In Focus

Spotlight on the May 5 Issue

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Notable in *Neurology*

This issue features articles on the prevalence and factors associated with convulsive status epilepticus in Africans with epilepsy and on the reduced efficacy of sumatriptan in migraine with aura compared to migraine without aura. Another featured article focuses on the complications and mortality in hereditary hemorrhagic telangiectasia.

ARTICLES

Children's perspective of quality of life in epilepsy

Psychosocial factors influence quality of life (QOL) more than seizures, as determined by a structural equation model of self-reports from 480 children with epilepsy aged 8 to 14 years. When pursuing seizure control, children with epilepsy may feel good about

their lives as long as their mental health and social supports are addressed and maintained.

See p. 1830

From editorialists Wagner & Kellermann: "Early treatment or referral for mental health symptoms or attempts to enhance school, parent, and peer support networks could be crucial to improving outcomes such as epilepsy-specific QOL. In other words, clinicians are encouraged to look beyond seizures and see the child."

See p. 1826

Risk and protective factors for cognitive impairment in persons aged 85 years and older

This study describes clinical and lifestyle factors associated with mild cognitive impairment. In the oldest old, high burden of vascular disease increased risk of mild cognitive impairment, whereas engaging in craft, artistic, and social activities in midlife and late life reduced risk. Mild cognitive impairment prevention should begin in midlife.

See p. 1854; Comment, p. 1859

Low muscle strength in late adolescence and Parkinson disease later in life

Muscle strength of the arms is reduced in late adolescence in men who are diagnosed with Parkinson disease 30 years later; however, the differences found in muscle strength were small. The findings suggest the presence of subclinical motor deficits already in late adolescence in men later diagnosed with Parkinson disease.

See p. 1862; Comment, p. 1868

Brain death declaration: Practices and perceptions worldwide

The majority of countries report a legal provision and a formalized protocol for declaration of brain death; however, this was not the case in lower-income countries. Brain death diagnosis has consequences, including decisions regarding withdrawal of care and organ donation. Further steps to solidify a unified approach globally would be welcome.

See p. 1870; Comment, p. 1878

NB: "Prognosis after spinal cord and cauda compression in spontaneous spinal epidural hematomas," see p. 1894. To check out other Views & Reviews, point your browser to Neurology.org. At the end of the issue, check out the Clinical/Scientific Notes discussing the long-term improvement of tremor and ataxia after bilateral deep brain stimulation and how vascular endothelial growth factor isoforms are a promising biomarker for patients with recurrent glioblastoma.

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