In Focus

Spotlight on the April 28 Issue

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Notable in *Neurology*

This issue features articles on *GRID2* mutations in congenital to mild adult-onset cerebellar ataxia and on how novel *RNF216* mutations cause a Huntington-like disorder phenotype with pure monogenic recessive inheritance. Other featured articles focus on how skeletal muscle metabolism is impaired during exercise in glycogen storage disease type III and the clinical and genetic spectrum of limb-girdle muscular dystrophy type 2E.

ARTICLES

Poststroke suicide attempts and completed suicides: A socioeconomic and nationwide perspective

Suicide rates are doubled in the first 2 years after stroke; risk factors include living alone, having a lower level of education, and poststroke depression. In high-risk groups, there is reason to explore suicidal thoughts and behaviors and specifically to consider psychosocial support and suicide preventive interventions.

See p. 1732

From editorialists Paolucci & Ngh: "Although the absolute number of poststroke suicides is relatively low, certain stroke patients with characteristics of high suicidal risk (younger age, male sex, and relevant socioeconomic deprivation) require careful multidisciplinary attention and psychosocial support to prevent suicidal behavior."

See p. 1724

Somatotopic fascicular organization of the human sciatic nerve demonstrated by MR neurography

The authors observed 12 patients with confirmed lesions of the L5 or S1 spinal nerve root, 20 healthy controls, and 12 patients with a diagnosis of peripheral polyneuropathy to determine whether the human sciatic nerve may have a consistent somatotopic organization according to proximal fascicle input by spinal nerves. Their results identified a distinct pattern of somatotopy within the sciatic nerve as assessed by proximal fascicle input by L5 and S1 spinal nerves.

See p. 1782

Head injury does not alter disease progression or neuropathologic outcomes in ALS

The authors examined rates of disease progression and pathologic findings at autopsy in amyotrophic lateral sclerosis (ALS) patients with head injuries and ALS patients without head injuries. There were no differences between these groups. Head injury was not associated with faster disease progression in ALS and did not result in a specific neuropathologic phenotype.

See p. 1788; Editorial, p. 1728

Medicare payments to the neurology workforce in 2012

Using Medicare physician payment data, the authors found that evaluation and management is the dominant source of payment to the majority of neurologists (the median neurologist received nearly 75% of his or her payments from evaluation and management services). Evaluation and management should be prioritized by neurologists in payment restructuring efforts.

See p. 1796

From editorialists Busis & Dorsey: "Absent fundamental changes in these reimbursement policies (e.g., doubling E/M reimbursement, eliminating facility fees, incentivizing home care), beneficiaries will increasingly receive services that Medicare pays for and not services that Medicare beneficiaries need or want."

See p. 1730

NB: "Cortical pencil lining in neuroferritinopathy: A diagnostic clue," see p. 1816. To check out other Clinical/Scientific Notes, point your browser to Neurology.org. At the end of the issue, check out the Views & Reviews article discussing the challenges and opportunities in designing clinical trials for neuromyelitis optica. This week also includes a Global Perspectives article titled "History of neurology in Taiwan."

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