

GLP-1 agonists as a target in Parkinson's disease

Dr Dilan Athauda MRCP BSc PhD

Consultant Neurologist and Senior Research Fellow

Dept. Clinical and Movement Neurosciences

*UCL Institute of Neurology & The National Hospital for Neurology and
Neurosurgery; The Francis Crick Institute*

Conflicts of Interest

Co-investigator on Exenatide-PD3 and Exenatide-MSA Clinical trials

Funding:

- National Institutes of Health (NIHR)
- Medical Research Council (MRC)
- Parkinson's UK
- Cure Parkinson's Trust

GLP-1 agonists & Parkinson's - Epidemiological data

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- People with T2DM who use GLP-1 targeting drugs have a reduced risk of developing Parkinson's

GLP-1 agonists & Parkinson's - Epidemiological data

- People with T2DM who use GLP-1 targeting drugs have a **reduced** risk of developing Parkinson's

DPP4 inhibitors
OR = 0.23
(95% CI 0.07-0.74)

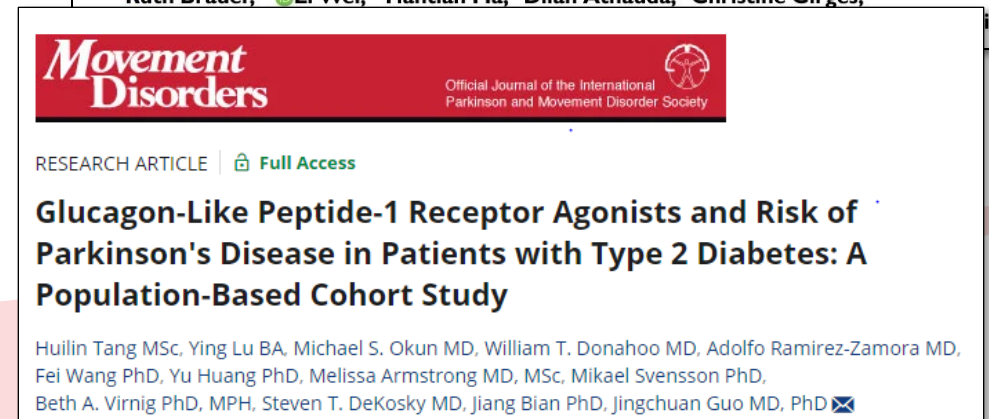
- Swedish National Inpatient Register (n=6,000)

GLP-1 A
IRR 0.38
(95% CI 0.17-0.60)

- Health Improvement Network (THIN) database (n=100,000)

GLP-1 A
HR 0.77
(95% CI 0.17-0.60)

- U.S. Medicare data (n=90,000)



GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Drug: Exenatide (*Byetta*)

JCI

The Journal of Clinical Investigation

Exenatide and the treatment of patients with Parkinson's disease

Iciar Aviles-Olmos, ... , Patricia Limousin, Thomas Foltynie

J Clin Invest. 2013;123(6):2730-2736. <https://doi.org/10.1172/JCI68295>.

GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Drug: Exenatide (*Byetta*)

Pilot trial, n=44

Open label (placebo cost)

Exposure for 12 months

Final assessment 14 months

Primary outcome measure

- MDS UPDRS part 3 (OFF) at 14 months

Demographics

- Patients ~ 60yrs old
- Disease duration ~10 yrs
- Levodopa dose ~ 980mg daily



GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Primary Outcome

- MDS-UPDRS III OFF

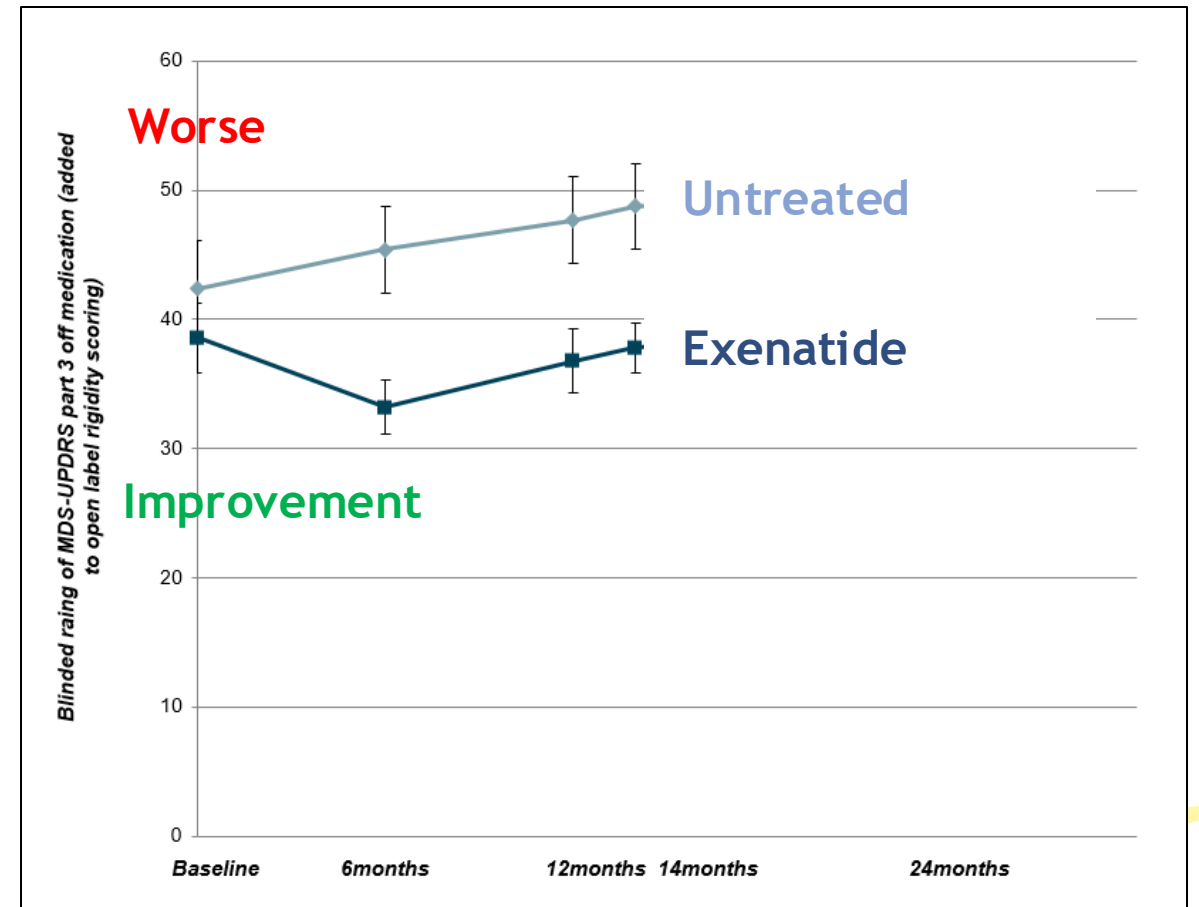
GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Primary Outcome

- MDS-UPDRS III OFF



	Baseline Mean (SD)	6 Months Mean (SD)	12 Months Mean (SD)	Difference Baseline to 12 months Mean (SE)	P value	14 Months Mean (SD)	Difference baseline to 14 months Mean (SE)	P value
Exenatide	31.0 (11.2)	25.2 (9.0)	28.3 (9.9)	-2.7 (1.7)	P=0.037	29.3 (8.5)	-1.7 (1.6)	P=0.04
Control	34.0 (16.1)	34.4 (15.0)	36.2 (15.4)	2.2 (1.5)		36.8 (15.2)	2.8 (1.4)	



GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Primary Outcome

- MDS-UPDRS III OFF



Secondary Outcomes

- MATTIS DRS-2



GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Primary Outcome

- MDS-UPDRS III OFF 

Secondary Outcomes

- MATTIS DRS-2 
- Safety 

	Adverse Events	n	Serious Adverse Events	n
Exenatide	Abdominal pain	6	Sciatica and epidural injection	1
	Back pain	5	Insomnia (polysomnography)	1
	Constipation	18	Possible transient ischaemic attack	2
	Diarrhoea	7		
	Increase dyskinesia	4		
	Increase off	4		
	Injection bruising	2		
	Hallucinations	2		
	Other pain	7		
	Loss of appetite	5		
	Nausea	13		
	Memory impairment	2		
	Urinary infection	2		
	Weight gain	3		
	Weight loss	19		
	Miscellaneous	36		

GLP-1 agonists & Parkinson's - Exenatide-PD1 Trial (2013)

