## Perinatal stroke, prothrombotic genes, and maternal health insurance

Perinatal stroke in the fetus and neonate may be associated with maternal prothrombotic risk factors. Golomb et al. studied whether diagnosing prothrombotic genes (such as the factor V Leiden mutation) in otherwise asymptomatic mothers of children with perinatal stroke would affect the mothers' future ability to obtain health insurance. They were unable to obtain consistent information from the 17 largest insurance companies in Indiana. This issue has not been sufficiently addressed in the literature or the law.

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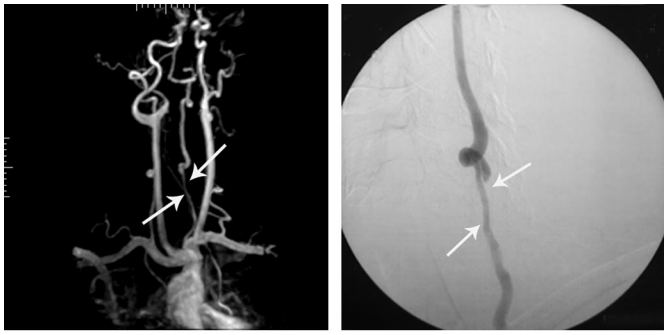
## CE-MRA for the rapid detection of supra-aortic vascular disease




*(A) CE-MRA study of a 32-year-old man with neck pain, difficulty walking, nausea, vomiting, and a lateral medullary infarct. Tapered narrowing of left vertebral artery from a dissection (arrows). (B) The dissection was confirmed on DSA.*

Wright et al. used contrast-enhanced MR angiography (CE-MRA) and a neurovascular array to image the vasculature from the aortic arch to the circle of Willis. CE-MRA holds promise for rapid, specific, and noninvasive screening of extracranial, but not yet of intracranial vascular disease.

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## Progressive myelopathy secondary to chronic ventriculoperitoneal CSF overshunting

Wingerchuck et al. describe the association of progressive myelopathy, CSF hypotension, and chronic overshunting. They hypothesize that MRI evidence of spinal dural thickening and epidural venous dilation suggests chronic CSF hypotension, especially in the context of a CSF diversion procedure.

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## Occurrence and effect of neutralizing antibodies (NABs) to IFN-beta

Sorensen et al. found that 41% of patients developed persistent neutralizing antibodies during the first 1 to 2 years of IFN-beta treatment, but a third became persistently antibody-negative on subsequent follow-up. There were significant differences in antibody formation and persistence between IFN formulations.

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From a 4-year controlled study involving 795 patients taking IM IFN-beta-1a, Kappos et al. report that despite an incidence of less than 5%, patients with neutralizing antibodies had a higher relapse rate and more disability progression than patients without antibodies.

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Francis et al. examined the impact of neutralizing antibodies in patients taking SC IFN-beta-1a for 4 years. Once neutralizing antibodies developed, significant differences were noted between NAb+ and NAb− groups, particularly on MRI and relapse measures.

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*The editorial by Giovannoni and Goodman on these three papers notes that the evidence is now clear that neutralizing antibodies have a negative impact on all aspects of the therapeutic response to IFN-beta. They recommend ways to incorporate testing into clinical practice. The main issue remaining for future studies is the best course of action when neutralizing antibodies occur.*

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## Language regression in children: An epileptic etiology?

McVicar et al. reviewed 149 children with language regression. Children with isolated language regression had a higher frequency of epileptiform EEGs and clinical seizures than those with language regression in the context of autistic regression, suggesting that there are two distinct phenotypes.

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*The editorial by Edwin Trevathan discusses the results of the study by McVicar et al., noting that early referral for diagnosis of seizures is more likely to be beneficial in children with language regression only. The study's hypothesis, that seizures are more likely to be causally related to language regression in the absence of autism, deserves further study.*

**see page 11**

## Alcohol improves the gait disorder in advanced ET

Gait ataxia occurs in advanced essential tremor. Klebe et al. found that low doses of orally administered ethanol which slightly worsen ataxia in normal subjects improves gait in patients with advanced ET.

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