Table 1

The International Parkinson and Movement Disorder Society clinical diagnostic criteria for Parkinson's disease[4]

Parkinsonism is defined as bradykinesia, in combination with at least one of rest tremor or rigidity.
- A diagnosis of 'clinically established Parkinson's disease' requires parkinsonism + the absence of absolute exclusion criteria + at least two supportive criteria + no red flags.
- A diagnosis of 'clinically probable Parkinson's disease' requires parkinsonism + the absence of absolute exclusion criteria + the number of red flags must be counterbalanced by the number of supportive criteria (no more than 2 red flags allowed for this category).

Supportive criteria	Absolute exclusion criteria [and suggested alternative diagnosis]	Red flags [and suggested alternative diagnosis]
Clear and dramatic beneficial response to dopaminergic therapy	Cerebellar signs [**multiple system atrophy (MSA)**]	Rapid progression of gait impairment requiring wheelchair use within 5 years of symptom onset [**progressive supranuclear palsy (PSP), corticobasal syndrome (CBS), MSA**]
Presence of levodopa-induced dyskinesia	Downward vertical supranuclear gaze palsy or slow downward saccades [**PSP**]	Absence of motor progression over ≥ 5 years unless stability is related to treatment [**essential/dystonic tremor, drug-induced parkinsonism**]
Limb rest tremor	Behavioural variant frontotemporal dementia or progressive aphasia within 5 years [**frontotemporal dementia, PSP**]	Early severe dysphonia, dysarthria, dysphagia within 5 years of symptom onset [**PSP, MSA**]
Olfactory loss or cardiac sympathetic denervation on MIBG scintigraphy	Predominant lower limb parkinsonism for > 3 years [**vascular parkinsonism**]	Inspiratory stridor [**MSA**]
	Treatment with dopamine blocking/depleting drugs [**drug-induced parkinsonism**]	Severe autonomic failure within 5 years of symptom onset [**MSA**]
	Absent response to high dose (> 600 mg/day) levodopa [**PSP, CBS, MSA**]	Recurrent falls within 3 years of symptom onset [**PSP**]
	Cortical sensory loss, limb apraxia or progressive aphasia [**CBS**]	Disproportionate anterocollis or limb contractures within 10 years of symptom onset [**MSA**]
	Normal DAT scan [**essential/dystonic tremor, drug-induced parkinsonism**]	Absence of non-motor features after 5 years [**essential/dystonic tremor, drug-induced parkinsonism, vascular parkinsonism**]
		Otherwise unexplained pyramidal signs [**MSA, vascular parkinsonism**]
		Bilateral symmetric parkinsonism throughout disease course [**PSP, MSA**]