

ARE PSP AND CBD THE SAME DISEASE? AGAINST

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There are no biological markers for the diagnosis of progressive supranuclear palsy (PSP) and corticobasal degeneration (CBD), diagnosis relies on clinical features, confirmed by pathology. Because CBD and PSP are both 4-repeat tauopathies that share an association with the H1 haplotype and may at times be difficult to distinguish from each other, it is being questioned if they are the same nosological entity. However, as the natural history of PSP and CBD differ (e.g., pattern of disabilities, predictors of survival) and neuropathologic criteria distinguish CBD from PSP, they are currently considered separate nosological entities—they can be clinically and pathologically differentiated from each other. Moreover, whereas the PSP clinical phenotype accurately predicts the neuropathologic phenotype, but the CBD phenotype corresponds to various underlying pathologies (i.e., CBD and PSP but also Alzheimer, progranulin, etc), one questions if the CBD phenotype reflects selective cell vulnerability of the involved areas to various pathogenic mechanisms. Grouping PSP and CBD into a single nosologic entity may be premature and may compromise epidemiologic and therapeutic research on both disorders.