Impact of Oral Anticoagulation and Adenosine Diphosphate Inhibitor Therapies on Short-term Outcome of Traumatic Brain Injury

Given that the usage of oral anticoagulants (OACs) or adenosine diphosphate inhibitors (ADPi) increases the risk of bleeding, this study investigated the effect of OAC and ADPi therapies on short-term outcomes after traumatic brain injury (TBI). Mortality was found to be slightly increased in patients with TBI using vitamin K antagonists but not in those using direct OACs or ADPi.

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β-Amyloid and Tau Imaging in Chronic Traumatic Brain Injury: A Cross-sectional Study

Traumatic brain injury (TBI) has long been considered a risk factor for Alzheimer disease. This study assessed β-amyloid and tau burden in long-term survivors of TBI and healthy controls using PET imaging, ultimately finding that single moderate-to-severe TBI was not associated with higher burden of β-amyloid or tau pathologies in the chronic period relative to healthy controls.

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Differences in Motor Features of C9orf72, MAPT, or GRN Variant Carriers With Familial Frontotemporal Lobar Degeneration

This study demonstrated gene-related phenotypic differences between individuals with familial frontotemporal lobar degeneration. Vertical gaze palsy was more frequent with MAPT variants; apraxia and focal dystonia with GRN; and fasciculations, atrophy, and weakness with C9orf72. Understanding these complex genotype-phenotype relationships may enhance clinical trial design and inform future treatment decisions.

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Continued
Short- and Long-term Central Action of Botulinum Neurotoxin Treatment in Laryngeal Dystonia

This study examines the therapeutic effects of botulinum neurotoxin (BoNT) treatment on brain function in patients with laryngeal dystonia (LD). The left precuneus was found to be the site of short-term BoNT central action, while the prefrontal-cerebellar axis was engaged with an intermediate treatment duration of 6–12 years, pointing to indirect action of BoNT treatment on the dystonic sensorimotor network.

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NB: “Unilateral Upper Cervical Posterior Spinal Cord Infarction Caused by Spontaneous Bilateral Vertebral Artery Dissection,” p. 473. To check out other NeuroImages, point your browser to Neurology.org/N. At the end of the issue, check out a Resident & Fellow Teaching NeuroImage discussing paravermal lesions in neuronal intranuclear inclusion disease, and another on reversible parkinsonism caused by lumboperitoneal shunt overdrainage. This week also includes a Resident & Fellow Pearls & Oysters article titled “Spinal Cord Candidiasis Linked to CARD9 Deficiency Masquerading as a Longitudinally Extensive Transverse Myelitis.”

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