In Focus

Spotlight on the September 6 Issue

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Loss of network efficiency associated with cognitive decline in chronic epilepsy

Forty-one adults with cryptogenic localization-related epilepsy and 23 controls underwent an intelligence test and fMRI with a silent-word generation paradigm. Possible changes in

cerebral network efficiency were assessed by performing graph theoretical network analysis. These findings support the hypothesis that chronic localization-related epilepsy causes cognitive deficits by inducing global cerebral network changes instead of a localized disruption only.

See p. 938

From editorialist Kimford J. Meador: "...the effects of pathologic processes on normal physiologic brain activity are of considerable clinical relevance. Further, an understanding of how neurons interact across networks is critical to understanding normal brain function."

Editorial, p. 930

Psychogenic nonepileptic seizures in US veterans

The authors reviewed records of 203 veterans and 726 civilians admitted to a Veterans Affairs Medical Center EMU over a 10-year interval. Veterans with psychogenic nonepileptic seizures had a 5-fold longer delay from seizure onset to definitive diagnosis by video-EEG monitoring, and a 4-fold greater cumulative antiepileptic drug exposure.

See p. 945

Magnetic resonance spectroscopy, β -amyloid load, and cognition in a population-based sample of cognitively normal older adults

^1H MRS and amyloid imaging with PET were performed in a population-based sample of 311 cognitively normal older adults. ^1H MRS markers were associated with amyloid load on PET and cognitive function and were sensitive to the preclinical Alzheimer disease pathologic processes.

See p. 951; Editorial, p. 932

Paroxysmal choreoathetosis/spasticity (DYT9) is caused by a GLUT1 defect

Two unrelated DYT9 families were clinically reinvestigated along with 139 index cases with dominant or sporadic hereditary spastic paraparesis, in which relevant dominant genes were partially excluded. The findings add permanent spastic paraparesis with paroxysmal dyskinesia to the spectrum of GLUT1-associated syndromes, offering a specific therapy.

See p. 959; Editorial, p. 934

Factors influencing in-hospital mortality and morbidity in patients treated on a stroke unit

The authors tested to what extent specific factors contribute to the risk of poor outcome in acute stroke. Only one-third was attributable to modifiable factors such as pneumonia and other complications; to improve stroke outcome, such factors should be the focus of acute treatment and future research.

See p. 965

Phase II screening trial of lithium carbonate in amyotrophic lateral sclerosis: Examining a more efficient trial design

The mean rate of decline of the ALS Functional Rating Scale-Revised was greater in 107 patients taking lithium carbonate compared with 249 control patients. The lack of therapeutic benefit and safety concerns, together with similar results from 2 other recent trials, weighs against the use of lithium carbonate in patients with ALS.

See p. 973; Editorial, p. 936

Retinoic acid reduces chemotherapy-induced neuropathy in an animal model and patients with lung cancer

The authors evaluated the effect of all-trans retinoic acid (ATRA) in non-small-cell lung cancer. Treatment in 95 patients was randomized to either ATRA (20 mg/m²/day) or placebo. ATRA reduced chemotherapy-induced experimental neuropathy, increased nerve growth factor levels, and induced retinoic acid receptor- β expression in nerve.

See p. 987

NB: "NeuroImages: The forgotten nails: Hemionychophagia" (see p. 1015) and Special Editorial by Dr. Robert C. Griggs (see p. 928). To check out other NeuroImages and Special 60th Anniversary papers, point your browser to <http://www.neurology.org>.

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