Primary Outcome

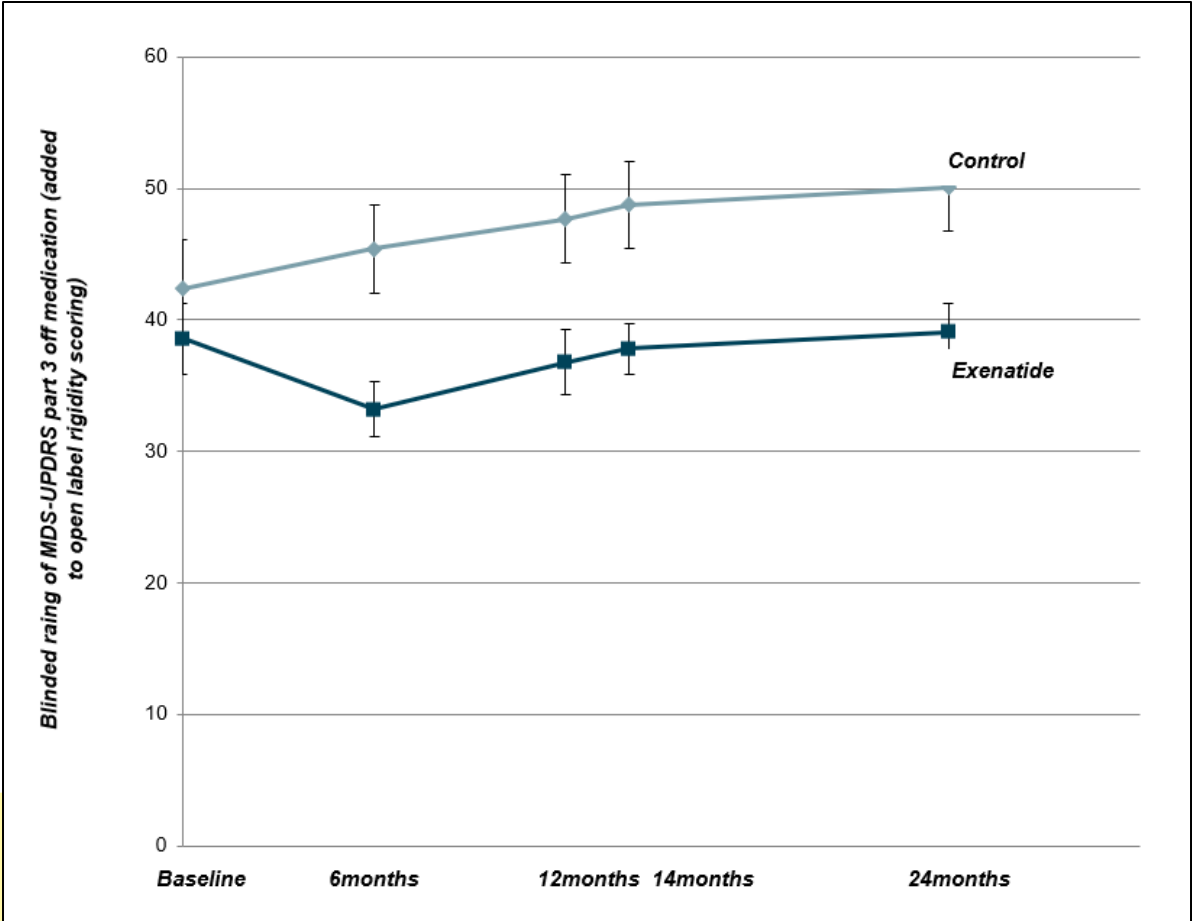
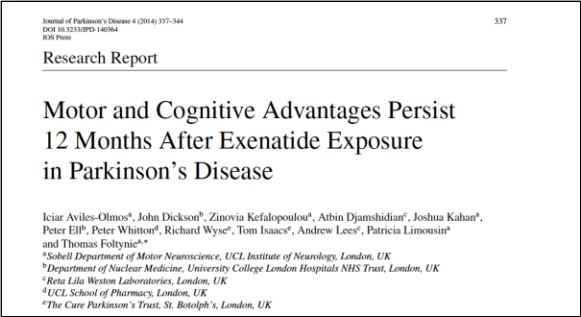
- MDS-UPDRS III OFF 

Secondary Outcomes

- MATTIS DRS-2 
- Safety 

Exploratory Outcomes

- MDS-UPDRS OFF at 96 weeks 



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Drug: Exenatide (Bydureon Injection)



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Drug: Exenatide (Bydureon Injection)

- N=60
- Parallel group (placebo control)
- Exposure for 48 weeks

Demographics

- Patients ~ 59yrs old
- Disease duration ~6.5 yrs
- Levodopa dose ~ 780mg daily

Primary outcome measure

- MDS UPDRS part 3 at 60 weeks (OFF)

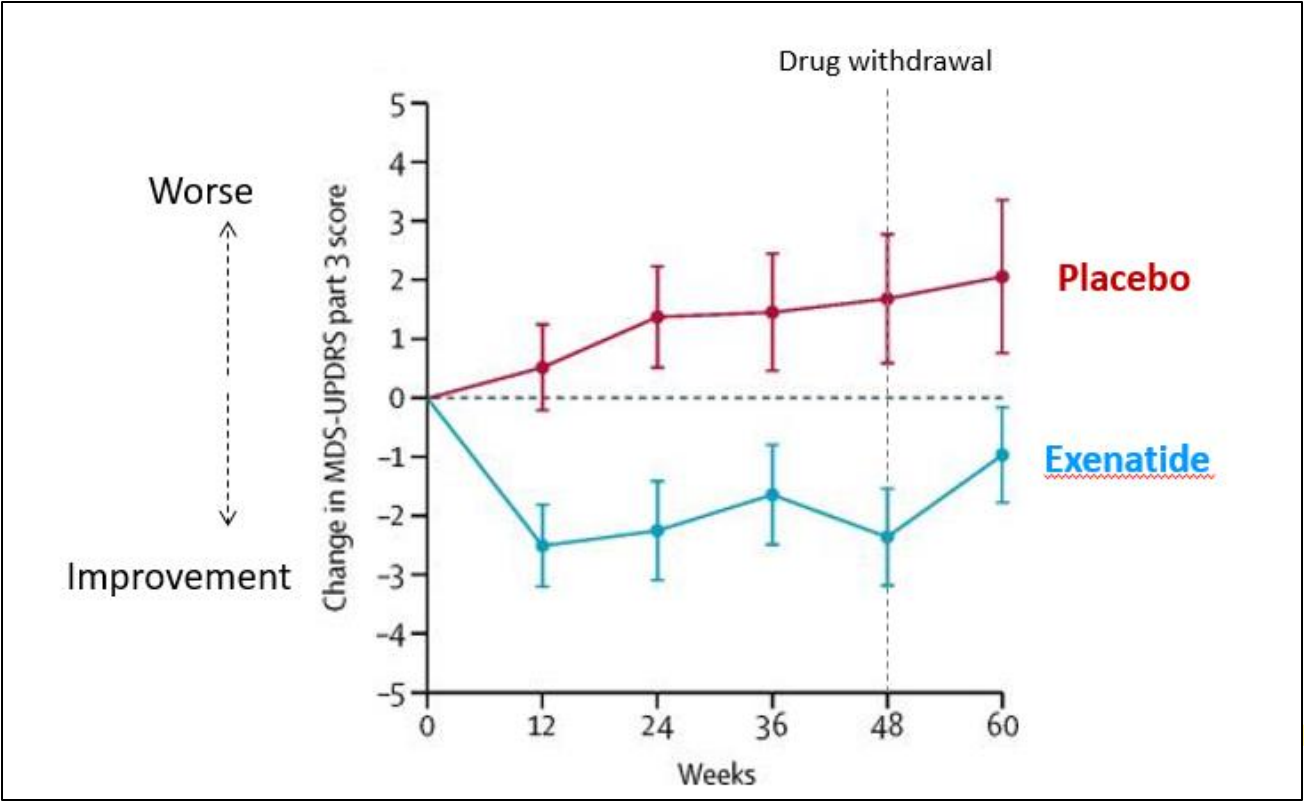
	Exenatide (n=31)	Placebo (n=29)
Age, years	61.6 (8.2)	57.8 (8.0)
Sex		
Female	9 (29%)	7 (24%)
Male	22 (71%)	22 (76%)
Age at diagnosis, years	55.9 (7.9)	52.2 (7.7)
Duration of diagnosis at baseline, years	6.4 (3.3)	6.4 (3.3)
Hoehn and Yahr stage		
1-0-2.0	29 (94%)	29 (100%)
2-5	2 (6%)	0 (0%)
MDS-UPDRS part 3 off medication	32.8 (9.7)	27.1 (10.3)
Levodopa equivalent dose, mg	773.9 (260.9)	825.7 (215.0)

GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Primary Outcome

- MDS-UPDRS at 60 weeks 

	Baseline	12 weeks	24 weeks	36 weeks	48 weeks	Change, Baseline to 48 weeks	Adjusted difference, baseline to 48 weeks	60 weeks	Change, Baseline to 60 weeks	Adjusted difference, baseline to 60 weeks
	Mean (SD)	Mean (SD)	Mean (SD)	Mean (SD)	Mean (SD)	Mean (95% CI)	Mean (95% CI) P value	Mean (SD)	Mean (95% CI)	Mean (95% CI) P value
OFF medication state										
MDS-UPDRS Part 3										
Exenatide	32.8 (9.7)	30.3 (10.9)	30.6 (10.8)	31.2 (11.3)	30.2 (11.1)	-2.3 (-4.1, -0.7)	-4.3 (-7.1, -1.6) 0.003	31.9 (12.0)	-1.0 (-2.6, 0.7)	-3.5 (-6.7, -0.3) 0.032
Placebo	27.1 (10.3)	27.6 (11.8)	28.5 (11.0)	28.6 (9.5)	28.8 (10.8)	1.7 (-0.6, 4.0)		29.2 (12.0)	2.1 (-0.6, 4.8)	



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)



