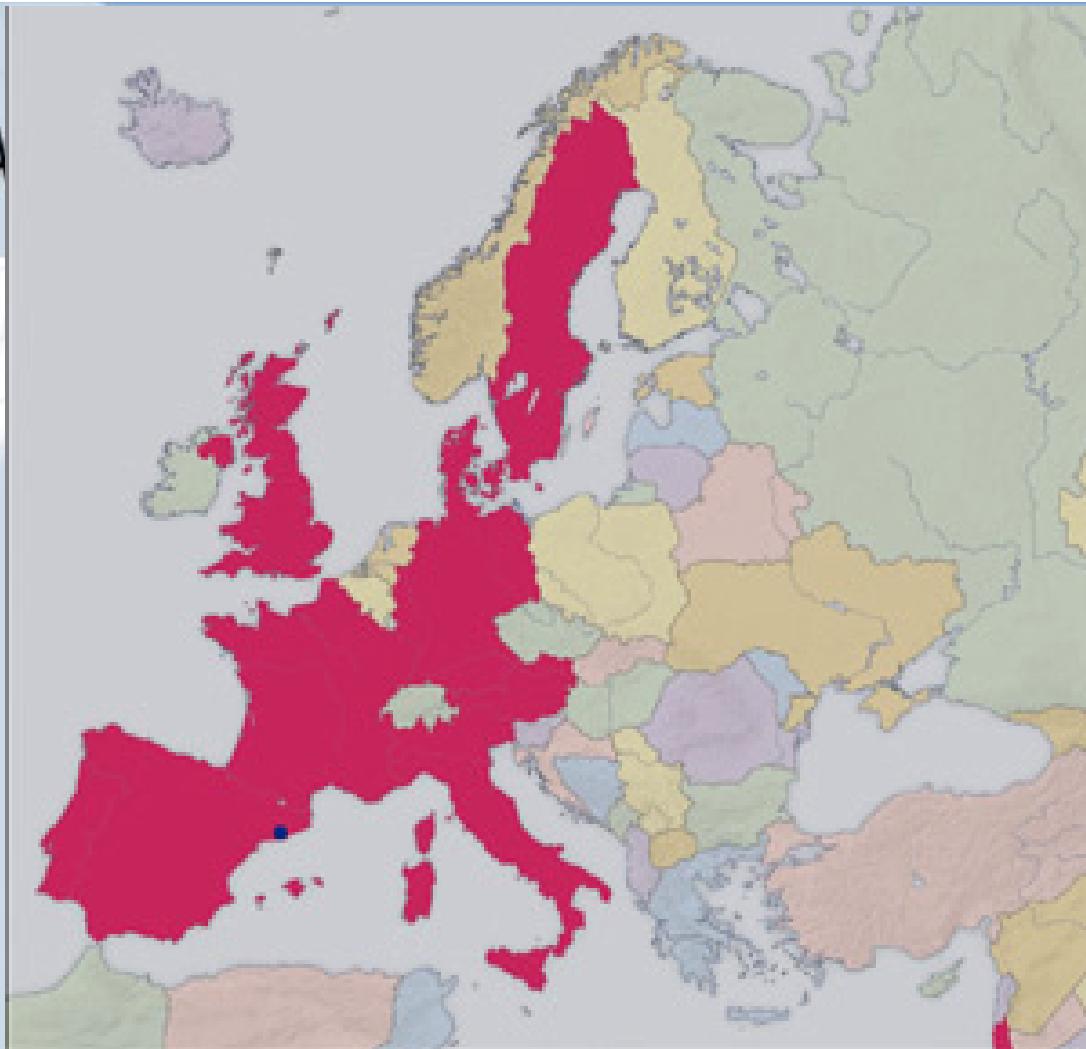


EMSA-SG: the first 10 years (1999 – 2009)



EMSA Study Sites	
Innsbruck	Werner Poewe, Gregor K Wenning
Aarhus	Karen Østergaard
Bordeaux	Francois Tison
Toulouse	Olivier Rascol
Bonn	Thomas Klockgether
Kiel	Günther Deuschl
Marburg	Wolfgang Oertel
Tübingen	Thomas Gasser
Petach-Tiqva	Ruth Djalldetti
Tel Aviv	Nir Giladi
Milano 1	Angelo Antonini
Milano 2	Alberto Albanese
Naples	Paulo Barone
Rome	Giuseppe Meco
Lisboa	Cristina Sampaio
Lund	Håkan Widner
Barcelona	Eduardo Tolosa
Santander	Jose Berciano
Cardiff	Huw Morris
London	Andrew J. Lees



