In Focus

Spotlight on the August 7 Issue

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Seizure risk with AVM treatment or conservative management: Prospective, population-based study

This study identified 229 adults with a new diagnosis of an arteriovenous malformation (AVM), of whom two-thirds received AVM treatment during 1,862 person-years of follow-up. Seizure outcomes for patients with conservatively managed AVMs appeared similar to those of patients undergoing interventional treatment. Ongoing enrollment into randomized, controlled trials of AVM treatment is justified.

See p. 500; Editorial, p. 492

Real-life costs and effects of an implementation program to increase thrombolysis in stroke

Large-scale implementation of IV thrombolysis for acute ischemic stroke is long overdue. This study included 12 hospitals and 5,515 patients. The analysis involving 1,657 patients with ischemic stroke admitted within 4 hours from onset reported a successful, realistic, and cost-effective strategy. Similar strategies in comparable settings likely increase thrombolysis and enhance stroke care efficiency.

See p. 508; Editorial, p. 494

Compensatory role of the cortico-rubro-spinal tract in motor recovery after stroke

Pyramidal tract and alternate motor fibers were reconstructed based on primary motor, dorsal premotor, and supplementary motor cortices in 18 patients and 10 controls. The microstructural properties of bilateral red nuclei and level of motor function in chronic stroke patients play an important role in poststroke motor recovery.

See p. 515

Increased PK11195 PET binding in the cortex of patients with MS correlates with disability

The authors used 11C-PK11195 PET binding, finding that increased microglial activation in the cortex of patients with multiple sclerosis correlates with

measures of disability. PET and radioligands tagging biological targets may provide an in vivo tool for investigating pathophysiology and assessment of clinical correlates of detected pathology in patients with multiple sclerosis.

See p. 523; Editorial, p. 496

Serum IL-17F does not predict poor response to IM IFN β -1a in relapsing-remitting MS

Fifty-four good responders and 64 poor responders were selected from 762 subjects with relapsing-remitting MS from the Avonex study. Subjects were classified as good or poor responders on the basis of number of relapses, Expanded Disability Status Scale score, and new and enlarging T2 lesions. The authors were unable to validate that serum IL-17F was a predictor of poor responders.

See p. 531; Editorial, p. 498

Contributions of vitamin D response elements and HLA promoters to multiple sclerosis risk

This study examined the promoter region of a broad range of HLA-DR alleles (32 homozygous and 53 heterozygote) incorporating the vitamin D response element as well as other functional domains. Serologic HLA-DR profiles and promoter polymorphism haplotypes effectively stratified multiple sclerosis risk, suggesting functional relationships between risk-modifying HLA-DRB1 alleles.

See p. 538

A comparison of tau and 14-3-3 protein in the diagnosis of Creutzfeldt-Jakob disease

The possibility of performing rigorous studies on rare prion diseases exists when most cases are sent to a single center. This report involved 420 sequential cases with prion diseases in the differential diagnosis. Unexpectedly, tau was demonstrated to be more accurate than 14-3-3 when predicting disease status.

See p. 547

AAN SPECIAL ARTICLE

Evidence-based guideline: Pharmacologic treatment of chorea in Huntington disease: Report of the Guideline Development Subcommittee of the American Academy of Neurology

This paper explored all Huntington disease studies with chorea endpoints using AAN evidence-based guideline methodology. While select drugs showed antichoreic benefit, adverse events and cost may limit use. Critical literature gaps are also stressed.

See p. 597

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