine

Current Medications (Tick all the Medications Which are being consumed on the date of data collection)

Levodopa (Regular formulations) Levodopa (CR formulations) Pramipexole

Ropinirole Pirebedinil

Total Levodopa Equivalent dose (as of today)

Short answer text

Side effects list (please write the medication and side effects caused by them leading to change/withdrawal)

Long answer text

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Section 9 of 10

Investigations

Description (optional)

Is F-DOPA / TRIDOT scan done

Done and Normal Not done

Done and Abnromal

Findings of Abnormal Scan

Is CT brain Done?

Done and Normal Not done

Done and Abnormal

Findings of abnormal scan

Was MRI Brain done

MRI Brain Findings

Other…

Normal

Mild diffuse Atrophy

Diffuse significant atrophy

Any other Important investigation findings

Long answer text

After section 9

Section 10 of 10

Continue to next section

Clinical Scores & Addendum

Description (optional)

UPDRS I Subscore(Mentation, Behavior & Mood)

Short answer text

UPDRS III Subscore (Motor Examination)

Short answer text

UPDRS IV Subscore (Complications of Therapy)

Short answer text

Modified H & Y Staging

Stage - 0 : No Signs of Disease Stage -1 : Unilateral Disease

Stage - 1.5 : Unilateral plus Axial involvement

Stage - 2 : Bilateral Disease without impairment of Balance Stage - 2.5 : Mild Bilateral Disease with recovery on Pull test

Stage - 3: Mild to Moderate Bilateral disease, Some postural Instability; Physically Independent Stage - 4 : Severe Disability; Still able to walk or stand unassisted

Stage - 5 : Wheel chairbound or bed ridden unless aided

MOCA

Short answer text

Any Other intersting finding / Comment on the subject / Family who is enrolled into the study

Long answer text

