**Notable in Neurology this week**

This issue features an article that investigates the differences in prevalence of depression after stroke between men and women; another, using network methods, determines that the way foods are consumed, not just the quantity, may be applicable for dementia prevention. A featured article examines whether surrogates for patients with severe acute brain injury can be identified based on a survey of their prioritization of goals-of-care decisional concerns.

**Articles**

**Stroke reperfusion therapy following dabigatran reversal with idarucizumab in a national cohort**
Recent use of anticoagulants is a contraindication for the use of IV tissue plasminogen activators. Idarucizumab can reverse the anticoagulant effect of dabigatran. In a cohort of patients taking dabigatran, the use of idarucizumab was found to be feasible and safe before thrombolysis.

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*From editorialists Dias et al.: “While we still can find some equipoise related to anticoagulant therapy to haunt clinicians, we are no longer waking up at night with a cold sweat as a new era of effective and safe reversal agents for oral anticoagulants has finally dawned.”

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**In utero exposure to the Great Chinese Famine and risk of intracerebral hemorrhage in midlife**

In this study of 97,399 adults, those who were in utero during the Great Chinese Famine, from 1959 to 1961, were more likely to have an intracerebral hemorrhage in midlife than those without exposure, independent of the presence of other vascular risk factors. Nutritional factors in early life, including in utero, can affect later life susceptibility to intracerebral hemorrhage.

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**Phenotypic variability in ALS-FTD and effect on survival**

Amyotrophic lateral sclerosis (ALS) and frontotemporal dementia (FTD) are increasingly viewed as part of the same disease spectrum. In a cohort of patients with ALS-FTD, those who initially had motor symptoms had a worse prognosis than those presenting with cognitive changes. This observation could lead to improved prognostication in patients in the ALS-FTD spectrum and selection of patients for clinical trial inclusion.

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**Continued**

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Historical Neurology

History of acute polyradiculoneuropathy (part 1): The prehistory of Guillain-Barré syndrome

History of acute polyradiculoneuropathy (part 2): From 1916 to 2019

Two articles in this issue describe the history of the concept of acute inflammatory polyradiculoneuropathy, also known as Guillain-Barré syndrome, from early descriptions in the 18th and 19th centuries to the development of pathophysiologic criteria for its diagnosis in this century.

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NEW EPISODE

May 12, 2020

CME Opportunity:

Concerns of surrogate decision makers for patients with acute brain injury: A US population survey
(see p. 824)

1. Concerns of surrogate decision makers for patients with acute brain injury:
   A US population survey
2. Genetics of, treatment for, and living with Huntington Disease

In the first segment, Dr. David Lapides talks with Dr. David Hwang about his paper regarding factors impacting surrogate decision makers for patients with acute brain injury. In the second part of the podcast, Dr. Jason Crowell talks with Dr. Nancy Weder about treatment of and the future of Huntington disease.

Disclosures can be found at Neurology.org.
Spotlight on the May 12 issue
José G. Merino
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