Rehabilitation

Solari et al. (p. 57), in their randomized, single-blind, controlled trial, assess the efficacy of an inpatient rehabilitation program on impairment, disability, and quality of life. They report that rehabilitation improved disability and had a positive impact on the mental components of health-related quality of life perceptions at 3 and 9 weeks. ♦ Freeman et al. (p. 50) evaluate long-term carry-over benefit in patients who underwent short-term inpatient physical rehabilitation. They conclude that carry-over declined over time, reinforcing the need for continuity of care between the inpatient setting and the community. ♦ In her editorial pertaining to the above two studies, Aisen (p. 8) emphasizes the need for cooperative multicenter trials comparing different inpatient and outpatient protocols. Important goals include assessing new rehabilitation treatment protocols, adopting standardized outcome measures, examining different lengths of hospitalization, and considering pharmacoeconomic impacts. ♦ Schwartz et al. (p. 63) note that self-reported data can provide a cost-effective means to assess patient functioning. Their multicenter study validates two new patient-reported measures of neurologic impairment and disability for use in MS clinical research.

Myoclonus

In an original pharmacologic study, Pappert et al. (p. 16) identify specific serotonin receptor subtype antagonists effective in inhibiting myoclonus in the posthypoxic rat. The authors suggest that these receptor subtypes may be involved in posthypoxic myoclonus. ♦ An editorial by Simon (p. 7) cautions that "posthypoxic" myoclonus can actually be caused by hypoxia or ischemia. The author describes the

differential mechanisms distinguishing the two etiologies. ♦ The Clinical/Scientific Note by Evidente et al. (p. 211) presents a patient with focal cortical transients detected on EEG. The authors note that these transients have also been seen in patients with posthypoxic myoclonus. The tricyclic antidepressant and lithium that the patient was taking may have produced cortical myoclonus through serotonergic mechanisms.

Alzheimer's disease

Andersen et al. (p. 85) report incidence rates of 29.5 per 1,000 person-years for very mild to severe dementia and 20.9 for AD. Unlike some other studies, the rates are similar for men and women. ♦ Launer et al. (p. 78) report on a pooled analysis of four European population-based prospective studies. They note that, contrary to previous reports, head trauma is not a risk factor for AD, and smoking does not protect against AD. The association of family history to the risk for AD is weaker than previously estimated on the basis of cross-sectional studies. They also report that women may have a modified risk for AD.

Epilepsy

Theodore et al. (p. 132) report that hippocampal formation volume is decreased in patients with a history of febrile seizures and that further change may occur in patients who have persistent seizures.

Genetics and neuromuscular

The number of different genes that can cause ataxia continues to increase. Higgins et al. (p. 146) map posterior column ataxia with retinitis pigmentosa (AXPC1) to chromosome 1q31-q32. ♦ In an expedited publication, Ricker et al. (p. 170) report the linkage of proximal myotonic myopathy (PROMM) to chromosome 3q. The authors suggest

that PROMM and myotonic dystrophy type 2 may be allelic disorders or may be caused by closely linked genes. The accompanying editorial by Thornton and Ashizawa (p. 12) discusses the clinical and molecular implications of the discovery. ♦ Maegaki et al. (p. 172) present an interesting case in which a patient with Becker muscular dystrophy experienced a normalization of his creatine kinase level during a bout of arthritis. The authors postulate that inflammatory cytokines may be involved with the membrane permeability of the muscle fiber.

Parkinson's disease

The issue of whether smoking is protective against PD is addressed by Gorell et al. (p. 115). In their case-control study of 144 PD and 464 control subjects, the authors report an inverse dose-response relationship between PD and its cessation. The authors note that this finding was unlikely to be due to bias or confounding and suggest that their study provides indirect evidence that smoking is biologically protective.

Neuroimaging

In their Brief Communication, Demaerel et al. (p. 205) present three patients in whom diffusion-weighted MRI was a useful, noninvasive way of diagnosing autopsy-proven, sporadic CJD. ♦ MRI findings in superficial siderosis are described by Anderson et al. (p. 163) in their case series involving four patients, each of whom had a history of a cerebellar tumor in childhood. The authors note that superficial siderosis is an uncommon late complication of the treatment of these tumors and that it should be suspected in patients who present with slowly progressive sensory neural hearing loss and ataxia many years after eradication of a childhood cerebellar tumor.

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