



In Focus

Spotlight on the February 7 issue

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Notable in Neurology

This issue features an article that explores whether disease-modifying therapies exert differential effects on rates of retinal atrophy in relapsing-remitting multiple sclerosis and another that establishes sphingosine 1-phosphate lyase deficiency as a cause of Charcot-Marie-Tooth disease. A featured article investigates the uniformity of brain death determination guidelines through comparison of those at top-ranked neurologic institutions.

ARTICLES

Neuropathology of SUDEP: Role of inflammation, blood-brain barrier impairment, and hypoxia [OPEN](#)

Much is unknown about the mechanisms leading to sudden unexplained death in epilepsy (SUDEP), especially at the brain tissue level, hampering prevention efforts. The authors searched for evidence of inflammation, gliosis, and neuronal or blood-brain barrier damage in postmortem brain tissue. Further research is needed as there was no clear pathologic signature of SUDEP.

See p. 551

Vascular risk factors in INPH: A prospective case-control study (the INPH-CRasH study)

This epidemiologic study considered the vascular risk factor (VRF) of idiopathic normal pressure hydrocephalus (INPH) and found that patients with INPH have more VRFs compared to the general population. The authors not only provided evidence for a pathophysiologic pathway of INPH, but also suggested aggressive management of VRFs in addition to shunt surgery.

See p. 577

Left ventricular wall motion abnormalities are associated with stroke recurrence

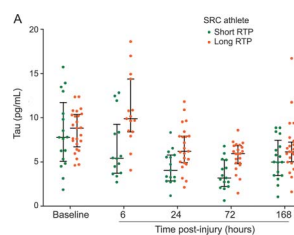
This study investigated the role of left ventricular wall motion abnormalities (LVWMAs) on stroke recurrence. LVWMAs were independently associated with stroke recurrence in patients with acute ischemic stroke. In stroke management without known cardioembolic sources, LVWMAs should be considered.

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From editorialist Brouns: "Given the considerable study population and the extensive set of possible confounding factors taken into account, the results may serve as a starting point for more detailed exploration of the pathophysiology underlying LVWMAs in stroke patients."

See p. 510

Acute plasma tau relates to prolonged return to play after concussion [OPEN](#)



Return to play decisions are difficult, as a subsequent concussion prior to full neuronal recovery increases risk for chronic impairments. The authors quantified total tau in blood, and linked elevation of tau within 6 hours of concussion to longer return to play. This biomarker can help inform return decisions and ultimately improve the safety of athletes.

See p. 595

From editorialists Bendlin and Makdissi: "This study and others conducted in the sports setting open the door for further evaluation and possible future implementation of blood-based biomarkers for evaluation of concussion."

See p. 512

NB: "Rheumatoid pannus of the cervical spine: An unusual cause of multiple cranial nerve palsies," p. e51. To check out other Resident & Fellow Teaching NeuroImages, point your browser to Neurology.org and click on the link to the Resident & Fellow Section. At the end of the issue, check out the NeuroImage on reactivation of CNS chagoma in an immunosuppressed patient. This week also includes a Resident & Fellow Clinical Reasoning article titled "A 74-year-old woman with bilateral foot pain and a palmar rash."

Podcasts can be accessed at Neurology.org

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