



## In Focus

### Spotlight on the May 24 Issue

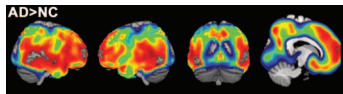
**Robert A. Gross, MD, PhD, FAAN**  
Editor-in-Chief, *Neurology*®

#### CSF biomarkers in posterior cortical atrophy

Cerebrospinal fluid biomarkers (total tau, phosphorylated tau and  $A\beta_{42}$ ) were typical of AD in most patients affected by posterior cortical atrophy (PCA). PCA patients with motor symptoms suggestive of corticobasal syndrome, by contrast, had non-AD CSF profiles.

See p. 1782; Editorial, p. 1778; see also p. 1789

#### Distinct clinical and metabolic deficits in PCA and AD are not related to amyloid distribution



The investigators compared controls to patients with PCA and AD who underwent PIB and FDG PET. PIB

uptake occurred throughout frontal, temporoparietal, and occipital cortex in both AD and PCA patients.

See p. 1789; Editorial, p. 1778; see also p. 1782

From editorialists David F. Tang-Wai & Neill R. Graff-Radford:  
"Recognizing PCA accurately and confirming the diagnosis with biomarkers as in the above 2 articles makes us better clinicians and allows patients with PCA entry into therapeutic trials."

See p. 1778

#### Resting bold fMRI differentiates dementia with Lewy bodies vs Alzheimer disease

This study performed resting state Blood Oxygen Level Dependent and functional connectivity MRI in 88 participants to determine differences between Alzheimer disease (AD) and dementia with Lewy bodies (DLB). Changes in DLB indicated patterns of activation that were distinct from those seen in AD; such patterns may improve discrimination of DLB from AD.

See p. 1797

#### Progression of language decline and cortical atrophy in subtypes of primary progressive aphasia

The authors examined the longitudinal course of primary progressive aphasia (PPA) over a two-year period in 13 patients who fulfilled research criteria for logopenic, agrammatic, and semantic PPA subtypes. There was substantial language decline and cortical atrophy in PPA; however, atrophy remained primarily within the language network.

See p. 1804

#### Adenosine 2A receptor availability in dyskinetic and nondyskinetic patients with Parkinson disease

The authors investigated 6 patients with Parkinson disease (PD) and an additional 6 without levodopa-induced dyskinesias (LIDs), all of whom had no medication for 12 hours. Their PET findings were compared with those of 6 age-matched healthy controls and provide PET evidence of increased striatal adenosine A2A receptor availability in PD patients with LIDs.

See p. 1811

#### Final results from 18 years of the International Lamotrigine Pregnancy Registry

Over 18 years, 35 infants with major congenital malformations (MCMs) were observed among 1558 first trimester monotherapy exposures. The proportion of infants with MCMs following lamotrigine-valproate polytherapy exposure was high, but similar to that previously reported with valproate monotherapy. Monitoring of specific malformations among lamotrigine-exposed pregnancies ought to continue.

See p. 1817

#### Diabetes mellitus and ischemic stroke in the young: Clinical features and long-term prognosis

The authors compared risk factors, stroke characteristics, and long-term prognosis between 904 nondiabetic young ischemic stroke patients and 104 patients with either type 1 or 2 diabetes. These findings suggest that ischemic stroke patients with type 1 or 2 diabetes exhibit a distinct risk-factor and etiologic profile and worse vascular prognosis than do nondiabetic patients.

See p. 1831

NB: "Resident & Fellow International Issues: Tropical neurology in Vietnam," see p. e102. To check out other Resident & Fellow International submissions, point your browser to <http://www.neurology.org> and click on the link to the Resident and Fellow Section.

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*Neurology* 2011;76;1777

DOI 10.1212/WNL.0b013e31821d09bd

**This information is current as of May 23, 2011**

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