In Focus

Spotlight on the November 1 Issue

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Care and outcomes in patients with ischemic stroke with and without preexisting dementia

The authors compared the clinical presentation, vascular risk factors, and process measures (including thrombolysis) in 10,000 stroke patients with and without preexisting dementia. This “real world” study suggests preexisting dementia is associated with high rates of disability and institutionalization after stroke, representing an increasing challenge for the health care system.

See p. 1664

PRION-1 scales analysis supports use of functional outcome measures in prion disease

The authors compared the usefulness of data from 8 rating scales and other outcome measures in prion disease. Patients with prion disease were better tracked using functional abilities,

which may be useful as an outcome measure in clinical trials.

See p. 1674

Combined MRI lesions and relapses as a surrogate for disability in multiple sclerosis

This trial analyzed individual patient data of interferon beta-1a in relapsing–remitting multiple sclerosis (RRMS) over 2 years of follow-up by evaluating whether 1-year MRI active lesions and relapses could be a surrogate for worsening disability. This combined measure appears to be a surrogate for disability progression over a longer term when evaluating the effect of interferon in RRMS.

See p. 1684

From editorialists Wolinsky & Beck: “The current study can be interpreted to suggest that while the magnitude of MRI activity over 1 year independently contributes to the risk of expressing accumulated disability at 2 years, the contribution of MRI activity to overall risk appeared to be less than that of early clinical relapses.”

See p. 1658

NB: “Suppression of extrapyramidal side effects of doxepin by thalamic deep brain stimulation for Tourette syndrome,” see p. 1708. To check out other Clinical/Scientific Notes, point your browser to www.neurology.org.

Determinants of brain iron in multiple sclerosis: A quantitative 3T MRI study

Investigating 113 consecutive patients and 35 healthy controls with 3T MRI, this study found that increased brain iron deposition, assessed by automated, regional calculations, occurred only with advancing MS; the extent of iron deposition was associated with morphologic brain changes. Iron accumulation did not precede the development of MS.

See p. 1691; Editorial, p. 1660

Antibodies to metabotropic glutamate receptor 5 in the Ophelia syndrome

Using a set of methods optimized to identify synaptic autoantigens, mGluR5 was identified as the target antigen of antibodies in 2 patients with Ophelia syndrome. This study adds a novel autoantigen to the rapidly enlarging group of autoimmune synaptic encephalitides, a new category of treatable disorders likely mediated by antibodies.

See p. 1698

CONTEMPORARY ISSUES IN NEUROLOGIC PRACTICE

Subspecialization in neurology: The role of the United Council for Neurologic Subspecialties

The authors reviewed United Council for Neurologic Subspecialties (UCNS) operations and accomplishments. They suggest that UCNS acknowledges advances in neuroscience and improves patient care by setting standards for training programs and recognition of physicians' competence through certification.

See p. 1702

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