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## Reply to: Comment on “Summing MDS-UPDRS Parts 1 + 2 (Non-motor and Motor Experience of Daily Living): The Patient’s Voice”

We appreciate the reflections by Kovacs and colleagues<sup>1</sup> and their emphasis on the importance of clinimetric testing and statistical validation when considering the merger of rating measures. With the Movement Disorders Society Unified Parkinson's Disease Rating Scale, although logic may suggest that a sum of Motor and Non-Motor Activities of Daily Living (parts 1 and 2) will be valid, testing the premise is essential because the two parts were not specifically developed to be merged and they were not necessarily calibrated in synchrony. Approaching this challenge from two directions and arriving at the same conclusion that the sum of parts 1 and part 2 can be validly reported as a single measure strengthens the value of the scale and its components. In the context of a greater push from regulatory agencies to honor the “patient’s voice”, patient-

based inventories covering motor and non-motor disease dimensions in a single outcome become particularly relevant to clinical trials. As pointed out by our colleagues, the voice of the patient also has specifically contributed to the determination of change scores of particular relevance such as minimal clinically important differences when using anchor-based approaches. ■





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### Ethical Compliance Statement

The current study has been approved by Duke IRB (Protocol ID: Pro00107266). Declaration of patient consent—*informed patient consent* was not necessary for this work. We confirm that we have read the Journal's position on issues involved in ethical publication and affirm that this work is consistent with those guidelines.

### Data Availability Statement

Not applicable.

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**Key Words:** clinimetrics, total score, factor analysis, Parkinson's disease

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