In Focus

Spotlight on the June 14 Issue

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Predicting motor outcome and death in term hypoxic-ischemic encephalopathy

The authors examined 175 term infants with evidence of perinatal asphyxia, hypoxic-ischemic encephalopathy, and basal ganglia-thalamic injury early MRI scans. They showed that early MR imaging may be used to predict death and specific motor outcomes in this population.

See p. 2055; Editorial, p. 2048

Evaluating the prevalence of polyglutamine repeat expansions in amyotrophic lateral sclerosis

The authors tested whether polyQ expansions in other polyQ disease genes also conferred risk for ALS by examining these sequences in nine different polyQ disease genes of ALS patients and controls. The connection between polyQ expansions and ALS risk were likely for ataxin 2, rather than polyQ disease genes in general.

See p. 2062; Editorial, p. 2050; see also p. 2066

Expanded ATXN2 CAG repeat size in ALS identifies genetic overlap between ALS and SCA2

Intermediate repeat CAG expansions in ATXN2, the gene underlying SCA2, are associated with ALS. In this study, even longer CAG repeat expansions were observed in a large cohort of sporadic and familial ALS, suggesting that SCA2 may present as ALS and that there is a genetic overlap between these neurodegenerative disorders.

See p. 2066; Editorial, p. 2050; see also p. 2062

From editorialists Kenneth H. Fischbeck and Stefan M. Pulst: "The take-home lesson for neurologists is to be aware that ALS and SCA2 can have partially overlapping clinical features. Accurate diagnosis has important implications for a patient's prognosis and the risk to family members."

See p. 2050

Paraneoplastic isolated myelopathy: Clinical course and neuroimaging clues

This study describes the clinical phenotype and outcome of 31 cases of paraneoplastic isolated myelopathy. It yields three important observations: symmetric, longitudinally extensive tract or gray matter-specific changes on MRI were common; disability developed quickly and was generally severe; only a minority of patients improved with treatment.

See p. 2089

Sustained motion perception deficit following optic neuritis: Behavioral and cortical evidence

This study assessed recovery over one year in 21 patients with unilateral, first-ever optic neuritis. Sustained motion perception deficit following optic neuritis may explain the

continued visual complaints of patients long after recovery of visual acuity and should be included in routine ophthalmological tests.

See p. 2103; Editorial, p. 2052

Lower prevalence of silent brain infarcts in the physically active: The Northern Manhattan Study

This study examined 1238 clinically stroke-free participants. Sixty percent were women and 65% were Hispanics; 43% reported no physical activity. Their findings suggest physical activity as a modifiable risk factor for silent infarcts, which were associated with cognitive decline and stroke risk. Exercise may be an important strategy in reducing cerebrovascular disease.

See p. 2112

CLINICAL/SCIENTIFIC NOTES

Longitudinal change in CSF biomarkers in a presymptomatic carrier of an APP mutation

The authors report changes in CSF biomarkers in a presymptomatic carrier of the V717I mutation in the amyloid precursor protein gene before the expected onset of clinical symptoms. These findings indicate CSF biomarker changes occur early during the presymptomatic state in familial Alzheimer disease.

See p. 2124

Interleukin-7 receptor alpha gene polymorphism influences multiple sclerosis risk in Asians

This study investigated the association of the IL-7RA SNP rs6897932 with non-neuromyelitis optica MS and neuromyelitis optica in samples from 265 patients and 158 unrelated healthy controls. The rs6897932 polymorphism of the IL-7RA gene confers MS susceptibility in both Caucasians and Asians.

See p. 2125

NB: Special Editorial by Michael Brooke, see p. 2046. To check out the Humanities section, point your browser to <http://www.neurology.org>

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