In Focus

Spotlight on the August 2 Issue

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Notable in Neurology

This issue features an article investigating the associations of previously reported Alzheimer disease dementia genomic variants with common neuropathologies, and another examines the relationship between cortical function and survival in amyotrophic lateral sclerosis. A featured article evaluates the feasibility, safety, and tolerability of noninvasive vagus nerve stimulation for the prevention of chronic migraine attacks.

ARTICLES

Lifetime direct costs of stroke for indigenous patients adjusted for comorbidities

This study used linked hospital, primary care, and Pharmaceutical Benefits Scheme data to estimate lifetime direct costs for hemorrhagic, ischemic, and undetermined stroke. The findings show that costs of stroke for indigenous people and patients with different comorbidities were substantial; an integrated prevention strategy is needed.

See p. 458

From editorialists Shehadah et al.: "With the rapidly growing advancements in cerebrovascular neurology, providers should not only master the medical knowledge and biological determinants of stroke, but must also know the effect of race and ethnicity on stroke epidemiology and access to care."

See p. 450

Nonadherence to antiepileptic drugs in Germany: A retrospective, population-based study

Medication nonadherence is a major problem in epilepsy. This study shows that one-third of treated patients with epilepsy had poor adherence related to demographic characteristics and drug properties. Administration of new, well-tolerated drugs in simple dosage regimens improves antiepileptic drug adherence.

See p. 466

From editorialist Edward Faught: "In general, claims-based studies such as this one benefit from huge numbers, but are limited in granularity, and thus can rarely pinpoint clear cause-and-effect links. And although 80% medication possession ratio is often selected as the threshold for 'good adherence' in studies of many diseases, this is arbitrary and may have little to do with the biology of epilepsy or what an individual patient needs for seizure control."

See p. 452

Polygenic risk of Alzheimer disease is associated with early- and late-life processes

Genetic risk of Alzheimer disease tracks with disease processes before clear clinical symptoms present. The authors found that aggregate genetic risk was associated with elevated β -amyloid, smaller hippocampus volume, and greater cognitive decline among participants without dementia. Genetic risk of Alzheimer disease influences multiple components of the Alzheimer disease cascade and was observed before the stage of clinical dementia.

See p. 481

Social disinhibition is a heritable subphenotype of tics in Tourette syndrome

The authors identify symptom-based subgroups among individuals with Tourette syndrome that differ in the rates of psychiatric comorbidity and tic severity. These symptom-based Tourette syndrome

subtypes cross traditional diagnostic boundaries and may correlate more closely to the underlying dysregulated frontostriatal circuitry and genetic risk factors, suggesting that these individuals should be assessed for psychiatric comorbidities.

See p. 497

NB: "Reversible corticospinal tract hyperintensities in neurologic Lyme disease," see p. 548. To check out other *NeuroImages*, point your browser to Neurology.org. At the end of the issue, check out the Views & Reviews discussing an unbiased descriptive classification scheme for Alzheimer disease biomarkers. This week also includes a Resident & Fellow Residency Training article titled "Work engagement during neurology training."

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