

## CURRICULUM VITAE

**First Name, Middle Initial(s), Surname:** Paolo Barone

**Current Working Place:**

Site Name and Address: (if hospital, state Department Name followed by Hospital Name)

Centro Malattie Neurodegenerative

AOU "S.Giovanni di Dio e Ruggi d'Aragona"

Street, number: Largo Città di Ippocrate

City, State, Postal Code, Country: Salerno, 84131 , ITALY

Current Position Held: **Director of Neurodegenerative Disease center, AOU "S.Giovanni di Dio e Ruggi d'Aragona"**

**Phone No:** 0039 347 2735464

**Fax No:** 0039 089 672328

**E-mail address:** [pbarone@unisa.it](mailto:pbarone@unisa.it)

**Professional Experience (Previous Positions):**

<b>Dates of Employment MMYYYY</b>	<b>Position Held</b>	<b>Institution/Employer Name and Address (City, Country)</b>
2011-present	Full professor of neurology	Università degli studi di Salerno Via Giovanni Paolo II 132, Fisciano SA, Italia
2003-2011	Director of the research lab at Department of Neurological Sciences	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia
2006-2011	Full Professor of Neurology at Department of Neurological Sciences	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia
2003-2006	Associate Professor of Neurology at Department of Neurological Sciences	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia
1990-2003	Researcher at Department of Neurological Sciences	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia

**Education (Degrees, Specialities & Other Trainings)**

<b>Degree type/Speciality, year awarded</b>	<b>Name of Institution &amp; Address (City, Country)</b>	<b>Area of study, if applicable</b>
Medical Degree, 1980	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia	Medicine and surgery
Board in Neurology, 1984	Università degli Studi di Napoli Federico II Corso Umberto I, 40 Napoli, Italia	Neurology
PhD in Neurobiology, 1988	Università degli Studi di Napoli	Neurobiology

## CURRICULUM VITAE

	Federico II Corso Umberto I, 40 Napoli, Italia	
--	--	--

**Certification/Medical Licensure** (if applicable)      N/A:

Type/State	Year Issued	Number
Medical Licence/Italy	1980	16813/Napoli

**Experience in Clinical Trials:** Yes , if yes please complete the below table      No

Therapeutic Indication/Phase	Role (Principal Investigator/Sub-Investigator/Study Coordinator, etc.)	Number of years conducted
Parkinson Disease	Principal Investigator	About 25
Neurodegenerative disease	Principal Investigator	About 25