Primary Outcome

- MDS-UPDRS at 60 weeks 

Secondary Outcomes

- MDS-UPDRS I,II,IV; NMSS, PDQ-39

GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Primary Outcome

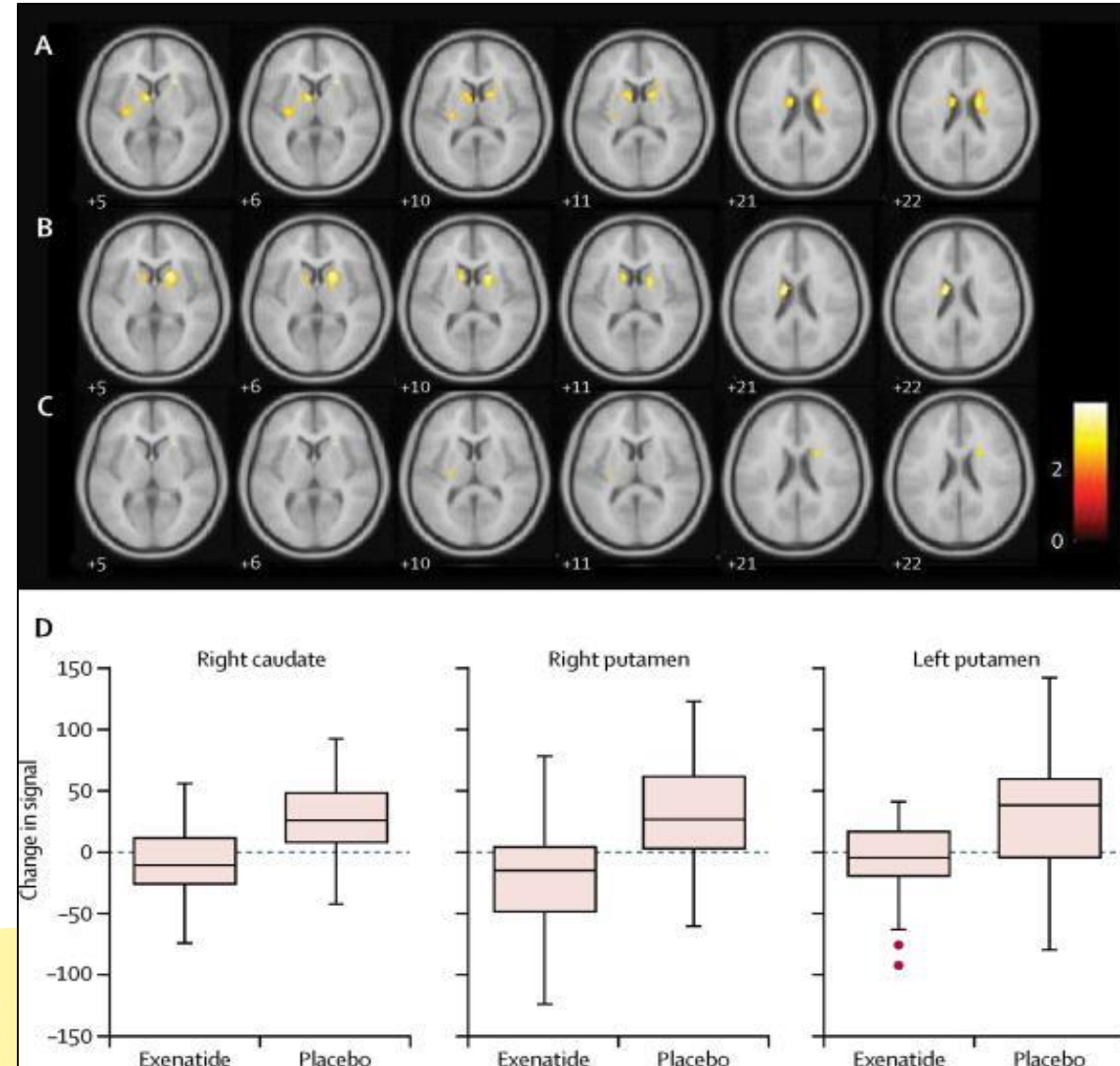
- MDS-UPDRS at 60 weeks ✓

Secondary Outcomes ✗

- MDS-UPDRS I,II,IV; NMSS, PDQ-39

Exploratory outcomes

- Reduced DA terminal loss at 60 weeks 🔍✓



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Primary Outcome

- MDS-UPDRS at 60 weeks ✓

Secondary Outcomes ✗

- MDS-UPDRS I,II,IV; NMSS, PDQ-39

Exploratory outcomes

- Reduced DA terminal loss at 60 weeks ✓
- Improved neuro-psychiatric symptoms ✓

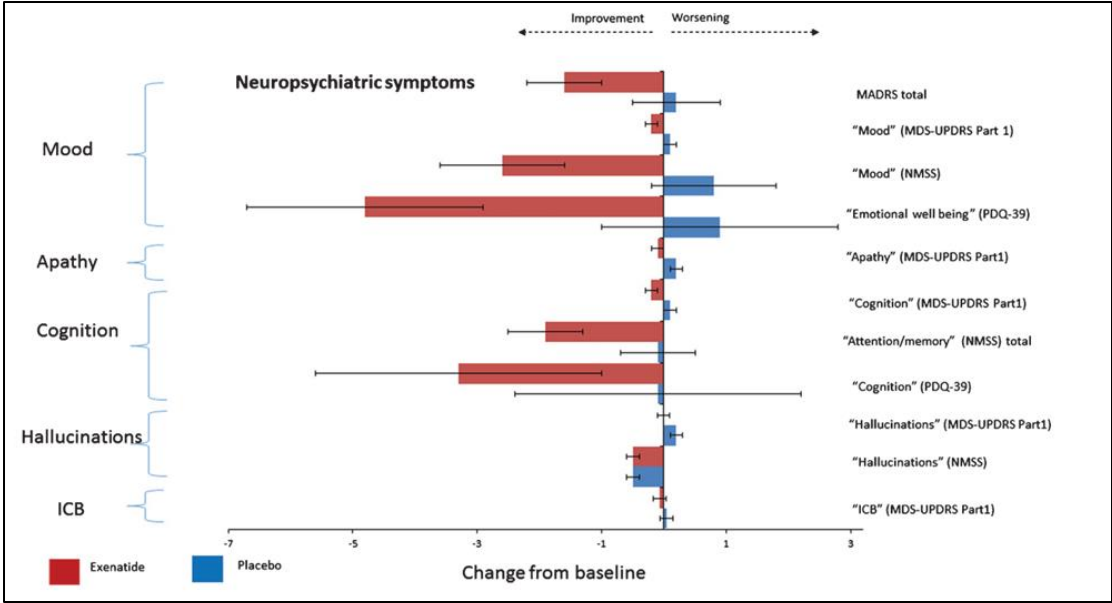
Journal of Parkinson's Disease 8 (2018) 247–258
DOI 10.3233/JPD-181329
IOS Press

247

Research Report

What Effects Might Exenatide have on Non-Motor Symptoms in Parkinson's Disease: A Post Hoc Analysis

Dilan Athauda^a, Kate MacLagan^b, Natalia Budnik^c, Luca Zampieri^c, Steve Hibbert^b, Simon S. Skene^{b,d}, Kashfia Chowdhury^b, Iciar Aviles-Olmos^a, Patricia Limousin^a and Thomas Foltynie^{a,*}



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Primary Outcome

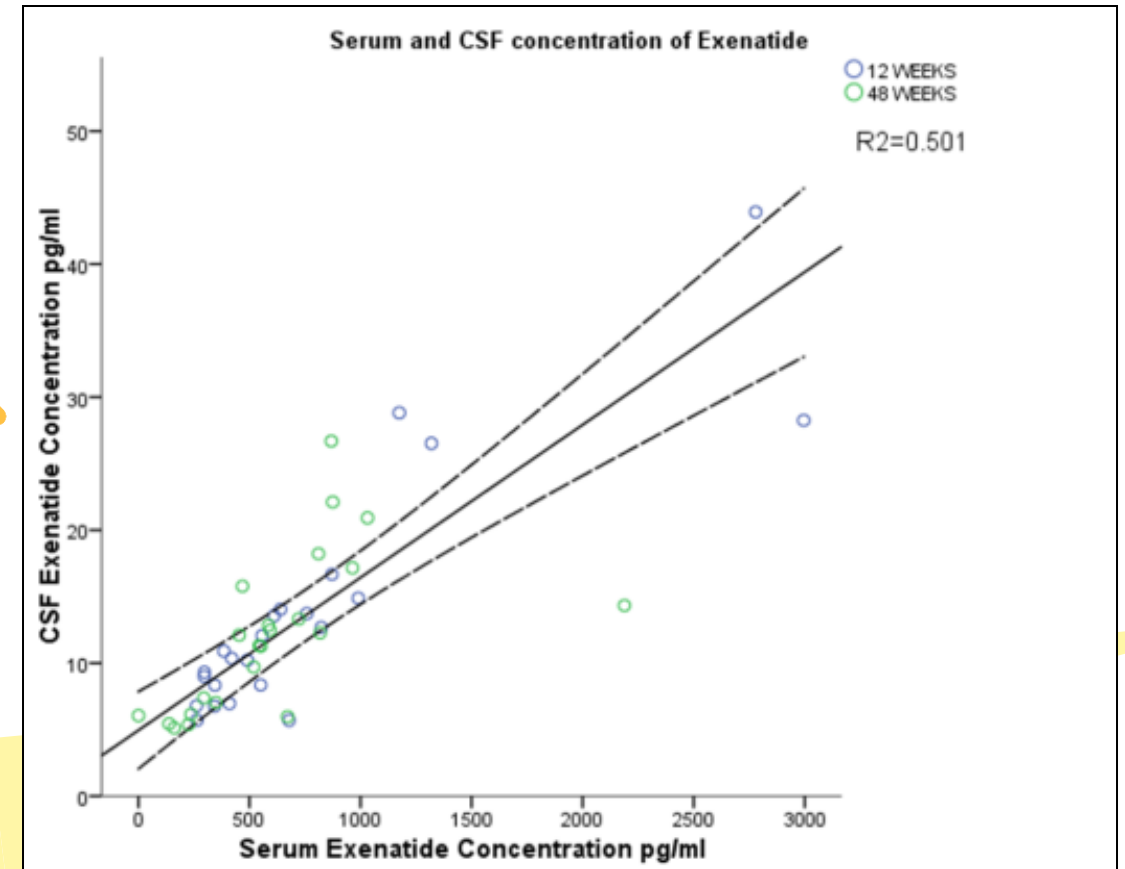
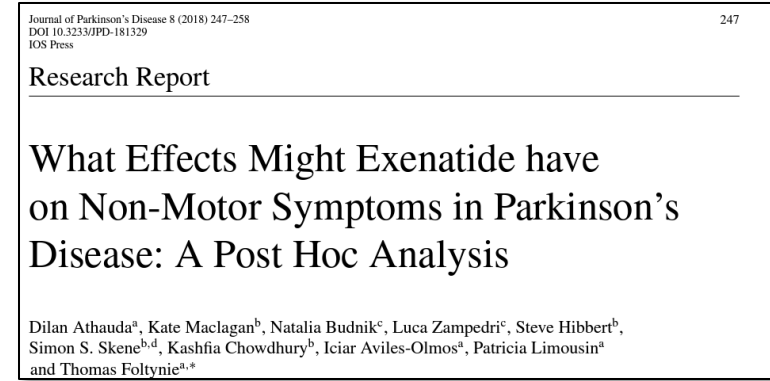
- MDS-UPDRS at 60 weeks ✓