Coordinators



Werner Poewe
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EMSA Post-Doc



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EMSA-SG Steering Board June 2009



D Brooks



CJ Fowler



T Gasser



T Klockgether



A Lees



C Sampaio



C Mathias



W Oertel



N Quinn



E Tolosa



O Rascol



F Tison



EMSA-SG: Milestones

- **01 / 1999 First meeting in Innsbruck**
- **06 / 2000 FP5 grant approval (560.000 Euro)**
- **12 / 2001 UMSARS established**
- **01 / 2002 Launch of EMSA Registry**
- **12 / 2002 Launch of natural history study**
- **Since 2003: Clinical projects (SLE_EMSA, Cognition, Diagnostic criteria, Neuroimaging), Clinical trials (MEMSA & rhGH), Genetic studies, EMSA website**



ENQUIRIES

DONATIONS



European Multiple System Atrophy Study Group

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Country specific patient information

[Danmark](#) | [Deutschland](#) | [England](#) | [Espania](#) | [France](#) | [Israel](#) | [Italia](#) | [Österreich](#) | [Portugal](#) | [Slovenia](#) | [Sweden](#)

The European Multiple System Atrophy Study Group ([ORGANIGRAM](#)) was founded in January 1999. It represents a consortium of scientific investigators from academic and research centres in Europe and Israel who are committed to clinical trial activity and other research studies aimed at improving the treatment of MSA. To this end, EMSA-SG aims to advance knowledge about the aetiology and pathogenesis of MSA. Furthermore, EMSA-SG will work with government and industry sponsors to develop and implement novel therapeutic interventions in MSA. EMSA-SG is committed to the principles of open and full scientific communication. EMSA-SG is also interested in educating professionals and the public by providing scientific and medical information about MSA. EMSA-SG intends to pursue these objectives globally in close cooperation with the North American MSA Study Group (NAMSA-SG, Coordinating Office: Rochester, Minnesota, USA), the Japanese MSA Study Group (JAMSA-SG, Coordinating Office: Tokyo) and the Chinese MSA Study Group (CNMSA-SG, Coordinating Office: Beijing).

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EMSA Website

www.emsa-sg.org

EMSA Registry: Minimal Data Set



EMSA-SG REGISTRY BASELINE MDS

Patient code --

A. Personal Data

1. Date of examination
(dd.mm.yyyy) ----
2. Date of data entry
(dd.mm.yyyy) ----
3. Age
4. Hoehn & Yahr stage
5. Clinical diagnosis of

- MSA-P ¹	<input type="checkbox"/> Yes <input type="checkbox"/> No
- suspected	<input type="checkbox"/>
- definite	<input type="checkbox"/>

- MSA-C ¹	<input type="checkbox"/> Yes <input type="checkbox"/> No
- suspected	<input type="checkbox"/>
- definite	<input type="checkbox"/>
6. Time of symptom onset²
(mm.yyyy) ----
(If month not known, enter NK for month)
7. Family history³
If yes, please specify
8. Serum acquired Yes No
9. CSF acquired Yes No
10. DNA available Yes No

EMSA-SG REGISTRY BASELINE MDS

Patient code --

B. Current drug history

List all medications (prescription and over-the-counter, including vitamins) taken within the past three months. Please state total daily dose (TDD) using appropriate units (e.g. mg), route (e.g. **oral/rectal/sc/im/iv**), and presence or absence of clinically significant benefit and side effects as judged by investigator.

B.1 Antiparkinsonian Drugs

B.1.1 MAO-B-inhibitors Yes No Unknown

Drugs (generics)	TDD (Unit) / Route	Clinical benefit*	Side effects**
		yes no unkn.	yes no unkn.
Selegiline	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Rasagiline	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Others:	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

