Spinal magnetization transfer imaging in adrenomyeloneuropathy (AMN)

Fatemi et al. demonstrate that magnetization transfer (MT) imaging of spinal cord is a sensitive and early measure of disease in AMN. Signal changes in specific tracts correlated with clinical measures of the disease.

see page 1739

The accompanying editorial by Barkhof and McKinstry notes that cerebral MT imaging is useful in multiple sclerosis, but spinal cord imaging is complicated by the small cord size, interference from surrounding structures, and contamination by CSF pulsation artifacts. Thus, the potential of MT imaging for evaluation of demyelinating cord lesions has remained unrealized. Still less is known about the degree of spinal cord involvement in adrenoleukodystrophy and AMN. The optimized MT technique used by Fatemi et al. employs a wider range of additional frequency pulses than commonly used in the brain, and improves image contrast in the cord. Images are normalized to the signal from CSF and are then added together. If their method is validated as a reproducible metric suitable for multicenter studies, clinical trials could use spinal cord lesion burden to assess treatment efficacy.

see page 1677

Elevation of blood pressure in response to stress and cognition

Waldstein et al. studied the relationship between blood pressure (BP) responses to mental stress and cognitive functioning in 94 healthy older adults. They found that greater systolic and diastolic BP responses were associated with diminished performance on tests of immediate and delayed verbal memory, and executive function.

see page 1746

Safety of diazepam rectal gel

Pellock and Shinnar reviewed respiratory events and deaths associated with use of diazepam rectal gel for seizures. With more than 2 million doses prescribed, they identified nine respiratory events and three deaths, all with prolonged seizures. They conclude that diazepam rectal gel is safe when used as recommended.

see page 1768

Repetitive TMS improves motor function in stroke

In a sham stimulation controlled trial, Mansur et al. demonstrated that slow repetitive transcranial magnetic stimulation (rTMS) to the motor cortex of the undamaged hemisphere significantly improved motor function in patients within 12 months after a stroke.

see page 1802

Pravastatin and cerebral infarcts and white matter lesions

Ten Dam et al. examined the effect of pravastatin treatment in 265 patients vs placebo in 270 patients for a period of 33 months. They found that pravastatin treatment did not prevent new cerebral infarcts or the progression of white matter lesions.

see page 1807

■ Stress and seizure exacerbation after the 9/11 attack

Klein and van Passel found that 8 of 66 (12%) patients with epilepsy present in Washington, DC, during the

9/11/2001 attack experienced seizure exacerbation after the attack. This figure was higher (29%) among patients who felt stressed by the attack and higher still (50%) among patients directly affected by the attack.

see page 1815

NEUROLOGY INVITES “CLINICAL TRIALS RECRUITING” ANNOUNCEMENTS

Neurology now publishes a “Clinical Trials Recruiting” print and online section. This section is prominently displayed on the cover, in the Table of Contents, and on the *Neurology* Web site home page.

Neurology has the widest readership of any neurological journal, and *Neurology* online receives heavy traffic from the public. This online section has open access and is featured on the *Neurology* home page.

Line ads can be placed at no charge and display ads [full or ½ page] can also be placed for a fee. The ad must be IRB approved before submission. Contact ctrecruiting@urmc.rochester.edu or click on “Clinical Trials Recruiting” on the home page [www.neurology.org] for more information.

Neurology®

May 24 Highlights

Neurology 2005;64;1672-1673

DOI 10.1212/WNL.64.10.1672

This information is current as of May 23, 2005

Updated Information & Services

including high resolution figures, can be found at:
<http://n.neurology.org/content/64/10/1672.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.