In Focus

Spotlight on the November 8 Issue

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Notable in *Neurology*

This issue features an article that identifies a *KCNA2* mutation that caused dominantly inherited episodic ataxia in association with mild infantile-onset seizures, as well as generalized and focal epilepsies, and another article that clarifies the pathogenic factors and mechanisms underlying the development of concentric demyelinating lesions in Balo disease. Another featured article examines the utility and reliability of volumetric MRI in measuring disease progression in the 4-repeat tauopathies progressive supranuclear palsy and corticobasal syndrome.

ARTICLES

Alemtuzumab improves preexisting disability in active relapsing-remitting MS patients [OPEN](#)

The authors characterized the effects of alemtuzumab treatment on measures of disability in patients with relapsing-remitting multiple sclerosis. In patients with inadequate response to prior disease-modifying therapies, alemtuzumab provided greater

benefits than subcutaneous interferon-β-1a across several disability outcomes, reflecting improvement of preexisting disabilities.

See p. 1985

From editorialists Bielekova & Tintore: "It is only if we successfully abolish compartmentalized inflammation and observe no arrest of disability progression that we could rule out its role in MS progression and focus entirely on neurodegenerative aspects of MS. Thus, despite unarguable progress in MS therapeutics, there is still a long road ahead until we can eliminate disease progression for all patients."

See p. 1966

Increasing atrial fibrillation prevalence in acute ischemic stroke and TIA

The authors evaluated trends in atrial fibrillation (AF) prevalence in acute ischemic stroke (AIS) and TIA in the United States. AF prevalence in both conditions increased while AF was associated with increased mortality in AIS. More innovative AIS preventive strategies are needed.

See p. 2034

Florbetapir-PET to diagnose cerebral amyloid angiopathy: A prospective study

The authors found that 10 patients with cerebral amyloid angiopathy (CAA) had a positive florbetapir-PET scan; however, only 1 out of 9 patients with hypertensive intracranial hemorrhage had a positive scan. These findings showed that florbetapir-PET provided a sensitivity of 100% and specificity of 89% for determination of probable CAA, establishing this method as a potentially important radiologic tool.

See p. 2043

Presymptomatic cortical thinning in familial Alzheimer disease: A longitudinal MRI study [OPEN](#)

In Alzheimer disease (AD), detecting early neurodegeneration may be important in providing effective treatment. The familial AD cortical signature was similar to that described for sporadic AD with all component regions showing presymptomatic thinning. A composite regional signature may provide more robust results than a single region and have utility as an outcome measure in presymptomatic trials.

See p. 2050

NB: "Visual agnosia: An overlooked cortical sign," see p. e237. To check out other Resident & Fellow Pearls & Oysters submissions, point your browser to Neurology.org and click on the link to the Resident and Fellow Section. At the end of the issue, check out the NeuroImages discussing optical coherence tomography in an optic tract lesion and in Leber hereditary optic neuropathy. This week also includes a Humanities article titled "The identity function."

Podcasts can be accessed at Neurology.org

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