Parkinson’s disease in welders: Evidence for an environmental cause of Parkinson’s disease
Racette et al. (p. 8) compared 15 career welders with two control groups with Parkinson’s disease. Welders had a younger mean age at onset of Parkinson’s disease (46 versus 63 years). Otherwise, Parkinson’s disease was similar in the three groups: clinical features, PET scan abnormalities, and pharmacologic responses. As noted in the accompanying editorial by Rajput (p. 4), there are a number of well-recognized causes of parkinsonism/parkinsonism syndromes, but this study provides some of clearest evidence that typical Parkinson’s disease may have environmental triggers.

Impaired motor function in elderly normal subjects: Abnormality of substantia nigra by ultrasound
In Parkinson’s disease patients there is increased echogenicity of the substantia nigra on transcranial sonography. Berg et al. (p. 13) studied the substantia nigra by transcranial sonography in 93 healthy elderly subjects without Parkinson’s disease. Increased echogenicity of the substantia nigra correlated with symptoms of Parkinson’s disease and with abnormal motor function. Thus, abnormal substantia nigra could be either a risk factor for Parkinson’s disease, or could be associated with the impaired motor function found in many elderly subjects.

Predisposition to progressive supranuclear palsy?
Baker et al. (p. 25) compared first-degree relatives of progressive supranuclear palsy patients to matched controls in their performance on a Parkinson’s disease test battery that is able to detect early disease in Parkinson’s disease patients. Of progressive supranuclear palsy relatives, 39% were abnormal, versus none of controls. This striking abnormality suggests either a carrier state for progressive supranuclear palsy or the effect of a shared environmental exposure.

Competency in Parkinson’s disease with impaired cognition
Assessment of competency—the capacity to consent to treatment—is of major importance in the care of patients and in the study of new treatments. Dymek et al. (p. 17) used a standardized competency measure and neuropsychological tests to compare 20 Parkinson’s disease patients with impaired cognition with control subjects. Parkinson’s disease patients had major deficits in competency, reflecting primarily their abnormalities in executive function.

Effects of valproate and other AEDs on androgens in men with epilepsy
Women taking valproate often have endocrine disorders. Rättyä et al. (p. 31) studied men on monotherapy with valproate, carbamazepine, and oxcarbazepine and found that 57% of patients on valproate had increased serum androgens. Carbamazepine lowered dehydroepiandrosterone sulfate levels.

Genetic cause of 5-FU-related multifocal inflammatory leukoencephalopathy (MIL)?
Franco and Greenberg (p. 110) report a 65-year-old woman in whom MIL developed following 5-FU treatment of squamous cell carcinoma. She was not taking levamisole, which has usually been coadministered in other MIL cases. Subsequently, the patient was found to be partially deficient in dihydropyrimidine dehydrogenase (DPD). Because DPD catabolizes 5-FU, this case of partial PD deficiency suggests that other such patients are at risk for MIL and possibly other 5-FU toxicity.