In Focus

Spotlight on the July 15 Issue

Robert A. Gross, MD, PhD, FAAN
Editor-in-Chief, *Neurology*®

Functional connectivity in the basal ganglia network differentiates PD patients from controls ▲

Traditional MRI has little diagnostic utility in early Parkinson disease other than to exclude other pathologies. Using fMRI, the authors detected abnormalities in resting basal ganglia activity in patients with 85% accuracy. The sensitivity of this measure in early

Parkinson disease suggests potential as a diagnostic preclinical marker.

See p. 208

From editorialists Bohnen & Martin: "Although clinical translation of RS-fMRI to real-world neurology practice will need to clear many more hurdles, this proof-of-concept study offers great promise for the future."

See p. 202

Prevalence of fatigue in Parkinson disease and its clinical correlates

The authors assessed 394 patients who completed the 16-item Parkinson Fatigue Scale (PFS-16) questionnaire with a mean score of 2.87 ± 0.99 . One hundred thirty-six patients with distressing fatigue were older and had a longer duration of Parkinson disease. Since the presence of fatigue worsens patients' quality of life, there is an imperative to diagnose and treat this debilitating symptom.

See p. 215

Recurrent stroke predictors differ in medically treated patients with pathogenic vs other PFOs

The authors tested 15 clinical, 5 radiologic, and 3 echocardiographic variables for associations with stroke recurrence using Cox survival models with component database as a stratification factor. Recurrent stroke is associated with echocardiographic features only in those with likely pathogenic PFOs based on a higher Risk of Paradoxical Embolism score.

See p. 221; Editorial, p. 204

High-dose methotrexate with or without rituximab in newly diagnosed primary CNS lymphoma ▲

This retrospective study evaluated the efficacy of rituximab when added to high-dose methotrexate (HD-MTX) in patients with newly diagnosed immunocompetent primary CNS lymphomas (PCNSLs). The addition of rituximab to HD-MTX appears to improve complete response rates as well as overall and progression-free survival in patients with newly diagnosed PCNSL.

See p. 235

Shared medical appointments improve QOL in neuromuscular patients: A randomized controlled trial ▲

This trial of 272 patients showed improved quality of life and decreased time spent per patient by the neurologist after attending shared medical appointments compared to individual appointments. Shared medical appointments may provide an effective alternative for outpatient care.

See p. 240

Symptom onset in autosomal dominant Alzheimer disease: A systematic review and meta-analysis

In this meta-analysis of autosomal dominant Alzheimer disease (ADAD), family history accurately predicted age at symptom onset, providing unique advantages for prevention trials in presymptomatic ADAD. Many mutations had similar progression to sporadic Alzheimer disease, suggesting these diseases may be more similar than previously thought.

See p. 253

VIEWS & REVIEWS

Defining the clinical course of multiple sclerosis: The 2013 revisions

This review provides clinical course descriptions subcategorized by MRI evidence of activity or whether patients had a history of progressive disease. These refinements will provide better assessment of ongoing multiple sclerosis.

See p. 278; Editorial, p. 206

NB: "Gerstmann, Sträussler, and Scheinker: The persecution of the men behind the syndrome," see p. 272. To check out other *Historical Neurology* articles, point your browser to Neurology.org.

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Neurology 2014;83;201

DOI 10.1212/WNL.0000000000000609

This information is current as of July 14, 2014

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