In Focus

Spotlight on the October 25 Issue

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The cost-effectiveness of telestroke in the treatment of acute ischemic stroke

The authors evaluated the costs and benefits of a telestroke network vs usual care. They found that over a person's lifetime, telestroke was very cost-effective, suggesting that such systems have the potential to decrease the geographical disparities in acute stroke care without appreciably increasing long-term health care costs.

See p. 1590

From editorialists Rudolph and Levine: "As we face the fact that costs will need to be controlled in our medical system ... [t]elestroke appears to answer all of these questions positively, for the health care system, stroke neurologists, and most importantly, our patients."

See p. 1584

Ultraearly hematoma growth predicts poor outcome after acute intracerebral hemorrhage

The authors examined 133 patients with acute supratentorial ICH who underwent CT scans for volume measurement and CT angiography for detection of the spot sign. Ultraearly hematoma growth

helped to identify patients at risk of further hematoma enlargement; the improved accuracy of baseline ICH volume may help predict clinical outcome.

See p. 1599

Increased risk of trigeminal neuralgia after hypertension: A population-based study

This study demonstrated a temporal association between hypertension and subsequent development of trigeminal neuralgia. The 3-year cumulative incidence of trigeminal neuralgia for the 138,492 subjects with hypertension was higher than that of the 276,984 randomly sampled subjects without hypertension.

See p. 1605

A randomized trial of high-dose vitamin D2 in relapsing-remitting multiple sclerosis

In this trial, 23 patients with relapsing-remitting multiple sclerosis (RRMS) were randomized to high-dose vitamin D2, 6,000-IU capsules, dose adjusted empirically, aiming for a serum 25OHD level of 130–175 nM. High-dose vitamin D2 compared to low-dose supplementation was not effective in reducing MRI lesions in RRMS.

See p. 1611

Predicting MCI outcome with clinically available MRI and CSF biomarkers

Though not yet routinely used, clinically available CSF and MRI biomarkers improve predictive prognosis in MCI. The authors divided 192 MCI participants into positive and negative risk groups. When risk factors were examined separately, patients testing positive showed a higher risk of decline to dementia, with MRI evidence of neurodegeneration predicting imminent decline.

See p. 1619

VIEWS & REVIEWS

Conjoint pathologic cascades mediated by ALS/FTLD-U linked RNA-binding proteins TDP-43 and FUS

This review outlines the molecular basis of a novel ALS/FTLD-U disease spectrum and discusses the mechanisms of TDP-43, FUS, and ataxin-2 in ALS/FTLD-U and how these may play a role in development

of therapeutic strategies.

See p. 1636; Editorial, p. 1588

RESIDENT & FELLOW SECTION

Clinical Reasoning: Unusual headaches

A 14-year-old presented with headaches and visual hallucinations. This paper discusses the pertinent clinical features, diagnostic tests, and treatment in a stepwise approach, emphasizing the clinical features that differentiate classical migraines from occipital lobe epilepsy.

See p. 1649

NB: Can SIADH herald or accompany neuromyelitis optica? Check out this issue's Clinical/Scientific Note (see p. 1644).

Podcasts can be accessed at www.neurology.org

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