

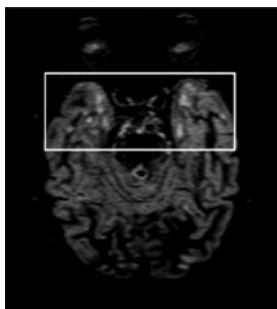


## In Focus

### Spotlight on the February 1 Issue

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

#### Consensus recommendations for MS cortical lesion scoring using double inversion recovery MRI



This paper describes consensus recommendations for cortical lesion scoring in patients with multiple sclerosis (MS). The current study suggests that comparing available literature data on cortical lesions may be problematic, and increased consistency in acquisition protocols may improve scoring agreement. Sensitivity and

specificity of the proposed guidelines should now be studied in a more formal setting using similar double inversion recovery protocols.

See p. 418; Editorial, p. 412

#### Patterns of progression in patients with recurrent glioblastoma treated with bevacizumab

A change from a local to diffuse pattern of progression following treatment with bevacizumab was not common, and patients with diffuse recurrence did not seem to fare more poorly than those with other patterns of progression. The methodologic strengths lie in the large and homogenous patient cohort.

See p. 432

*From editorialist Larry Junck: "Some say that the most important advances in medicine do not require a statistician. Certainly one does not need to treat more than a few patients with glioblastoma with BEV before appreciating its activity as evident on MRI. This activity establishes the importance of VEGF-A in glioblastoma angiogenesis."*

See p. 414

#### Readmission after stroke in a hospital-based registry: Risk, etiologies, and risk factors



This prospective cohort study found that more than one-third of patients who had a stroke were readmitted within 1 year. Infections and recurrent vascular events were the most common reasons. Readmission after stroke may be prevented if the potential influence of infections is acknowledged in poststroke care.

See p. 438

#### Increasing incidence of ischemic stroke in patients with HIV infection



This study assessed recent trends in the proportion of HIV infection among persons hospitalized with stroke. In examining how these trends varied by index stroke type and evaluating sociodemographic, hospital, and clinical factors, the investigators noted there has been a substantial and significant rise in patients hospitalized for stroke with coexisting HIV infection.

See p. 444

#### A cross-sectional study contrasting olfactory function in autonomic disorders

Olfactory function was evaluated in 12 patients with pure autonomic failure, 10 patients with multiple system atrophy, and 4 patients with dopamine  $\beta$ -hydroxylase deficiency. The ability to identify odors was relatively intact in patients with dopamine  $\beta$ -hydroxylase deficiency, demonstrating that these patients function well despite their inability to synthesize norepinephrine.

See p. 456

#### TMEM106B regulates progranulin levels and the penetrance of FTLN in GRN mutation carriers



The authors examined 3 single nucleotide polymorphisms (SNPs) in 482 clinical and 80 pathologic FTLN-TDP patients without progranulin (GRN) mutations, 78 FTLN patients with GRN mutations, and 822 controls. Individuals with a GRN mutation who also carry 2 copies of a protective genetic variant in *TMEM106B* were less likely to develop FTLN, potentially by modulating GRN levels.

See p. 467

*NB: As the Green Journal continues to celebrate 60 years of publishing, check out the Resident & Fellow Mystery Case: "A 54-year-old woman with transient episodes of headache and neurologic dysfunction" on p. e18. To see the first Mystery Case, point your browser to <http://www.neurology.org>. Don't forget to check out the next trial issue of Neurology: Clinical Practice, which will accompany your February 15 issue of the journal.*

Podcasts can be accessed at [www.neurology.org](http://www.neurology.org)

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*Neurology* 2011;76;411

DOI 10.1212/WNL.0b013e31820c6729

**This information is current as of January 31, 2011**

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