Secondary Outcomes ✗

- MDS-UPDRS I,II,IV; NMSS, PDQ-39

Exploratory outcomes

- Reduced DA terminal loss at 60 weeks ✓
- Improved neuro-psychiatric symptoms ✓
- Ex-4 penetrates BBB ✓



GLP-1 agonists & Parkinson's - Exenatide-PD2 Trial (2017)

Primary Outcome

- MDS-UPDRS at 60 weeks 

Secondary Outcomes

- MDS-UPDRS I,II,IV; NMSS, PDQ-39

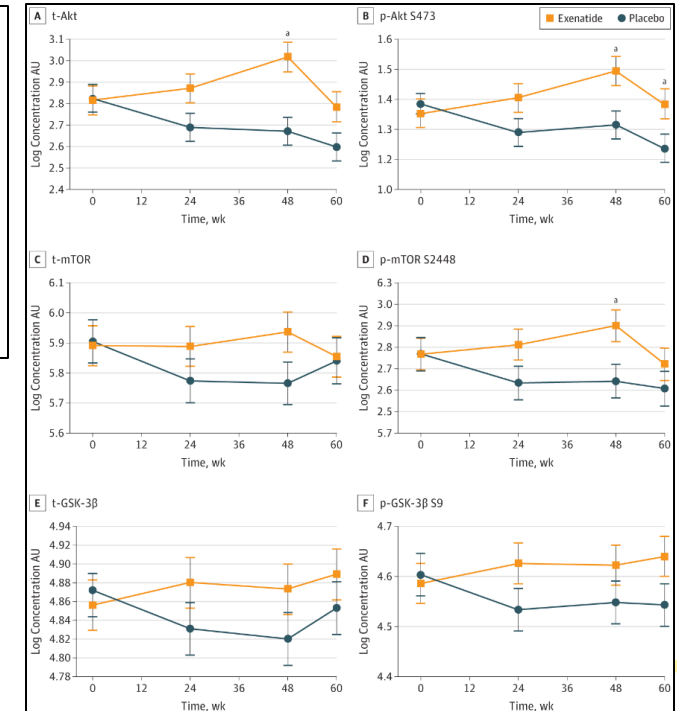
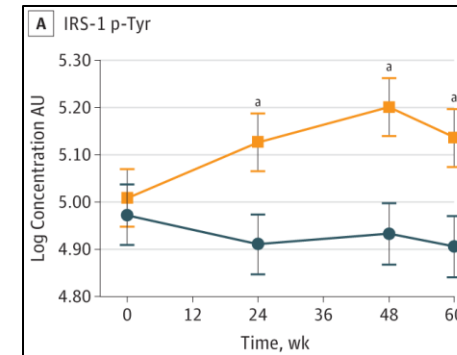
Exploratory outcomes

- Reduced DA terminal loss at 60 weeks 
- Improved neuro-psychiatric symptoms 
- Ex-4 penetrates BBB 
- Ex-4 enhances brain insulin signalling 

JAMA Neurology | Original Investigation

Utility of Neuronal-Derived Exosomes to Examine Molecular Mechanisms That Affect Motor Function in Patients With Parkinson Disease A Secondary Analysis of the Exenatide-PD Trial

Dilan Athauda, MRCP, PhD; Seema Gulyani, PhD; Hanuma kumar Karnati, PhD; Yazhou Li, PhD; David Tweedie, PhD; Maja Mustapic, PhD; Sahil Chawla, BSc; Kashfia Chowdhury, MSc; Simon S. Skene, PhD; Nigel H. Greig, PhD; Dimitrios Kapogiannis, MD; Thomas Foltynie, MRCP, PhD



GLP-1 agonists & Parkinson's – **PT320 (2022)**

Drug: SR Exenatide

Drug: SR Exenatide

- RCT; N=99
- 3 groups (2.0mg / 2.5mg / placebo)
- Exposure for 48 weeks

Primary outcome measure

- MDS UPDRS III at 48 weeks

GLP-1 agonists & Parkinson's – PT320 (2022)

Drug: SR Exenatide

- RCT; N=99
- 3 groups (2.0mg / 2.5mg / placebo)
- Exposure for 48 weeks

Primary outcome measure

- MDS UPDRS III at 48 weeks



GLP-1 agonists & Parkinson's – PT320 (2022)

Drug: SR Exenatide

- RCT; N=99
- 3 groups (2.0mg / 2.5mg / placebo)
- Exposure for 48 weeks

Primary outcome measure

- MDS UPDRS III at 48 weeks 

Secondary outcomes

- K-PDQ-39 



Drug: SR Exenatide

- RCT; N=99
- 3 groups (2.0mg / 2.5mg / placebo)
- Exposure for 48 weeks

Primary outcome measure

- MDS UPDRS III at 48 weeks 

Secondary outcomes

- K-PDQ-39 

"We believe PT320's insulin resistance-improving mechanism can be a fundamental treatment for degenerative brain diseases and will continue working on a treatment for Parkinson's disease,"

Drug: Liraglutide



GLP-1 agonists & Parkinson's – **Liraglutide (2022)**

Drug: Liraglutide

- RCT; N=63
- 2 groups (1.8mg / placebo)
- Exposure for 52 weeks

Primary outcome measure

- MDS UPDRS III at 52 weeks
- NMSS
- MATTIS-DRS2

Secondary Outcomes

- MDS-UPDRS II

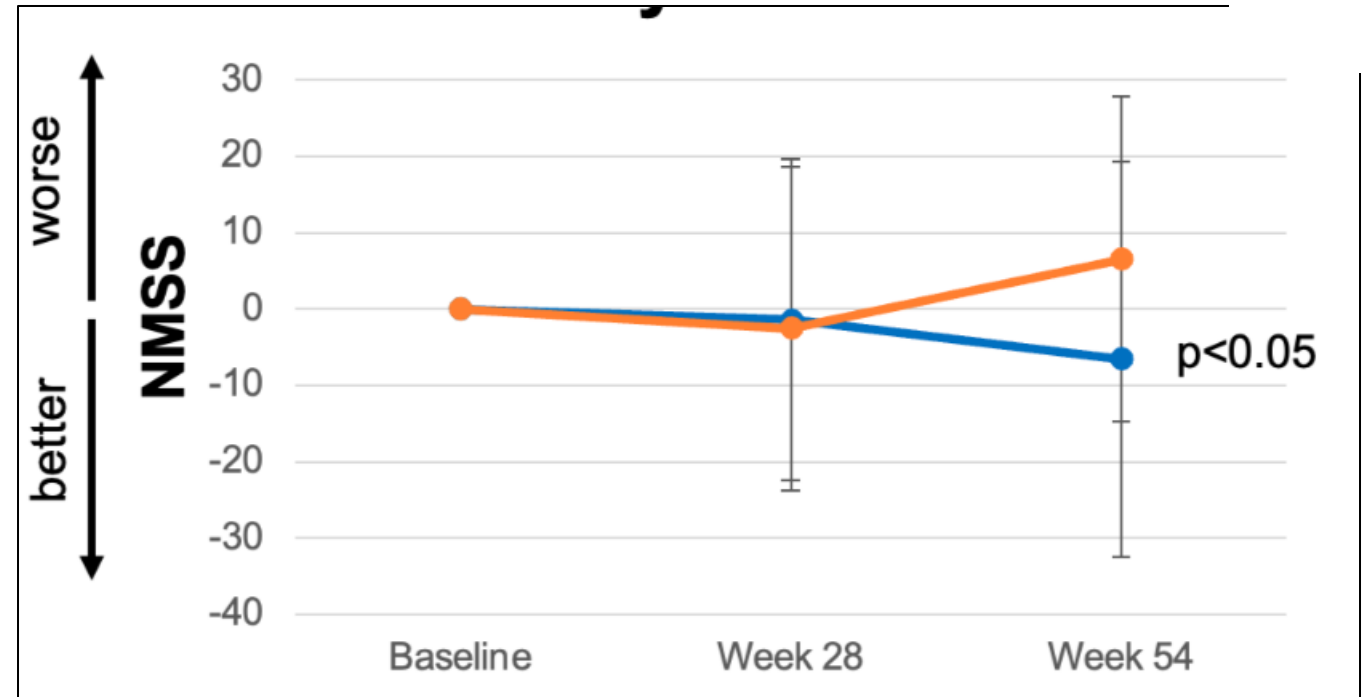
GLP-1 agonists & Parkinson's – Liraglutide (2022)

Drug: Liraglutide

- RCT; N=63
- 2 groups (1.8mg / placebo)
- Exposure for 52 weeks

Primary outcome measure

- MDS UPDRS III at 52 weeks ❌
- NMSS ✅
- MATTIS-DRS2 ❌



GLP-1 agonists & Parkinson's – Liraglutide (2022)

