

# In Focus Spotlight on the July 26 Issue

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### Notable in Neurology

This issue features an article that investigates the association of ultraearly hematoma growth with the CT angiography spot sign, hematoma expansion, and clinical outcomes in patients with acute intracerebral hemorrhage and another that investigates tau pathology in Alzheimer disease and mild cognitive impairment using PET. A featured article presents formal consensus-based guidance for the management of myasthenia gravis.

#### **ARTICLES**

### Advanced interatrial block and ischemic stroke: The Atherosclerosis Risk in Communities Study

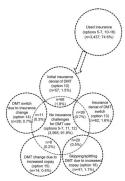
The authors examine the association between advanced interatrial block and ischemic stroke in 14,716 participants followed for 22 years using a time-to-event analysis. Their findings suggest that advanced interatrial block, a marker of atrial fibrosis and abnormal cardiac remodeling of the left atrium, is an independent risk factor for ischemic stroke.

#### See p. 352

From editorialists Hughes & Worrall: "This work underscores the importance of an evolving literature that indicates advanced interatrial block and other atrial cardiopathies as emerging risk factors for clinical ischemic stroke events and cardiovascular mortality. Future studies will need to examine these relationships in more detail and in nuanced fashion."

#### See p. 344

# Health insurance affects the use of disease-modifying therapy in multiple sclerosis



The authors examine the association between health insurance and use of disease-modifying therapy (DMT) among 6,662 North American Research Committee on Multiple Sclerosis registry participants with multiple sclerosis. In those participants taking DMT, one-quarter relied on subsidized drug programs; 6% did not use DMT for financial reasons. Drug costs and changing insurance coverage may adversely affect treatment access in multiple sclerosis.

See p. 365

From editorialists Bourdette & Patti: "For those encountering coverage challenges, their physicians often successfully appealed the decisions of insurance companies. This is to the credit of their physicians, but the survey does not capture the large amount of unreimbursed time spent by neurologists and their staffs appealing denials of coverage by insurance companies, which is a frustrating and expensive part of treating people with multiple sclerosis."

See p. 346

# Transplantation of spinal cord-derived neural stem cells for ALS: Analysis of phase 1 and 2 trials $\stackrel{}{\bowtie}$ $\triangleq$

This study investigates the safety of increasing cells and injection sites and the expansion of this procedure to multiple surgical centers. The investigators found that 40 injections and 16 million cells over 2 sequential surgeries was well-tolerated by most patients. These results are encouraging for moving forward with a true therapeutic trial of intraspinal transplantation for amyotrophic lateral sclerosis.

See p. 392; Editorial p. 348

### **VIEWS & REVIEWS**

# Detecting depression in Parkinson disease: A systematic review and meta-analysis

Depression is common in Parkinson disease and accurate detection is key to ensuring appropriate management. Twenty-four validated tools were identified; the highest sensitivity was 91% for the Geriatric Depression Scale-15 at a cutoff of 5. Valid tools for detecting depression in Parkinson disease are available and practitioners should choose one depending on their practice.

See p. 426

NB: "Evaluation of pain and stress in healthy volunteers undergoing research lumbar punctures," see p. 438. To check out other Clinical/Scientific Notes, point your browser to Neurology.org. At the end of the issue, check out the Neurolmages discussing the marked enlargement of neck circumference from nerve hypertrophy in chronic inflammatory demyelinating polyradiculoneuropathy and serial arterial spin labeling MRI in autonomic status epilepticus due to anti-LGI1 encephalitis. This week also includes a Humanities piece titled "Alzheimer disease: True enemy of humankind."



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