In Focus

Spotlight on the October 31 issue

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Notable in *Neurology*®

This issue features an article that associates autosomal dominant polycystic kidney disease with aneurysmal subarachnoid hemorrhage and unruptured intracranial aneurysm disease characteristics and another that investigates, using virtual reality, body ownership and neuropathic pain changes in patients with spinal cord injury. A featured article examines return to work interval rates after mild traumatic brain injury to identify predictors based on occupational factors.

ARTICLES

Thrombolysis in acute ischemic stroke in patients with dementia: A Swedish registry study [OPEN](#)

In this study, patients with dementia who had strokes were compared to patients without dementia. Symptomatic intracerebral hemorrhage and mortality did not differ, but functional status was worse at 3 months in patients with dementia. Not only dementia status but also previous functioning and expected benefit should inform the decision for thrombolysis.

See p. 1860

Change in multimodal MRI markers predicts dementia risk in cerebral small vessel disease [OPEN](#)

Through multimodal MRI and cognitive assessments, the authors determined white matter microstructural damage in patients with cerebral small vessel disease and progression to dementia. Changes in MRI measures, including diffusion tensor imaging, during times when cognitive change was undetectable, were identified as useful biomarkers to monitor disease and assess therapeutic interventions.

See p. 1869

Female sex, early-onset hypertension, and risk of dementia

This cohort study examines the associations between hypertension in early and mid-adulthood and dementia risk. Hypertension was a risk factor for dementia among women starting in their early 40s, but

not for men. Further research is needed to identify sex-specific pathways through which elevated blood pressure accelerates brain aging.

See p. 1886

VIEWS & REVIEWS

Traumatic brain injury may not increase the risk of Alzheimer disease [OPEN](#)

While epidemiologic studies have associated traumatic brain injury with increased risk of Alzheimer disease, the authors showed that clinicopathologic and biomarker studies failed to confirm the relationship. This suggests that the link to traumatic brain injury might be through other neurodegenerative processes, requiring additional studies.

See p. 1923

NB: "Widespread plexiform neurofibromas in neurofibromatosis type 1: An uncommon cause of back pain," p. e218. To check out other Resident & Fellow Section Mystery Cases, point your browser to Neurology.org and click on the link to the Resident & Fellow Section. At the end of the issue, check out the Clinical/Scientific Note account of secondary neurolymphomatosis infiltrating the sympathetic chain antemortem. This week also includes a Resident & Fellow Teaching Video Neurolmage titled "Hemifacial spasm due to cerebellopontine angle mass."

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