

### **Movement disorders**

In their clinical trial involving 16 PD patients on stable carbidopa/levodopa and bromocriptine or pergolide, Goetz et al. (p. 1227) determined that a direct switch to pramipexole (using appropriate dosage conversion ratios) was preferable to a slow titration of the new agent. ♦ Ichise et al. (p. 1206) used SPECT imaging to evaluate pre- and postsynaptic dopaminergic alterations in dopa-untreated PD patients. ♦ In their epidemiologic study, Bower et al. (p. 1214) evaluated the incidence and distribution of parkinsonism in Olmsted County, Minnesota, over a 14-year period. They noted that parkinsonism is common among the elderly and that its incidence increases steeply with advancing age. They found consistently higher incidence rates in men across all age classes and across all types of parkinsonism except drug-induced parkinsonism, which was more common in women. ♦ Lombroso (p. 1191) reports three cases of children with lamotrigine-induced tics. The author speculates about how the drug's proposed mechanism of action might provide clues to the pathogenesis of Tourette's syndrome.

### **Multiple sclerosis**

Deisenhammer et al. (p. 1239) determined that the bioavailability of beta-interferon is completely inhibited in MS patients who have developed neutralizing antibodies to this agent. ♦ Rice et al. (p. 1277) measured neutralizing antibodies to interferon beta-1b in patients who were treated with the agent long-term and discovered that these antibodies disappeared in the great majority of patients. ♦ In their study of mice with experimental

autoimmune encephalomyelitis, Kim et al. (p. 1230) found that estriol treatment was more effective than placebo. They suggest that this may provide the basis for the novel therapeutic use of estriol for MS and other autoimmune diseases.

### **Stroke**

Barber et al. (p. 1153) performed echoplanar perfusion imaging (PI), diffusion-weighted imaging (DWI), and MR angiography (MRA) as well as clinical evaluations in 26 patients with middle cerebral artery (MCA) territory stroke. They determined that absent MCA flow on MRA predicts the presence of a presumed "penumbral" pattern on acute PI and DWI and worse stroke outcome. They suggest that these combined imaging modalities can identify individuals who have the potential to respond to thrombolytic therapy beyond 3 hours.

### **Alzheimer's disease**

Neumann et al. (p. 1138) present the results of a cost-effectiveness model suggesting that donepezil may be cost-effective but that additional controlled data on long-term drug efficacy are needed. They note that if the drug effect exceeds 2 years, the model predicts that for mild AD the drug would pay for itself in terms of cost offsets. In the accompanying editorial, Mushlin (p. 1115) discusses why articles such as this one that deal with issues such as cost-effectiveness are becoming increasingly important.

### **Neuroimaging**

Carmelli et al. (p. 1119) conducted a matched co-twin analysis of elderly monozygotic twins to examine the association between midlife cardiovascular risk

factors and MRI-based measures of brain atrophy. Independent of age effects and shared genetic or familial influences, midlife cardiovascular risk factors and lifetime health practices were predictive of structural brain changes in old age. ♦ In the accompanying editorial, Gorelick (p. 1114) elaborates on the relationship between these cardiovascular risk factors and later life cognitive impairment, speculates as to possible mechanisms, and suggests that appropriate treatment of modifiable risks such as hypertension may prevent brain damage and subsequent dementia.

### **Epilepsy**

Several articles in this issue, including an editorial by Lesser (p. 1117), deal with the effectiveness, safety, and mechanisms of active vagus nerve stimulation (VNS) for the treatment of epilepsy. ♦ Ben-Menachern et al. (p. 1265) assessed the long-term efficacy of VNS in 64 refractory epilepsy patients and concluded that it is a safe and effective initial treatment that remains effective for up to 5 years. ♦ Tatum (p. 1267), however, presents the cases of four patients who experienced reproducible ventricular asystole intraoperatively during initial testing for implantation of the VNS. ♦ Henry et al. (p. 1166) correlated acute VNS-induced regional cerebral blood flow alterations and chronic therapeutic responses. They suggest that increased thalamic synaptic activities mediate some antiseizure effects of VNS. ♦ Thomas et al. (p. 1174) present the results of a prospective 5-year study to determine the electroclinical characteristics and causative factors of nonconvulsive status epilepticus of frontal origin.

# Neurology<sup>®</sup>

**April 12 Highlights**  
*Neurology* 1999;52;1113  
DOI 10.1212/WNL.52.6.1113

**This information is current as of April 1, 1999**

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