Alzheimer's disease

Kuhl et al. (p. 691) found that their in vivo PET method accurately quantitated CNS acetylcholinesterase activity in patients with AD and normal controls. In their accompanying editorial, Reed and Jagust (p. 680) discuss how PET imaging of acetylcholinesterase could improve diagnosis and treatment, and lead to a better understanding of disease mechanisms in AD. ♦ Knopman et al. (p. 714) examined the relationship between nursing home placement and measures of change in other well-established clinical disease assessments in a longitudinal study of patients with probable AD. Their study provides evidence that nursing home placement can be used as a primary outcome measure for AD in clinical trials. ♦ Imbimbo et al. (p. 700) report on the results of clinical trial of a new cholinesterase inhibitor, eptastigmine, for the treatment of AD. They note that although the drug produces significant cognitive, clinical, and functional benefits, its potential adverse hematologic effects may limit its clinical utility.

Epilepsy

Schachter et al. (p. 732) report the results of a placebo-controlled trial of oxcarbazepine in patients with refractory partial seizures. They demonstrated the safety and efficacy of oxcarbazepine when used as monotherapy for the treatment of partial seizures. In an accompanying editorial, Chadwick and Privitera (p. 682) discuss the trial and reflect on the ethical constraints on conducting placebo-controlled clinical trials for conditions in which there are already established effective treatments. ♦ In their review of video-EEG records from presurgical epilepsy patients, Geyer et al. (p. 743) found that postictal nose-rubbing provides useful lateralizing information in patients with

temporal lobe epilepsy. ♦ Leach et al. (p. 738), in an open-label study of immunomodulatory therapy, noted improvement in two patients with adult-onset Rasmussen's encephalitis. The authors suggest that this therapy should be considered prior to resective surgery. They propose guidelines for intensive and prolonged trials of such therapy in adults with this syndrome. ♦ Alehan et al. (p. 889) describe a patient in whom absence status was successfully treated with IV valproate.

Movement disorders

Montgomery et al. (p. 757) administered the PD Battery to asymptomatic first-degree relatives of PD patients and to normal controls. Because the proportion of relatives who performed abnormally on the Battery was greater than normal controls, the authors suggest that the Battery may detect the asymptomatic carrier state at risk for PD. ♦ In their study using levodopa-primed dyskinetic MPTP-exposed monkeys, Grondin et al. (p. 771) determined that neither dyskinesias nor anti-parkinsonian effects can be ascribed solely to the D₂ or D₁ receptor and that some cooperation between the two receptors is necessary for these effects. ♦ Ueda et al. (p. 777) evaluated neuroleptic malignant syndrome susceptibility in PD patients in relation to clinical characteristics and central monoamine metabolism. They determined that central dopaminergic and possible noradrenergic activity contribute to neuroleptic malignant syndrome development in an elderly population of PD patients. ♦ The results of a controlled clinical trial of short versus longer term pimozide therapy in Tourette's syndrome, conducted by the Tourette's Syndrome Study Group (p. 874), suggest that long-term neuroleptic therapy (beyond the control of an acute exacerbation)

delays subsequent relapse.

♦ Weiner et al. (p. 873) report that although pramipexole did not show efficacy in progressive supranuclear palsy in their preliminary open-label trial, future trials using double-blind procedures, disease-specific outcome measures, and patients earlier in their course of illness should be considered. ♦ Steinberger et al. (p. 877) report the detection of a *GCH1* mutation (generally associated with dopa-responsive dystonia) in a patient with a negative family history and adult-onset oromandibular dystonia.

Multiple sclerosis

In their review of neuroimaging studies from patients with clinically or laboratory-supported definite MS, Filippi et al. (p. 845) determined that magnetization transfer imaging can detect white matter abnormalities in patients with MS and negative conventional brain MRI.

Neuropathy

Malandrini et al. (p. 859) present a child with acute inflammatory neuropathy that was diagnosed at the same time that pre-existing but unrecognized Charcot-Marie-Tooth disease was first discovered.

Genetics

Dichgans et al. (p. 849) provide evidence for a strong founder effect among German families in their study of spinocerebellar ataxia type 6. In the accompanying editorial, Geschwind (p. 685) discusses the genetic mechanisms of trinucleotide repeat disorders and the implications of a founder effect.

Stroke

Kubis et al. (p. 883) present three cases of patients with stroke and evidence of proximal internal carotid artery pathology caused by atypical fibromuscular dysplasia.

Neurology[®]

March 10 Highlights
Neurology 1999;52;679
DOI 10.1212/WNL.52.4.679

This information is current as of March 1, 1999

Updated Information & Services

including high resolution figures, can be found at:
<http://n.neurology.org/content/52/4/679.full>

Permissions & Licensing

Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
http://www.neurology.org/about/about_the_journal#permissions

Reprints

Information about ordering reprints can be found online:
<http://n.neurology.org/subscribers/advertise>

Neurology® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright . All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.