* if yes, please specify _____

** if yes, please specify _____

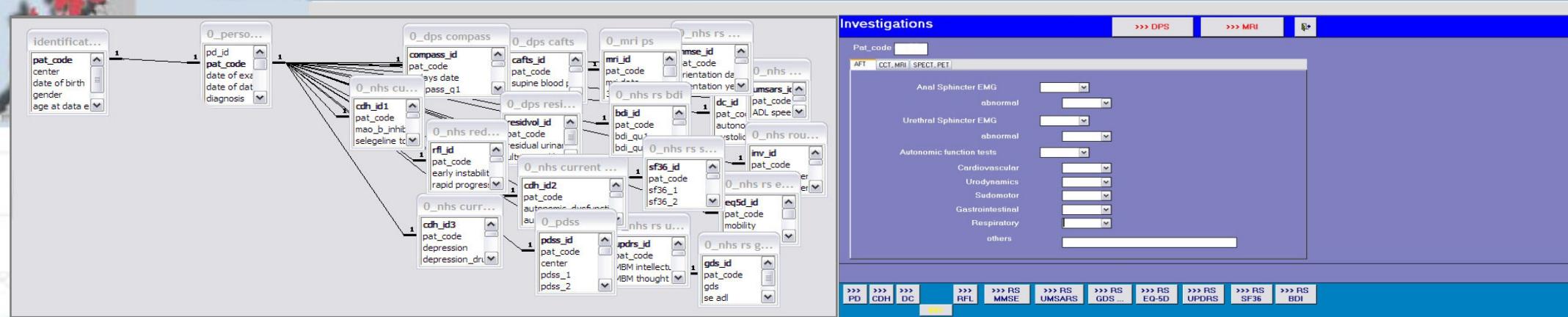
B.1.2 COMT-inhibitors Yes No Unknown

Drugs (generics)	TDD (Unit) / Route	Clinical benefit*	Side effects**
		yes no unkn.	yes no unkn.
Entacapone	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Tolcapone	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Others:	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	<input type="text"/> - <input type="text"/> /____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

* if yes, please specify _____

** if yes, please specify _____

EMSA Registry: Central Database



- Data protection:
 - Patient codes (saved externally)
 - Database and user interface password protected
- Quality control:
 - User interface
 - Plausibility check
 - Data check on random samples

EMSA Registry: Study population

Country (n)	Age (years)	dd (years)	m:f Ratio	FA (%)
Europe (443)	57.5 ± 9.2	5.85 ± 3.82	1 : 0.96	4.9
Denmark (15)	58.9 ± 7.7	5.60 ± 3.55	1 : 2	0
Germany (44)	57.4 ± 8.4	4.30 ± 3.28	1 : 0.80	2.3
England (61)	53.8 ± 8.0	5.52 ± 1.89	1 : 1.03	5.0
France (73)	60.3 ± 9.2	6.17 ± 4.19	1 : 1.20	2.7
Israel (87)	57.7 ± 10.7	6.59 ± 4.90	1 : 0.90	10.3
Italy (40)	58.5 ± 8.9	4.73 ± 2.75	1 : 1.20	2.6
Austria (60)	57.4 ± 9.0	6.04 ± 3.48	1 : 1	3.9
Portugal (13)	58.8 ± 8.9	5.92 ± 3.36	1 : 0.30	0
Sweden (15)	59.6 ± 8.3	8.66 ± 6.23	1 : 0.67	20.0
Spain (35)	56.7 ± 7.8	5.64 ± 2.60	1 : 0.75	0

