Litigation and neurologic research

Racette et al. review the potential impact of litigation on neurologic research. The authors discuss evidence standards, researcher bias, and burdens on researchers whose data impact lawsuits. They recommend enacting modified AAN expert testimony policy, rigorous investigator conflict of interest policy, and federal research privilege legislation.

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Motor imagery for complex regional pain syndrome (CRPS) and phantom limb pain

In a randomized controlled trial of patients with CRPS and phantom limb pain, G. Lorimer Moseley studied the effects of training in graded motor imagery. Training began with 2 weeks of a task that requires patients to make left/right judgments of pictured limbs. The patients then did 2 weeks of imagined limb movements followed by 2 weeks of mirror movements. There were benefits to both pain and disability, which was maintained at 3-month follow-up.

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The editorial by Birklein and Maihöfner notes that the Moseley study opens the door for a new era of physiotherapy of chronic pain. Since the study was controlled, randomized, and provided follow-up data for 6 months, it is superior to many other studies. However, the study could not be completely controlled: Patients knew what they were doing (or not) and might inform the investigator. Moreover, the control treatment was probably not as intense as the motor program. Both patients and investigator could have been biased. Thus it is mandatory to replicate the findings. There are no data showing how motor imagery is responsible for analgesia. It is possible that the intensive but carefully increasing training program just reduces anxiety of the patients to perform painful movements.

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Intentional motor phantom limb syndrome

The study by Staub et al. of a form of chronic supernumerary phantom limb occurring only with motor intent suggests that a preserved sense of agency provided by intact premotor processes translating intention into action may lead to the feeling of movement in a paralyzed limb.

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Lesion on MRI predicts persistent seizures in children with temporal lobe epilepsy

Spooner et al. followed 62 children with new-onset temporal lobe epilepsy, ascertained from the community. Median age at follow-up was 20 years and median follow-up period was 14 years. Nineteen patients were seizure free and off treatment, while 43 had ongoing seizures or had undergone epilepsy surgery. All 28 patients with lesions on MRI had seizures.

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The editorial by Mathern and Trevathan evaluates the findings of Spooner et al. in the context of the long-term care of children with seizures. They make a strong argument for vigilant follow-up and re-assessment, especially for those who become intractable to medical treatment; in some cases, lesions not previously noted may be uncovered, prompting a surgical workup. The implications for development and long-term outcome are discussed.

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Migraine with rising and falling estrogen

MacGregor et al. examined migraine and daily urinary hormone levels in 38 women with menstrually related migraine. They showed that falling estrogen levels during the menstrual cycle are associated with migraine attacks, while rising levels of the hormone appear to have a protective effect.

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Estradiol supplements for menstrual attacks of migraine

In a double-blind placebo-controlled six-cycle crossover study of perimenstrual estradiol to prevent menstrual attacks of migraine, MacGregor et al. showed that the benefits of estradiol during treatment may be offset by deferred estrogen withdrawal migraine.

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■ Protection from age-related decline in cognitive function

Barzilai et al. showed that a genetic polymorphism associated with an exceptional longevity gene is also associated with successful cognitive aging. An exonic polymorphism in a gene that regulates lipoprotein levels and particle size, the cholesterol ester transfer protein (CETP) is over-represented in centenarians. Those with the favorable genotype had higher HDL levels, larger lipoprotein particle size, and were <3 times more likely to have an MMSE score of >25, reflecting preservation of cognitive function. This association was confirmed in an independent sample of 75- to 85-year-olds.

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■ WMH associated with increasing cognitive impairment

Yoshita et al. evaluated changes in white matter hyperintensities (WMH) associated with increasing cognitive impairment. Extension of WMH associated with MCI and AD may indicate involvement of strategic white matter bundles potentially contributing to the cognitive deficits seen with these syndromes.

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■ Oxcarbazepine for oxaliplatin-induced neuropathy

In a randomized controlled trial, Argyriou et al. found that the incidence of oxaliplatin-induced neuropathy in patients with colon cancer assigned to receive oxcarbazepine was significantly lower than it was in the control patients.

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■ Primary thunderclap headache vs benign CNS angiopathy

Multifocal segmental cerebral vasoconstriction (black arrows). Three-dimensional time-of-flight MRA.

Chen et al. report on a group of 56 patients with recurrent thunderclap headache (with/without vasoconstriction) who displayed consistent clinical features. The majority of patients were middle-aged women and most identified at least one trigger and responded to nimodipine. Four (7%) developed stroke.

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■ Treatment and long-term remission of epilepsy

Leone et al. followed 419 patients with a first generalized tonic-clonic seizure, randomized to immediate antiepileptic treatment or to treatment only in the event of seizure recurrence. Ten years after the seizure, patients in the two groups had a similar probability of achieving a 2-year remission (85% and 86%) and a 5-year remission (64% for both).

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