In Focus

Spotlight on the August 9 Issue

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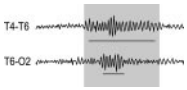
Interictal scalp fast oscillations as a marker of the seizure onset zone



The scalp EEG of 15 patients with focal epilepsy was examined. The rates and the proportion of channels with gamma and ripple fast oscillations were higher in the seizure onset zone, indicating that they may be used as interictal scalp EEG markers for the seizure onset zone.

See p. 524; Editorial, p. 518

Dominant *GDAP1* mutations cause predominantly mild CMT phenotypes

In 8 Charcot-Marie-Tooth (CMT) families, 4 pathogenic heterozygous *GDAP1* mutations were identified, 3 of which were novel. This study broadens the phenotypic and genetic spectrum of autosomal dominant *GDAP1*-associated neuropathies and shows that patients with dominant *GDAP1* mutations may display clear axonal CMT, but may also have only minimal clinical and electrophysiologic abnormalities.

See p. 540; Editorial, p. 520

Patient-ventilator asynchrony with nocturnal noninvasive ventilation in ALS

The investigators used home nocturnal polysomnography to study 23 consecutively recruited patients with amyotrophic lateral sclerosis (ALS) who used noninvasive ventilation consistently. The tests revealed frequent nocturnal breathing disorder and patient effort that was frequently asynchronous with the ventilator. Functional severity of ALS was not predictive of the degree of patient-ventilator asynchrony.

See p. 549

A randomized, double-blind, placebo-controlled trial of simvastatin to treat Alzheimer disease

This trial of simvastatin was conducted in 406 individuals with mild to moderate Alzheimer disease (AD) and normal lipid levels. Two hundred four participants received simvastatin and 202 received placebo. The findings provide evidence that simvastatin 40 mg/day does not slow decline on the cognitive portion of the Alzheimer Disease Assessment Scale.

See p. 556

Guided self-help for functional (psychogenic) symptoms: A randomized controlled efficacy trial

The authors collected primary outcome data in 125 of the 127 participants who received usual care or usual care plus guided self-help. This trial provides evidence that the addition of guided self-help to usual care improved patient outcomes for functional (psychogenic) symptoms.

See p. 564

Autoimmune disease after alemtuzumab treatment for multiple sclerosis in a multicenter cohort

The authors analyzed prospective clinical and serologic data from 248 patients with multiple sclerosis treated with alemtuzumab, with median follow-up of 34.3 months. There was a cumulative autoimmune disease risk of 22.2% that occurred exclusively within 5 years of treatment and peaked at 12–18 months.

See p. 573

Antibodies to MOG are transient in childhood acute disseminated encephalomyelitis

This study addressed the kinetics of anti-MOG immunoglobulins in 77 pediatric patients. The longitudinal analysis revealed that autoantibodies to cell surface-expressed MOG rapidly declined in childhood acute disseminated encephalomyelitis, but tended to persist in childhood MS. The persistence or decline of autoantibodies to MOG might have diagnostic and prognostic value, if validated in a larger sample.

See p. 580

CLINICAL/SCIENTIFIC NOTES

Making diagnosis of Pompe disease at a presymptomatic stage: To treat or not to treat?

Adult Pompe disease may be clinically silent over decades. Considering the constraints and high cost of enzyme replacement therapy, the authors recommend treating patients only if evidence appears for reduced vital capacity or muscle strength, or if the muscle MRI reveals abnormalities.

See p. 594

From editorialists Kwon and Steiner: "Patient-in-waiting" is an apt description for this particular case. The current practice of medicine is ill-equipped to support and advise individuals who are "affected" yet currently well, diagnosed yet still not diseased.

See p. 522

NB: Resident & Fellow Teaching NeuroImages: "Numb chin syndrome in an edentulous patient" (p. e38). Click on " Residents & Fellows" at www.neurology.org for more R&F features.

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