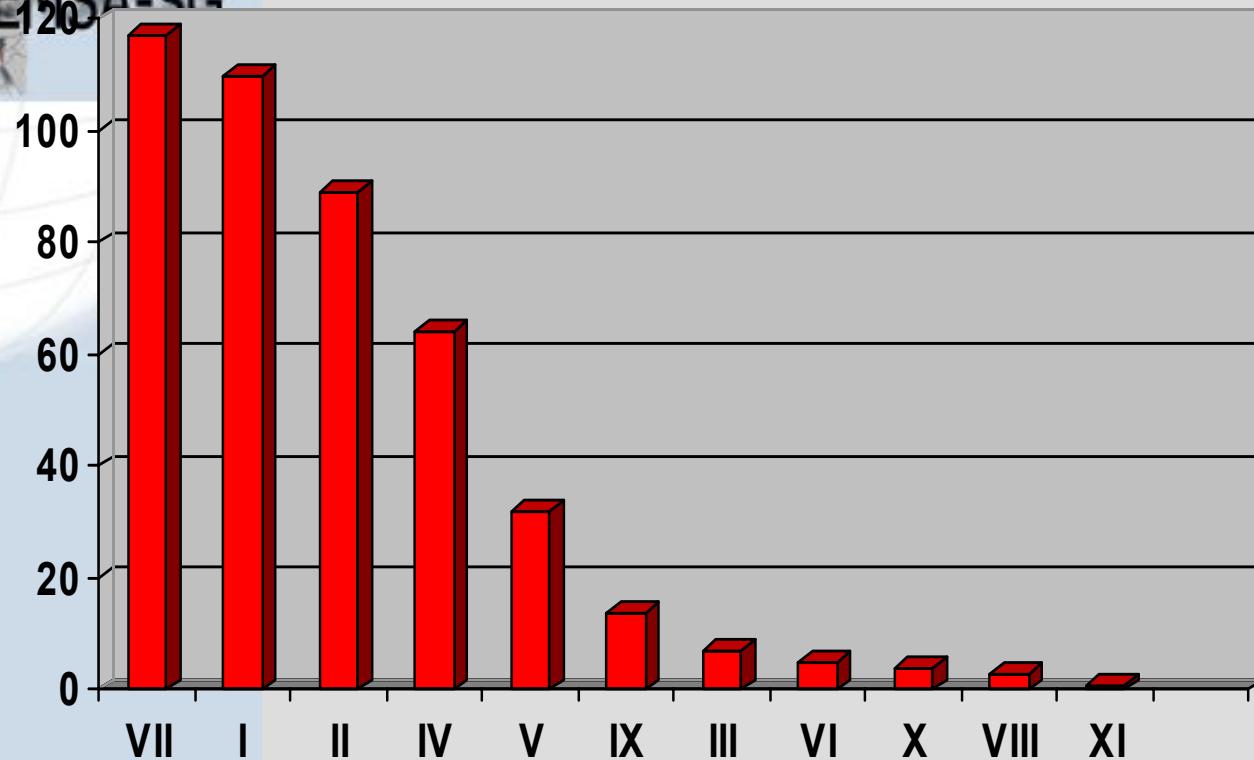
EMSA Registry: Diagnosis

Country (n)	Consensus Criteria (%)			
	MSA-P	MSA-C	possible	probable
Europe (443)	68.4	31.6	23.7	76.3
Denmark (15)	73.3	26.7	40.0	60.0
Germany (44)	68.2	31.8	18.2	81.8
England (61)	67.2	32.8	23.0	77.0
France (73)	75.3	24.7	20.5	79.5
Israel (87)	72.4	27.6	31.0	69.0
Italy (40)	67.5	32.5	35.0	65.0
Austria (60)	71.7	28.3	20.0	80.0
Portugal (13)	92.3	7.7	46.2	53.8
Sweden (15)	66.7	33.3	13.3	86.7
Spain (35)	31.4	68.6	2.9	97.1

EMSA Registry: Clinical Spectrum



EMSA-SC



- I park, atax, dysaut, pyram
- II park, atax, dysaut
- III park, atax, pyram
- IV park, dysaut, pyram
- V atax, dysaut, pyram
- IV park, atax
- VII park, dysaut
- VIII park, pyram
- IX atax, dysaut
- X atax, pyram
- XI dysaut, pyram

Revised MSA Criteria International Consensus Conference



Boston 04 2007



Approval of NIH Grant for Revision of MSA Consensus Criteria 10 / 2006
(NINDS Grant 1 R13 NS055459)



14 EMSA Publications

Koellensperger et al. Mov Disord 2009 in press.

Dodel et al. Mov Disord 2009 in press.

Scholz et al. Ann Neurol 2009; 65: 610-4

Petzold et al. J Neurol Sci. 2009 ; 279: 76-9

Gilman et al. Neurol 2008; 71: 670-6.

Koellensperger et al. Mov Disord 2008; 23: 1093-1099.

Koellensperger et al. Eur J Neurol 2007; 14: 66-72.

Holmberg et al. Mov Disord 2007; 22: 1138-44

Geser et al. Mov Disord 2006; 21: 179-86.

Ozawa et al. J Neurol Neurosurg Psychiatry 2006; 77: 464-7.

Schrag et al. Mov Disord 2006; 21: 809-15.

Geser et al. J Neural Transm 2005; 112: 1677-86.

Healy et al. Mov Disord 2005; 20: 1338-43.

Kamm et al. Brain 2005; 128: 1855-60

+ 29 Abstracts

Cooperation with North American MSA Study Group - Coordinators -



C Shults □ 2003-2007



P Low 2007-





Cooperation with Japanese MSA Consortium - JAMSAC Coordinator



S Tsuji



EMSA-SG: goals for the next 10 years

- **Elucidate aetiopathogenesis**
- **Develop better transgenic models**
- **Improve surrogate markers / early diagnosis**
- **Identify candidate neuroprotective agents**
- **Conduct phase ii / iii intervention trials**