In Focus

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Notable in Neurology This Week

This issue features an article that investigates whether MRI markers of cerebral small vessel disease differ according to self-reported race or ethnicity and whether any differences are associated with the risk of intracerebral hemorrhage; another examines the effect of adrenomedullin on patients with migraine. A featured Views & Reviews provides recommendations on outcome measures and statistical considerations for exploratory clinical trials in neurodegenerative dementias.

Articles

Novel Score for Stratifying Risk of Critical Care Needs in Patients With Intracerebral Hemorrhage

This article outlines a simple clinical risk score that identifies patients with intracerebral hemorrhage (ICH) at low risk for critical care interventions. The Intensive Care Triaging in Spontaneous Intracerebral Hemorrhage (INTRINSIC) score, utilizing information on admission blood pressure, Glasgow Coma Scale score, ICH volume, and intraventricular hemorrhage, had high discriminative ability in an external validation cohort.

From editorialist Maas: “Like other prognostic scores, the INTRINSIC score is best used alongside other clinical considerations because there will always be factors that are relevant on an individual level but are not common enough to emerge as statistical predictors in a model.”

Association Between Hemostatic Profile and Migraine: A Mendelian Randomization Analysis

In this 2-sample Mendelian randomization study, the authors found that elevated circulating levels of von Willebrand factor, coagulation factor VIII, phosphorylated fibrinopeptide A, and decreased fibrinogen may contribute causally to migraine susceptibility. Further study of this relationship may provide etiologic insights into the association of migraine and stroke and potential therapeutic interventions.

Association of Neighborhood Context, Cognitive Decline, and Cortical Change in an Unimpaired Cohort

Neighborhood-level disadvantage may represent a risk factor for accelerated cognitive decline. Among a cognitively unimpaired middle- to older-aged cohort, living in highly disadvantaged neighborhoods was associated with accelerated cortical thinning and declining cognitive performance. Understanding sociocontextual risk factors may effectively and equitably guide prevention efforts in Alzheimer disease and related dementias.
Intravenous Immunoglobulin Therapy in Patients With Painful Idiopathic Small Fiber Neuropathy

This placebo-controlled randomized clinical trial evaluated the efficacy of IV immunoglobulin (IVIg) treatment for patients with painful idiopathic small fiber neuropathy (I-SFN). The authors found that the treatment had no significant effect on pain and concluded that IVIg should not be used to treat patients with painful I-SFN.

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From editorialists Gibbons and Klein: “…[T]he present study provides strong evidence that the use of IVIg in idiopathic small fiber neuropathy should be discouraged.” Page 929

NEW EPISODE

May 18, 2021

Novel Score for Stratifying Risk of Critical Care Needs in Patients With Intracerebral Hemorrhage (see p. 931)

In the first segment, Dr. Andy Southerland talks with Dr. Roland Faigle about the assessment of critical care needs for patients with spontaneous intracerebral hemorrhage. In the second part of the podcast, Dr. Jason Crowell discusses a natural history study of “pure” primary lateral sclerosis with Dr. Anhar Hassan.

Disclosures can be found at Neurology.org.

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Spotlight on the May 18 Issue
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Neurology 2021;96:921-922
DOI 10.1212/WNL.0000000000011925

This information is current as of May 17, 2021

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