



## In Focus

Spotlight on the April 30 issue

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### Detection of peripheral nerve pathology: Comparison of ultrasound and MRI

In 53 patients with mononeuropathy or brachial plexopathy imaged with ultrasound and MRI, ultrasound was more sensitive (43/46 [93%] vs 31/46 [67%]), was equally specific (6/7 [86%]), and identified more multifocal lesions. Ultrasound is the preferred initial imaging modality for anatomic evaluation of suspected peripheral nervous system lesions.

See p. 1634

*From editorialists Padua & Hobson-Webb: "Less expensive, more comfortable, and less time-consuming than either MRI or electrodiagnostic testing, nerve US may eventually become the first choice for the evaluation of focal diseases of peripheral nerves."*

See p. 1626

### Effect of duration and age at exposure to the Stroke Belt on incident stroke in adulthood

The risk of stroke was studied in 24,544 black and white stroke-free participants, aged 45 and older, from a population-based cohort. Incident stroke was defined as first occurrence of stroke over an average 5.8 years of follow-up. Childhood emerged as the most important period of vulnerability to Stroke Belt residence as a predictor of future stroke.

See p. 1655; Editorial, p. 1628

### $\alpha$ -Synuclein in CSF of patients with severe traumatic brain injury

This study showed a correlation between CSF  $\alpha$ -synuclein concentrations and mortality in patients with severe traumatic brain injury (TBI). Two distinct temporal profiles were identified, with  $\alpha$ -synuclein increasing in nonsurvivors and falling in survivors. Increased CSF  $\alpha$ -synuclein concentrations may reflect enduring neurodegeneration or injury after TBI and may be predictive of mortality.

See p. 1662

### Systematic review and meta-analysis of standard vs selective temporal lobe epilepsy surgery

The authors searched MEDLINE and Embase using Medical Subject Headings to include original research that directly compared seizure outcomes in patients undergoing selective amygdalohippocampectomy or anterior temporal lobectomy (ATL) for temporal lobe epilepsy (TLE). Standard ATL confers an improved chance of achieving freedom from disabling seizures in patients with TLE.

See p. 1669; Editorial, p. 1630

### Body weight variability in midlife and risk for dementia in old age

The measurement of body weight variability was based on 3 successive weight recordings taken from more than 10,000 healthy controls, in whom cardiovascular risk factors and clinical status were assessed when they were 40–70 years of age. Midlife variations in weight may precede late-life dementia.

See p. 1677

### Adherence to a Mediterranean diet and risk of incident cognitive impairment

Greater adherence to a Mediterranean diet was associated with a lower likelihood of incident cognitive impairment in a population-based sample of US black and white adults during a follow-up period of 4 years. The association was moderated by the presence of diabetes mellitus.

See p. 1684

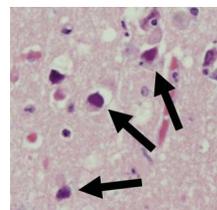
### Urine toxicology screening in an urban stroke and TIA population

Current guidelines recommend toxicology screening of stroke and TIA patients at the physician's discretion. In this study, only 40% had screening; 11% were cocaine-positive. Those younger than age 50 and black were more likely to be tested. Universal screening should be considered to avoid health care disparities.

See p. 1702; Editorial, p. 1632

## CLINICAL/SCIENTIFIC NOTES

### Fatal adenovirus encephalomyeloradiculitis in an umbilical cord stem cell transplant recipient



Diagnosis was made via detection of increasing amounts of adenovirus DNA in both serum and CSF, immunohistochemical analysis, and its isolation from brain tissue. Findings showed adenovirus should be recognized as an entity capable of causing rapidly progressive encephalomyeloradiculopathy.

See p. 1715

*NB: "Treating melancholia at home: Theoretical wisdom and grim reality in the career of E.C. Seguin," see p. 1710. To check out other Historical Neurology articles, point your browser to [www.neurology.org](http://www.neurology.org).*

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