

EARLY DIAGNOSIS OF PARKINSON'S DISEASE VIA PROVOCATION TEST WITHOUT PERIPHERAL NOREPINEPHRINE DEPLETION

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**Aims**

Developing early (preclinical) diagnosis of Parkinson's disease (PD) remains ongoing issue. Previously we have shown that  $\alpha$ -methyl-p-tyrosine ( $\alpha$ MPT), a reversible inhibitor of dopamine synthesis, could be used as provocation diagnostic test in MPTP-treated mice model of preclinical PD. This test is based on a reversible enhancement of the dysfunction of degrading nigrostriatal dopaminergic system to a threshold where motor symptoms appear. However, systemic administration of  $\alpha$ MPT also affects peripheral dopamine and norepinephrine synthesis, leading to an increased risk of side effects in clinical practice. To overcome this issue, we suggest a combination of  $\alpha$ MPT with droxidopa (L-DOPS), synthetic precursor of norepinephrine.

**Methods**

Catecholamines in brain structures and internal organs of normal and MPTP-treated mice model of preclinical PD were evaluated via HPLC with electrochemical detection. Mice motor activity was assessed with open-field test.

**Results**

Combination of 200 mg/kg  $\alpha$ MPT and 50 mg/kg L-DOPS reduced dopamine but didn't affect norepinephrine concentration in all analyzed brain structures and peripheral organs both in normal and MPTP-treated mice. Moreover, motor behavior was impaired only in MPTP-treated mice 5 hours following  $\alpha$ MPT+L-DOPS treatment with the selected doses.

**Conclusions**

Thus, we improved  $\alpha$ MPT-based provocation test for further clinical application by combining it with L-DOPS administration to protect the peripheral norepinephrine synthesis.

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