



In Focus

Spotlight on the February 14 Issue

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Incidence and prevalence of epilepsy among older US Medicare beneficiaries

A nationwide analysis of claims data for Medicare beneficiaries 65 years old and older revealed that epilepsy was very common among older Americans. Certain populations, especially African Americans, were more at risk. A strong suspicion of seizures should be entertained as a cause of altered behavior in older people.

See p. 448; Editorial, p. 444

"On" state freezing of gait in Parkinson disease: A paradoxical levodopa-induced complication

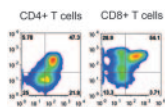
The authors present a diagnostic approach to "on" freezing of gait (FOG) during the "on state." Four patients with Parkinson disease (PD) with suspected "on" FOG were examined in the "off state," "on state," and "supra-on state." True "on" FOG exists as a rare phenotype in PD, unassociated with cognitive impairment or a preexisting "off" FOG.

See p. 454

From editorialist Robert Chen: "The different clinical features of "on" state freezing compared to the more commonly recognized forms of gait disturbance in PD may be helpful in identifying patients with this phenomenon."

See p. 446

Fatal PML associated with efalizumab therapy: Insights into integrin α L β 2 in JC virus control



The authors examined 2 patients with severe psoriasis treated with efalizumab, a neutralizing antibody to α L β 2-leukointegrin and fatal progressive multifocal

leukoencephalopathy (PML). They found that inhibition of T-cell activation (peripheral and intrathecal) as well as suppression of CNS effector-phase migration characterizes anti-LFA1 (efalizumab)-associated PML.

See p. 458; Comment, see p. 465

Age and diagnostic performance of Alzheimer disease CSF biomarkers

This paper reports the effects of age on the diagnostic performance of CSF biomarkers in 529 patients with Alzheimer disease (AD) dementia, 304 controls, and 750 subjects without dementia with mild cognitive impairment, followed for at least 2 years. CSF AD biomarkers have high diagnostic accuracy in all age groups, but their performance was best in younger cases.

See p. 468

Accelerated cortical atrophy in cognitively normal elderly with high β -amyloid deposition

This study showed that asymptomatic individuals with significant A β deposition, as demonstrated by in vivo PiB-PET imaging, had accelerated atrophy over a period of 18 months. The presence of brain A β was associated with accelerated atrophy, suggesting that therapy aimed at reducing the neurodegenerative process should be commenced in individuals with high PiB.

See p. 477

Role of obesity, metabolic variables, and diabetes in HIV-associated neurocognitive disorder

Obesity (body mass index) and specifically central obesity (waist circumference) were associated with neurocognitive impairment in patients with HIV as in other populations. Other components of metabolic syndrome (hypertension, hyperlipidemia, and generalized obesity) were not. Central obesity may contribute to vulnerability to neurocognitive impairment, a common problem in patients with HIV.

See p. 485

Levels of heparin-releasable TFPI are increased in first-ever lacunar stroke patients

The authors determined antigen levels of total and free full-length tissue factor pathway inhibitor (TFPI) using ELISA in 149 lacunar stroke patients and 42 controls. While ambient plasma levels of total TFPI were not different in subtypes of lacunar stroke, the increased levels of heparin-releasable TFPI in patients suggest a role of endothelial activation in the pathogenesis of lacunar stroke.

See p. 493

VIEWS & REVIEWS

Multimodal endovascular reperfusion therapies: Adjunctive antithrombotic agents in acute stroke

The evolving field of endovascular techniques for acute stroke includes multimodal therapies. The authors review the role of adjunctive agents in thrombolysis and emphasize the need for further rigorous appraisal of these methods.

See p. 501

NB: Resident & Fellow "Right Brain: The case library as a tool to enhance clinical observations" appears in print (see p. 512). To check out other Resident & Fellow submissions, point your browser to www.neurology.org and click on the link to the Resident & Fellow Section.

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