

During the 2015 International Dementia with Lewy Bodies (DLB) Conference, the world's leading DLB researchers, caregivers and practitioners convened to share and learn the latest in DLB research over past decade. The field of dementia is already moving to earlier clinical trials at the prodromal stage of dementia. Different study groups sought to examine the prodromal factors that best predict the risk of progression from "normal cognition" to DLB, specifically focused on sleep disorders in DLB.

It has long been known that detection of rapid eye movement sleep behavior disorder (RBD) in patients with neurodegenerative dementia may suggest Lewy body pathology [1]. RBD occurs in up to 70% of DLB patients.

Alex Iranzo reviewed the results from his large cohort study of 174 patients with idiopathic RBD. The risk of developing a neurodegenerative syndrome from the time of idiopathic RBD diagnosis was 90.9% at 14 years [2]. In a 4 year follow up, 37% (n=65) converted to a neurodegenerative disorder. While 51 3(eg)-5(i)ltof i6512(n o)12.1(f ra)19(p)12(id e)-8(y)8r2d eyr5(er)-189an <</MCID 36 >>BDC 0.1

References

1. Boeve BF, Silber MH, Ferman TJ, Kokmen E, Smith GE, et al. (1998) REM sleep behavior disorder and degenerative dementia: an association likely UHÁHFWLQJ /HZ\ ERG\ GLVHDVH 1HXURORJ\
2. Iranzo A, Fernández-Arcos A, Tolosa E, Serradell M, Molinuevo JL, et al. (2014) Neurodegenerative disorder risk in idiopathic REM sleep behavior disorder: study in 174 patients. PLoS One 9: e89741.

Iranzo A, Lomeña F, Stockner H, Valdeoriola F, Vilaseca I, et al. (2010) Sleep Innsbruck Barcelona (SINBAR) group. Decreased striatal dopamine transporter uptake and substantia nigra hyperechogenicity as risk markers of synucleinopathy in patients with idiopathic rapid-eye-movement sleep behaviour disorder: a prospective study. Lancet Neurol 9: 1070-1077.
4. Postuma RB, Gagnon JF, Vendette M, Desjardins C, Montplaisir JY (2011) Olfaction and color vision identify impending neurodegeneration in rapid eye movement sleep behavior disorder. Ann Neurol 69: 811-818.
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