Drug: Liraglutide

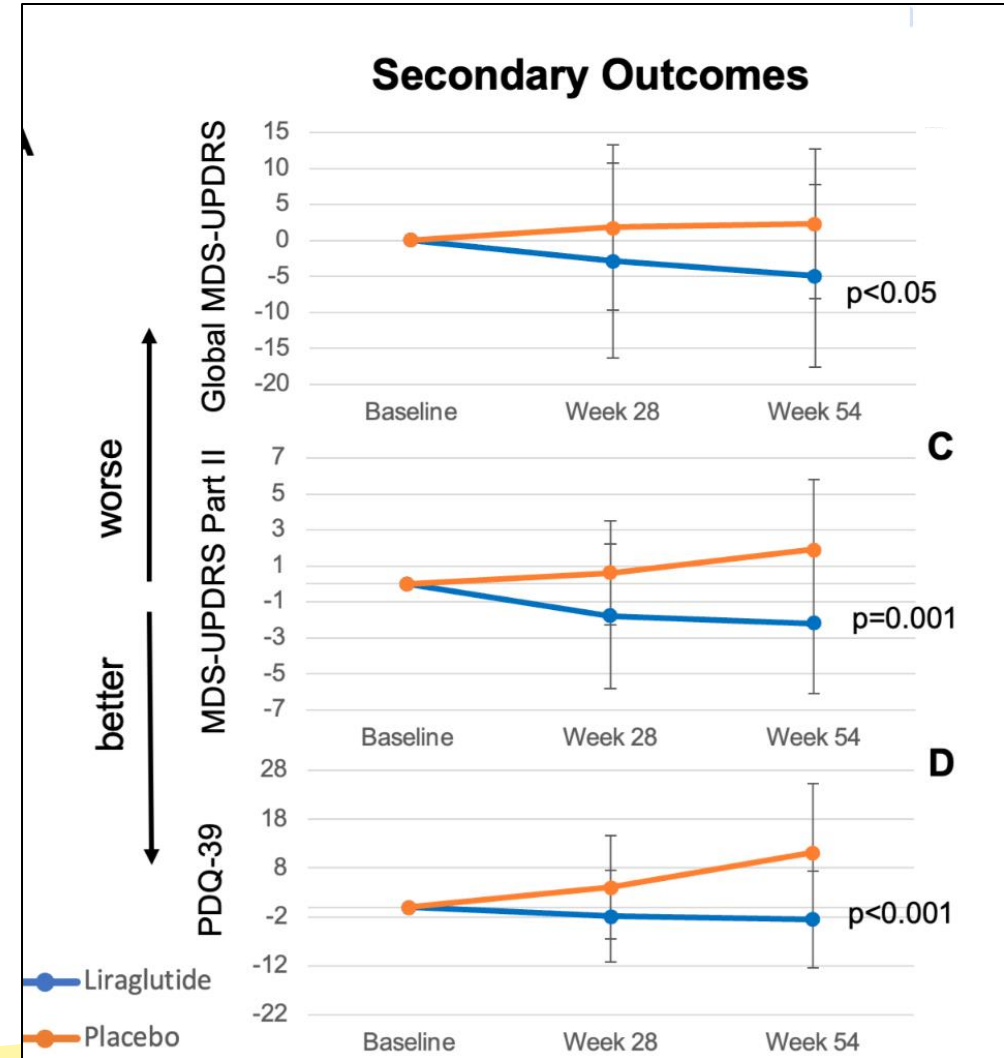
- RCT; N=63
- 2 groups (1.8mg / placebo)
- Exposure for 52 weeks

Primary outcome measure

- MDS UPDRS III at 52 weeks 
- NMSS 
- MATTIS-DRS2 

Secondary Outcomes

- MDS-UPDRS 
- MDS-UPDRS II 
- PDQ-39 



GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Drug: NLY01 (PEGylated form exendin-4)

THE LANCET
Neurology

Articles

Safety, tolerability, and efficacy of NLY01 in early untreated Parkinson's disease: a randomised, double-blind, placebo-controlled trial


CrossMark

Andrew McGarry, Shane Rosanbalm, Mika Leinonen, C Warren Olanow, Dennis To, Adam Bell, Daniel Lee, Jamie Chang, Jordan Dubow, Rohit Dhall, Daniel Burdick, Sotirios Parashos, Jeanne Feuerstein, Joseph Quinn, Rajesh Pahwa, Mitra Afshari, Aldolfo Ramirez-Zamora, Kelvin Chou, Arjun Tarakad, Corneliu Luca, Kevin Klos, Yvette Bordelon, Marie-Helene St Hiliare, David Shprecher, Seulki Lee, Ted M Dawson, Viktor Roschke, Karl Kieburtz

GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Drug: NLY01 (PEGylated form exendin-4)

- RCT; N=225
- 3 groups (2.5mg / 5.0mg / placebo)
- Exposure for 36 weeks

Demographics

- Patients ~ 60yrs old
- Disease duration ~1.0 yrs
- Levodopa dose ~ 780mg daily

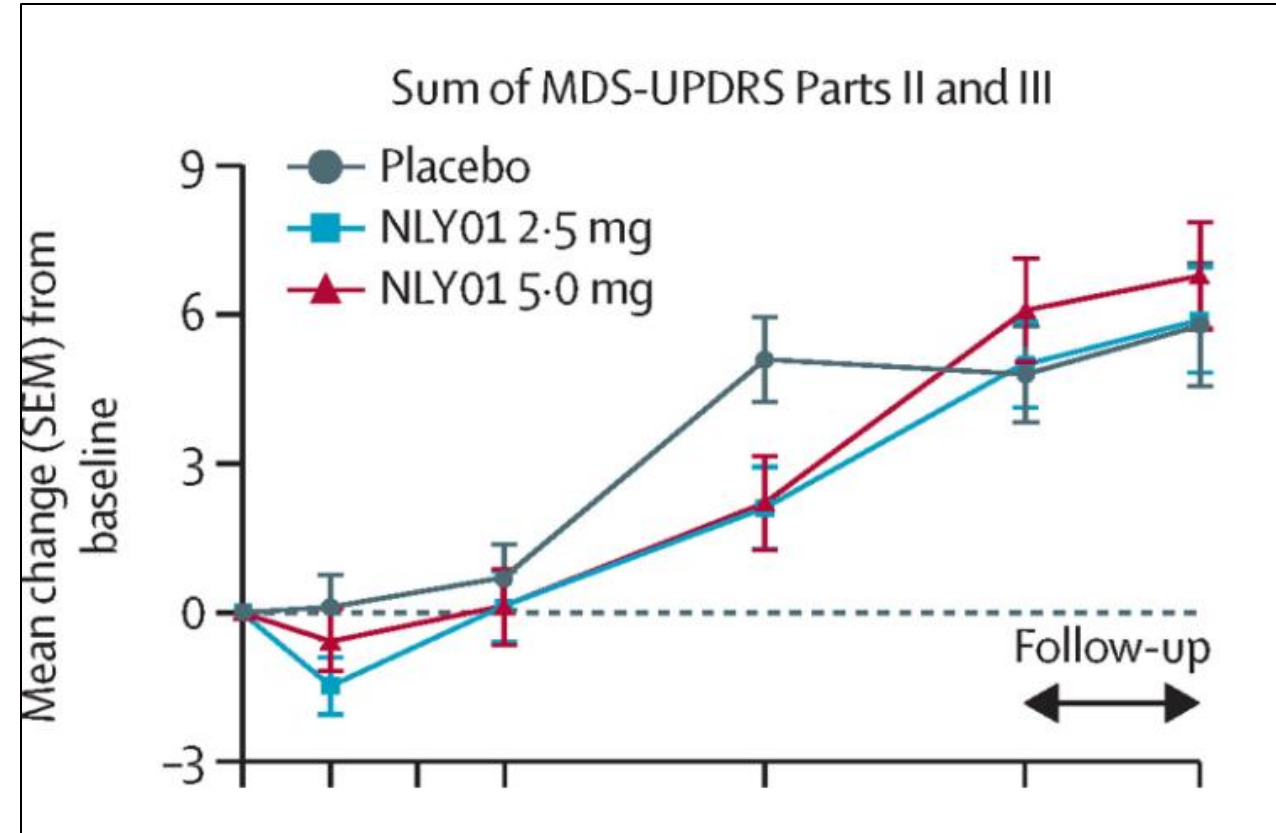
Primary outcome measure

- MDS UPDRS II & III at 36 weeks

GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Primary Outcome

- MDS UPDRS II & III at 36 weeks 



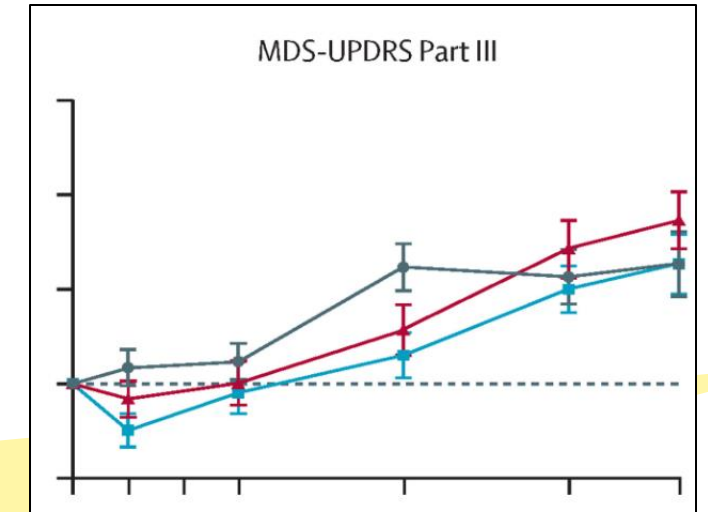
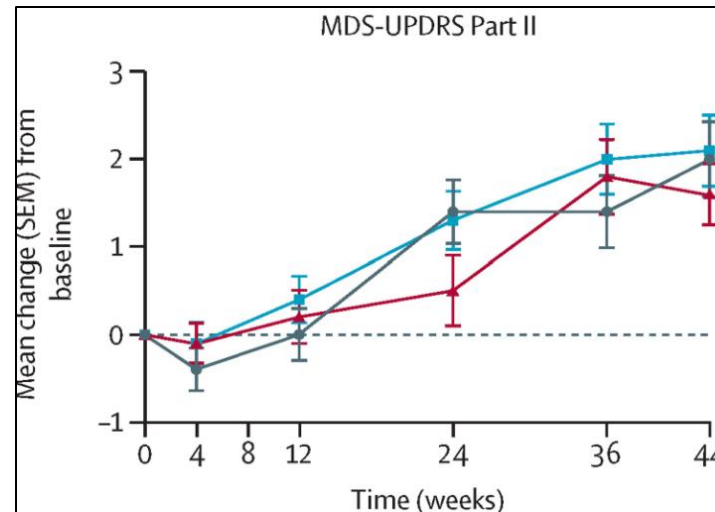
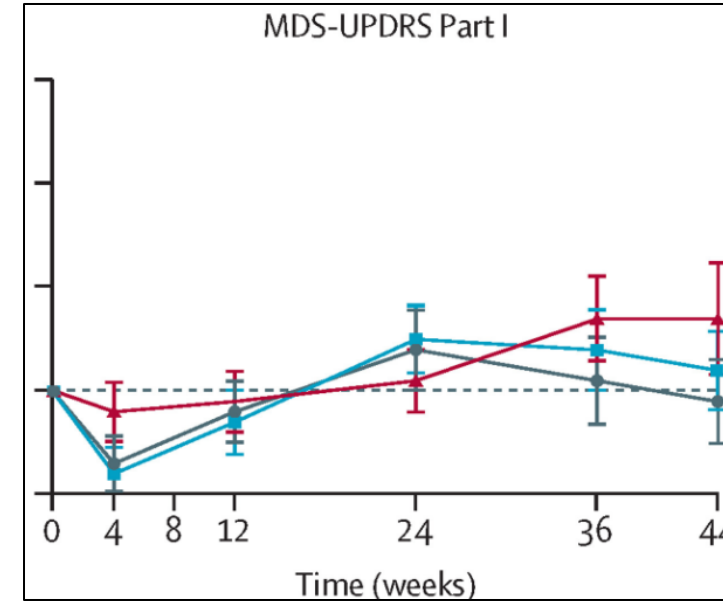
GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Primary Outcome

