fracture risk assessment (FRAX) and falls assessment annually, with a baseline bone mineral density scan to identify those at high risk of osteoporotic fracture. Potential contributors to fracture risk should be avoided where possible, and interventions to improve both bone health and falls risk should be routine.

Author Response: Marloes T. Bazelier, Frank de Vries, Utrecht, the Netherlands: We appreciate the comments by Dobson et al. and agree with their concerns about the use of anxiolytics/hypnotics and antidepressants in patients with MS. These medication types have been associated with falls and (hip) fractures.7,8 However, there is no evidence that discontinuation of these drugs would prevent fractures. We also agree that epidemiologic evidence for the underlying etiology of glucocorticoid use and risk of fractures in patients with MS is unclear.4,6 Because patients with MS are already at risk of fracture, FRAX scores may be underestimated. Unfortunately, FRAX has not been designed specifically for patients with MS. We have recently published a clinical risk score that has been developed for fracture risk assessment in patients with MS.9

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CORRECTIONS
Plasma multianalyte profiling in mild cognitive impairment and Alzheimer disease
In the article “Plasma multianalyte profiling in mild cognitive impairment and Alzheimer disease” by W.T. Hu et al. (Neurology® 2012;79:897–905), there is an error in the first paragraph on page 899. The third sentence should read “At WU, blood was collected in EDTA in polypropylene tubes after overnight fasting between 7:30 and 8:00 AM and centrifuged (2,000 g x 15 minutes at 4°C) for separation into plasma and cellular components.” The authors regret the error.

WriteClick: Editor’s Choice: Predicting outcome after acute basilar artery occlusion based on admission characteristics
In the correspondence regarding the article “Predicting outcome after acute basilar artery occlusion based on admission characteristics” by Y. He et al. (Neurology® 2012;79:1410), there is an error in the second author’s name, which should be spelled “Tianxiao Li.” The editorial staff regrets the error.
Plasma multianalyte profiling in mild cognitive impairment and Alzheimer disease

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