In Focus

Spotlight on the February 4 Issue

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ASA failure: Does the combination ASA/clopidogrel confer better long-term vascular protection? 📖 📖 📖

The authors analyzed the efficacy of combining 2 frequently prescribed antiplatelets (clopidogrel and ASA) for long-term vascular prevention in 838 patients with a recent ischemic stroke. With the addition of clopidogrel to ASA in patients with a lacunar stroke while taking ASA, there was no reduction of vascular events compared to ASA alone.

See p. 382

From editorialists Castilla-Guerra & Sacco: "Some simple measures to enhance platelet response to ASA include improving patient adherence, avoiding drug interactions, and aggressively controlling other modifiable vascular risk factors."

See p. 376

Quantitative sleep stage analyses as a window to neonatal neurologic function

Polysomnograms of 28 neonates showed that decreased time in quiet sleep, increased EEG delta power during quiet sleep, and some aspects of sleep stage transitions predicted better neurologic examination scores. Monitoring sleep of critically ill newborns may provide objective insight into the CNS function.

See p. 390

Electrographic status epilepticus and long-term outcome in critically ill children

This study enrolled 300 children with an acute neurologic condition and encephalopathy who underwent EEG monitoring. Among children with acute neurologic disorders who were neurodevelopmentally normal, electrographic status epilepticus but not electrographic seizures was associated with increased risk of unfavorable global outcome, lower quality of life, and increased risk of epilepsy.

See p. 396

Progressive myoclonic epilepsies: Definitive and still undetermined causes

The authors presented clinical data from 204 patients, including 77 with a diagnosis of Unverricht-Lundborg disease and 37 with a diagnosis of Lafora body disease. Thirty-one

patients had progressive myoclonic epilepsies due to rarer genetic causes, mainly neuronal ceroid lipofuscinoses, suggesting clues suitable for classifying the patients and updating their diagnostic workup.

See p. 405; Editorial, p. 378

Importance of nondopaminergic features in evaluating disease severity of Parkinson disease

Principal component analysis of 6 predominantly nondopaminergic Parkinson disease (PD) domains showed a coherent pattern over the course of the disease, while the composite score demonstrated adequate reliability and validity. Given the multisystem nature of PD and the confounding effects of dopaminergic medication, a composite measure provides an appropriate method to evaluate severity and progression of the disease.

See p. 412; Comment, p. 417

Higher RBC EPA + DHA corresponds with larger total brain and hippocampal volumes: WHIMS-MRI Study

The authors examined anatomical brain regions by volumetric MRI in 1,100 postmenopausal women from around the country who participated in the WHIMS Study. A 4.1% greater RBC EPA + DHA level was associated with a 0.16 cm³ larger hippocampus. Substantially raising RBC EPA + DHA levels through dietary changes and supplementation may slow progression to dementia.

See p. 435

Burden of encephalitis-associated hospitalizations in the United States, 1998-2010 📖

Using the Nationwide Inpatient Sample, the estimated number of encephalitis-associated hospitalizations occurring in the United States during 1998-2010 was 263,352, which corresponded to an average of 20,258 encephalitis-associated hospitalizations per year. Improvements in diagnostic modalities have improved our ability to identify causes of encephalitis-associated hospitalizations; however, the fact that 50% of cases did not have a confirmed etiology indicates continuing challenges to diagnosis.

See p. 443

NB: "Tournay's description of anisocoria on lateral gaze: Reaction, myth, or phenomenon?" see p. 452. To check out other *Historical Neurology* articles, point your browser to www.neurology.org.

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