- MDS UPDRS II & III at 36 weeks ❌

Secondary Outcomes

- MDS-UPDRS I, II, III ❌



GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Primary Outcome

- MDS UPDRS II & III at 36 weeks 

Secondary Outcomes

- MDS-UPDRS I, II, III 

Exploratory Outcomes

- Safety 

	Placebo (n=84)	NLY01 2.5 mg (n=85)	NLY01 5.0 mg (n=85)
Any treatment-emergent adverse event	73 (87%)	71 (84%)	79 (93%)
Gastrointestinal disorders	30 (36%)	52 (61%)	64 (75%)
Nausea	16 (19%)	33 (39%)	49 (58%)
Constipation	6 (7%)	10 (12%)	14 (16%)
Vomiting	1 (1%)	4 (5%)	22 (26%)
Diarrhoea	7 (8%)	7 (8%)	11 (13%)
Dyspepsia	2 (2%)	8 (9%)	14 (16%)
Gastro-oesophageal reflux	2 (2%)	9 (11%)	13 (15%)
Abdominal discomfort	4 (5%)	5 (6%)	4 (5%)
Eructation	1 (1%)	4 (5%)	8 (9%)
Abdominal distention	1 (1%)	4 (5%)	5 (6%)
Nervous system disorders	34 (40%)	25 (29%)	39 (46%)
Headache	14 (17%)	14 (16%)	20 (24%)
Dizziness	7 (8%)	3 (3.5%)	7 (8.2%)
Worsening of parkinsonism	7 (8%)	3 (4%)	6 (7%)
General and administration site disorders	31 (37%)	32 (38%)	34 (40%)
Fatigue	11 (13%)	10 (12%)	12 (14%)
Injection site bruising	13 (15%)	9 (11%)	7 (8%)
Injection site erythema	1 (1%)	7 (8%)	8 (9%)
Infections	28 (33%)	14 (16%)	23 (27%)
COVID-19	11 (13%)	7 (8%)	13 (15%)
Urinary tract infection	6 (7%)	3 (4%)	2 (2%)
Musculoskeletal disorders	20 (24%)	19 (22%)	16 (19%)
Arthralgia	2 (2%)	5 (6%)	3 (4%)
Injury and procedural complications	16 (19%)	10 (12%)	10 (12%)
Skin and subcutaneous skin disorders	11 (13%)	9 (11%)	13 (15%)
Investigations	6 (7%)	11 (13%)	12 (14%)
Weight decreased	2 (2%)	5 (6%)	5 (6%)
Metabolism and nutrition disorders	7 (8%)	8 (9%)	13 (15%)
Decreased appetite	5 (6%)	7 (8%)	13 (15%)
Psychiatric disorders	7 (8%)	9 (11%)	12 (14%)
Anxiety	1 (1%)	3 (4%)	5 (6%)
Vascular disorders	5 (6%)	8 (9%)	7 (8%)
Renal and urinary disorders	9 (11%)	6 (7%)	4 (5%)
Respiratory and thoracic disorders	5 (6%)	2 (2%)	9 (11%)

Data are n (%). Treatment-emergent adverse events occurring with a frequency of 5% or greater in any group are shown.

Table 2: Treatment-emergent adverse events

GLP-1 agonists & Parkinson's – NLY01 trial (2023)

Primary Outcome

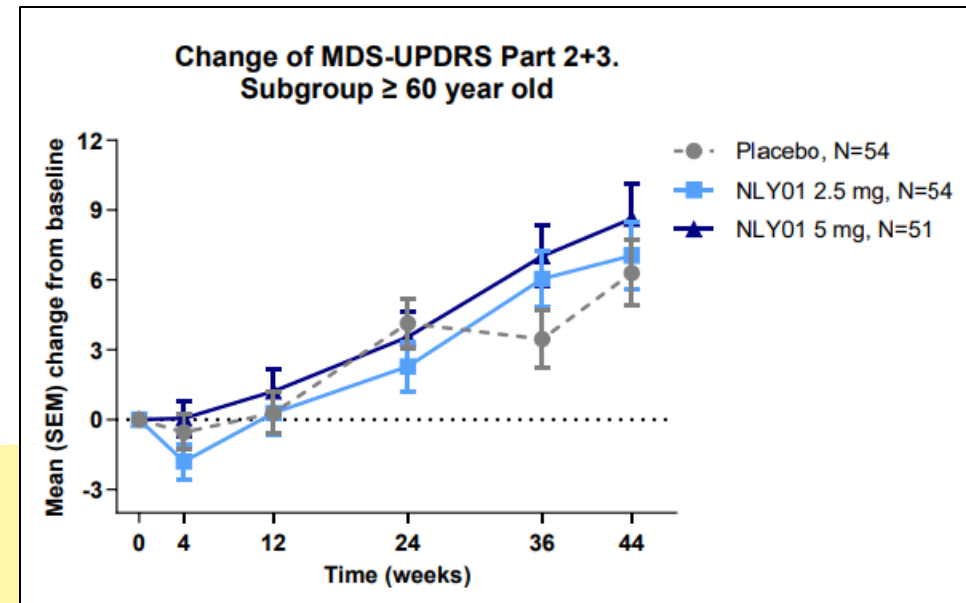
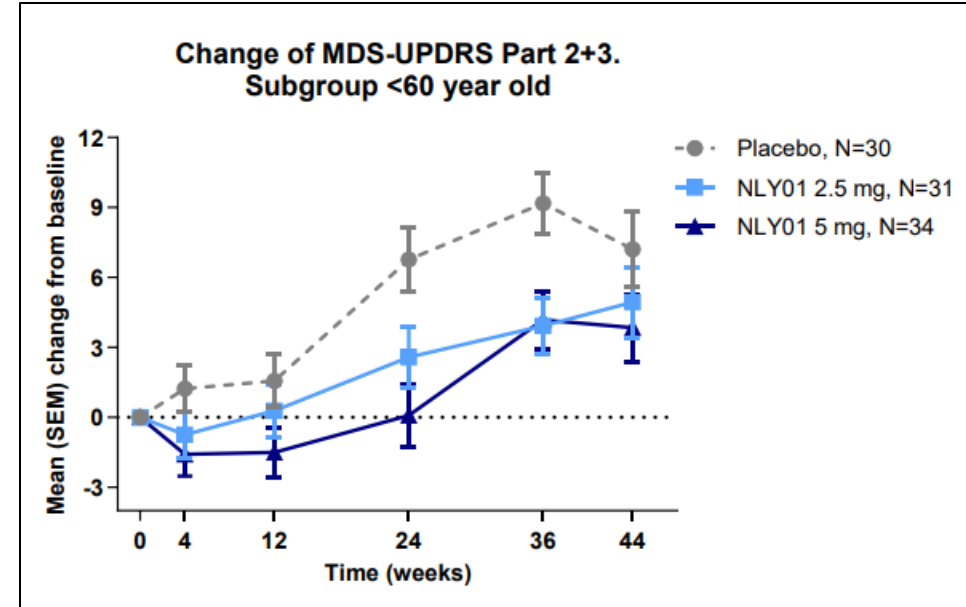
- MDS UPDRS II & III at 36 weeks ❌

Secondary Outcomes

- MDS-UPDRS I, II, III ❌

Exploratory Outcomes

- Safety ✅
- Patients <60yrs seemed to improve ✅



Drug: Lixisenatide

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Trial of Lixisenatide in Early Parkinson's Disease

W.G. Meissner, P. Remy, C. Giordana, D. Maltête, P. Derkinderen, J.-L. Houéto, M. Anheim, I. Benatru, T. Boraud, C. Brefel-Courbon, N. Carrière, H. Catala, O. Colin, J.-C. Corvol, P. Damier, E. Dellapina, D. Devos, S. Drapier, M. Fabbri, V. Ferrier, A. Foubert-Samier, S. Frismand-Kryloff, A. Georget, C. Germain, S. Grimaldi, C. Hardy, L. Hopes, P. Krystkowiak, B. Laurens, R. Lefaucheur, L.-L. Mariani, A. Marques, C. Marse, F. Ory-Magne, V. Rigalleau, H. Salhi, A. Saubion, S.R.W. Stott, C. Thalamas, C. Thiriez, M. Tir, R.K. Wyse, A. Benard, and O. Rascol, for the LIXIPARK Study Group*

