



# In Focus

## Spotlight on the March 7 issue

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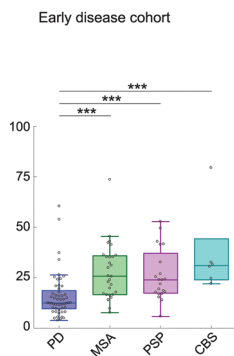


### Notable in Neurology

This issue features an article that investigates whether variations in fasting plasma glucose are predictors of diabetic polyneuropathy risk, and another that determines the association of lesion location with speech comprehension deficits in chronic aphasia. A featured Views and Reviews paper reports a lack of consensus on the definition of familial amyotrophic lateral sclerosis, and discrepancy in attitudes and practices related to genetic testing in amyotrophic lateral sclerosis.

### ARTICLES

#### Blood-based NfL: A biomarker for differential diagnosis of parkinsonian disorder [OPEN](#) ▲ Neurofilament as a blood marker for diagnosis and monitoring of primary progressive aphasia ▲



Blood-based neurofilament light chain (NfL) markers were found in parkinsonian disorders and primary progressive aphasia (PPA), offering a method to distinguish Parkinson disease from atypical parkinsonian disorders, and to differentiate PPAs using ultrasensitive assay for NfL. Even if NfL levels overlap at baseline in PPA, follow-up investigation of NfL might help describe the clinical course of patients. In the future, blood-based NfL may be included in the diagnostic workup of patients with parkinsonian symptoms.

See pages 930 and 961

From editorialists Alves and Bonanni, in reference to "Blood-based NfL: A biomarker for differential diagnosis of parkinsonian disorders": "The study by Hansson et al. represents an important step towards the development of a clinically useful and easily accessible blood-based biomarker for differentiating PD from APDs, parkinsonian disorders with similar clinical appearance but with very different prognosis."

See p. 922

#### Phase I/II multicenter ketogenic diet study for adult superrefractory status epilepticus ▲

The mortality rate in patients with superrefractory status epilepticus (SRSE) is extremely high with no standardized treatments. This prospective multicenter study establishes feasibility of a ketogenic diet in adults with SRSE. While a ketogenic diet is feasible in treating SRSE, randomized placebo-controlled trials are needed to establish safety and efficacy.

See p. 938

#### Early life risk factors for cerebrovascular disease: A systematic review and meta-analysis

In a systematic analysis, early life factors of lower educational attainment, childhood intelligence, and socioeconomic status each increased risk of cerebrovascular disease neuroimaging markers in later life, independent of mid- and later-life vascular risk factors. The extent to which these factors represent innate or acquired risk, are independent, and represent modifiable risk require further research.

See p. 976

#### Temporal trends in early case-fatality rates in patients with intracerebral hemorrhage

The authors assessed temporal trends of case-fatality rates in patients with spontaneous intracerebral hemorrhage (ICH). No change was found within the first 48 hours, signaling a need for improvements in acute management of ICH, but a decrease in deaths between 48 hours and 30 days was observed.

See p. 985

From editorialists Charidimou and Tirschwell: "Although these results compel efforts to discover more effective very early interventions for ICH, the improved post 48 hours mortality suggests a global opportunity to replicate the conditions in Dijon, where they are not currently available. Identifying these factors with efforts to implement more broadly could effect a major reduction in global ICH mortality."

See p. 926

NB: "Munchausen syndrome by genetics: Next-generation challenges for clinicians," p. 1000. To check out other Clinical/Scientific Notes, point your browser to [Neurology.org](http://Neurology.org). At the end of the issue, check out the Global Perspectives article discussing the need for the WHO Model List of Essential Medicines to include evidence-based neurologic medicines. This week also includes a Resident & Fellow Clinical Reasoning article titled "A young woman with respiratory failure, hearing loss, and paraplegia."

Podcasts can be accessed at [Neurology.org](http://Neurology.org)

# Neurology®

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