Drug: Lixisenatide

- RCT; N=156
- 2 groups (lixisenatide 20ug / placebo)
- Exposure for 12 months

Primary outcome measure

- MDS UPDRS III at 12 months

Demographics

- Patients ~ 60yrs old
- Disease duration ~1.4 yrs
- Levodopa dose ~ 325mg daily

The NEW ENGLAND JOURNAL of MEDICINE

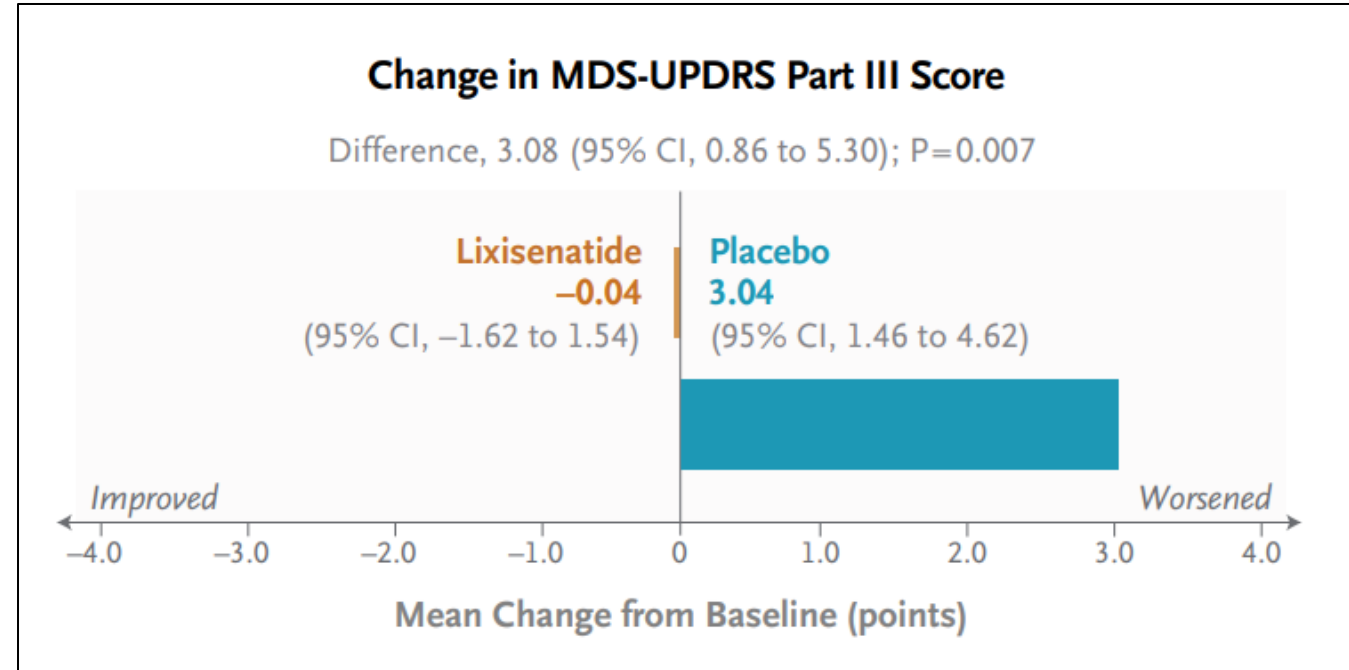
ORIGINAL ARTICLE

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Primary Outcome

- MDS UPDRS III at 12 months 



GLP-1 agonists & Parkinson's – LIXIPARK (2024)

Primary Outcome

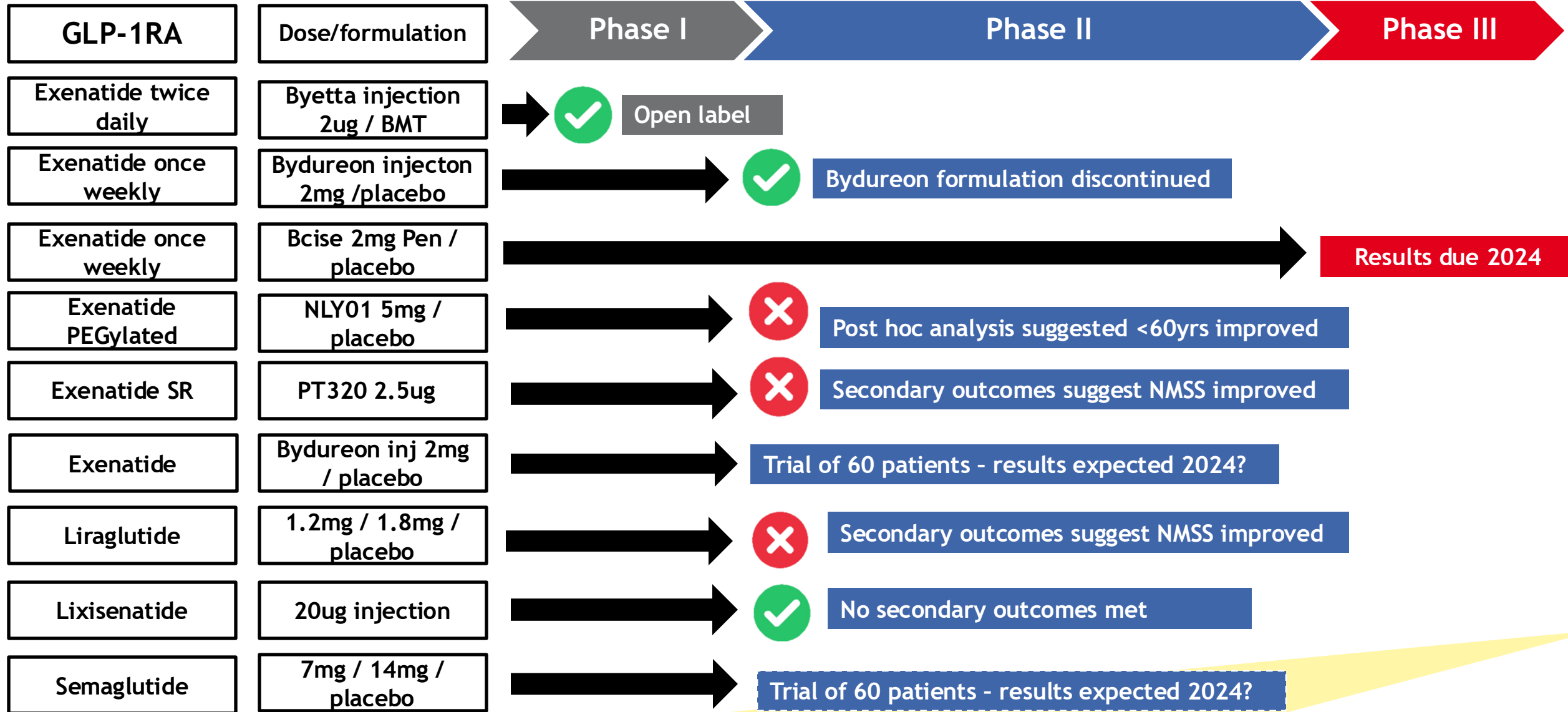
- MDS UPDRS III at 12 months 

Secondary Outcomes

Table 2. Efficacy Measures.

Efficacy Measure	Placebo (N = 75)	Lixisenatide (N = 77)	Difference
Primary end point — mean point estimate (95% CI)			
Change in score on MDS-UPDRS part III, on-medication state, 12 mo*	3.04 (1.46 to 4.62)	−0.04 (−1.62 to 1.54)	3.08 (0.86 to 5.30)
Secondary end points — mean point estimate (95% CI)			
MDS-UPDRS part III score, off-medication state after 2-month washout, 14 mo†‡	20.6 (18.5 to 22.8)	17.7 (15.7 to 19.7)	3.0 (0.1 to 5.8)
Change from baseline in MDS-UPDRS score, on-medication state			
Part III, 6 mo	1.66 (0.36 to 2.97)	0.54 (−0.93 to 2.00)	1.13 (−0.82 to 3.07)
Total, 12 mo	5.18 (2.90 to 7.45)	2.80 (0.29 to 5.31)	2.38 (−0.98 to 5.73)
Part I nm-EDL, 6 mo	0.69 (−0.10 to 1.48)	0.55 (−0.18 to 1.28)	0.14 (−0.93 to 1.21)
Part I nm-EDL, 12 mo	0.61 (−0.11 to 1.33)	1.25 (0.29 to 2.21)	−0.64 (−1.83 to 0.55)
Part II m-EDL, 6 mo	0.63 (0.03 to 1.23)	0.67 (−0.18 to 1.52)	−0.04 (−1.08 to 0.99)
Part II m-EDL, 12 mo	1.40 (0.65 to 2.15)	1.45 (0.58 to 2.33)	−0.05 (−1.19 to 1.09)
Part IV, 6 mo	0.2 (−0.2 to 0.6)	0.2 (0 to 0.5)	−0.03 (−0.50 to 0.44)
Part IV, 12 mo	0.2 (0 to 0.4)	0.2 (−0.1 to 0.6)	−0.06 (−0.44 to 0.33)
Change from baseline in levodopa equivalent daily dose at 12 mo — mg	31.3 (9.2 to 53.5)	35.8 (8.3 to 63.2)	−4.4 (−39.5 to 30.6)

GLP-1 agonists & Parkinson's – SUMMARY OF RESULTS



GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

No

- Clinical trial results are not convincing / mixed

GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

Yes

- Very strong pre-clinical across multiple animal toxin, transgenic models and human iPSC models of PD demonstrating GLP-1 agonists halt / improve / protect pathology of PD

GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

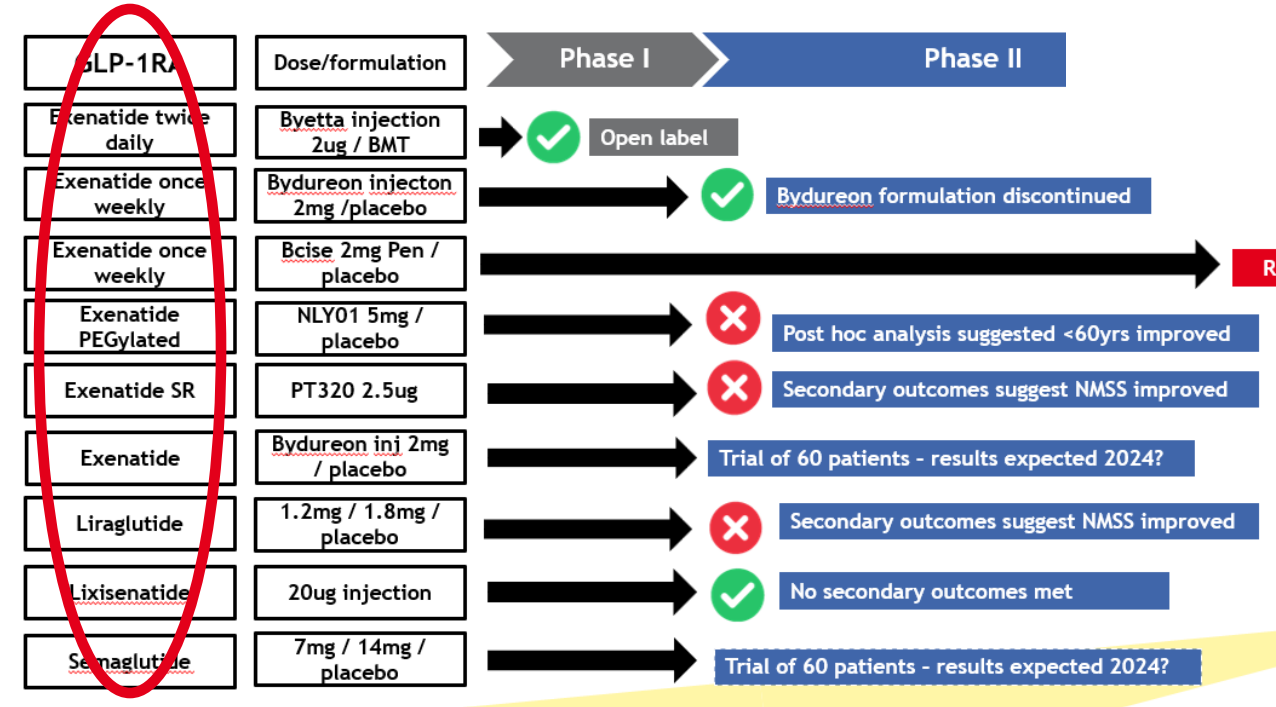
Yes

- Very strong pre-clinical across multiple animal toxin, transgenic models and human iPSC models of PD demonstrating GLP-1 agonists halt / improve / protect pathology of PD
- Heterogenous methodology of trials

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Outcome measures: MDS-UPDRS III, MDS-UPDRS II & III, MATTIS-DRS

Duration of exposure: 36 weeks, 48 weeks, 60 weeks, 96 weeks

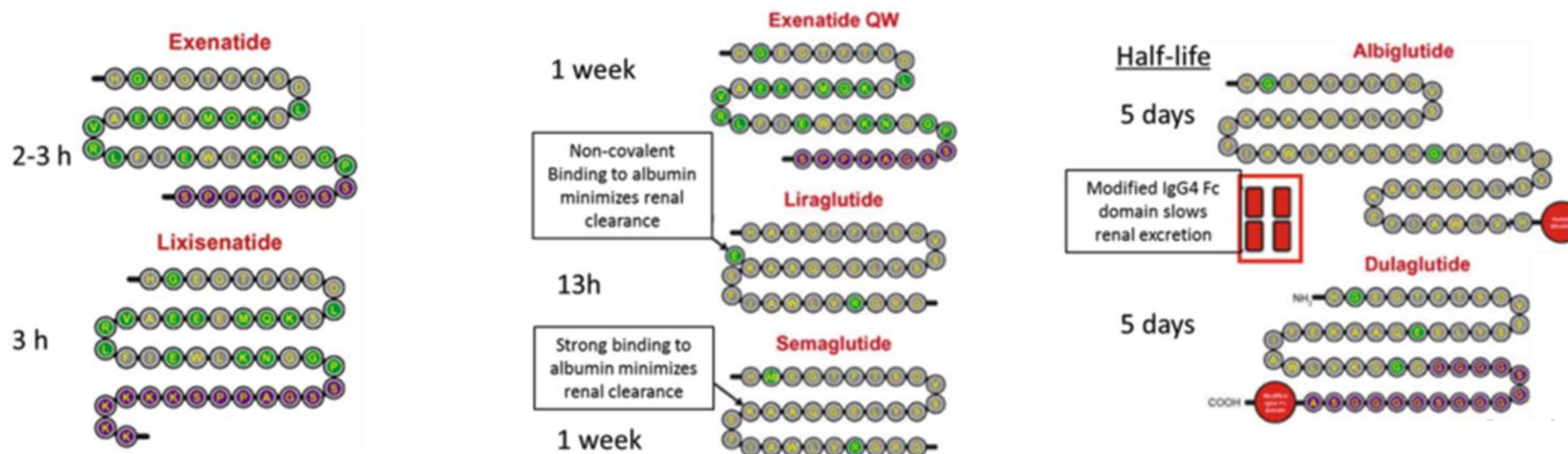
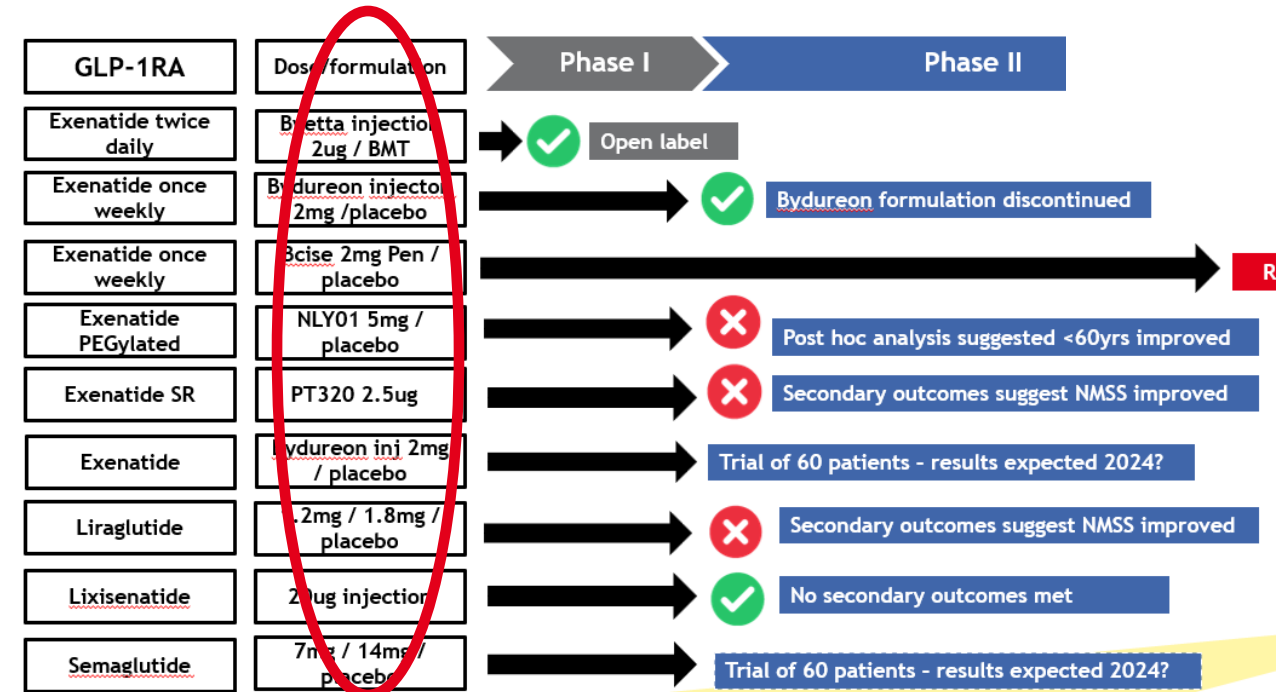
Patient selection: “Early” PD vs Established PD; <60yrs vs >60yrs; insulin resistance vs all patients

Placebo “unblinding”: influencing results

GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

Yes

- Very strong pre-clinical across multiple animal toxin, transgenic models and human iPSC models of PD demonstrating GLP-1 agonists halt / improve / protect pathology of PD
- Heterogenous methodology of trials
- Not clear what is the “right” drug and dose?



GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

Yes

- Very strong pre-clinical across multiple animal toxin, transgenic models and human iPSC models of PD demonstrating GLP-1 agonists halt / improve / protect pathology of PD
- Heterogenous methodology of trials
- Not clear what is the “right” drug and dose?
- Human comparative BBB is lacking

THE LANCET

Articles

Exenatide once weekly versus placebo in Parkinson's disease: a randomised, double-blind, placebo-controlled trial



Dilan Athauda, Kate MacLagan, Simon S Skene, Martha Bajwa-Joseph, Dawn Letchford, Kashfia Chowdhury, Steve Hibbert, Natalia Budnik, Luca Zampieri, John Dickson, Yazhou Li, Iciar Aviles-Olmos, Thomas T Warner, Patricia Limousin, Andrew J Lees, Nigel H Greig, Susan Tebb, Thomas Foltynie

Exenatide (Bydureon): ~ Penetrates CSF ~ 2.5% serum level

SHORT COMMUNICATION

Transfer of liraglutide from blood to cerebrospinal fluid is minimal in patients with type 2 diabetes

M Christensen^{1,2}, AH Sparre-Ulrich^{1,3}, B Hartmann⁴, U Grevstad⁵, MM Rosenkilde³, JJ Holst⁴, T Vilsbøll¹ and FK Knop^{1,4}

Liraglutide: Does not penetrate CSF

GLP-1 agonists & Parkinson's – should we continue to explore this drug class?

Going forward

- Collaboration and data sharing across GLP-1 clinical trials to identify gaps in knowledge and biomarkers of target engagement
- Newer dual and Triple agonists (GLP-1 / GIP / Glucagon) show greater promise and may be more effective molecules



Thank you

**Department of Clinical
and Movement
Neurosciences, NHNN,
London**

**Translational Gerontology
Branch, Intramural Research
Program, NIH, Baltimore**

**Laboratory of Neurosciences,
Intramural Research Program,
NIH, Baltimore**

**The Francis Crick Institute,
London**

Thomas Foltynie

Andrew Lees

Huw Morris

Iciar Aviles-Olmos

John Dickson

Kate Maglagan

Simon Skene

Nigel H Greig

Yazhou Li

David Tweedie

Dimitrios Kapogiannis

Seema Gulyani

Maja Mustapic

Sahil Chawla

Sonia Gandhi

Minee-Liane Choi

Wei-Jia Zhang

Gurvird Viridi

James Evans

Aaron Wagen

Laura Sanchez

