In Focus

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Notable in Neurology this week

This issue features an article that investigates the validity of the GRECogVASC cognitive risk score, developed to identify patients at risk of poststroke neurocognitive disorders, who are consequently eligible for a comprehensive cognitive assessment; another describes a new spinocerebellar ataxia caused by a heterozygous *STUB1* pathogenic genetic variant. A featured article examines alcohol responsiveness in patients with dystonia to determine predictors of a positive response.

Articles

Circulating cortisol and cognitive and structural brain measures: The Framingham Heart Study





This article highlights the hypothalamic pituitary adrenal (HPA) axis influence on cognition and brain structure. Higher serum cortisol was associated with alterations in cognition and brain structure (specifically in women), as assessed by neuropsychologic testing, MRI, and fractional anisotropy. Subclinical HPA axis dysfunction may affect cognition, possibly through structural alterations.

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Depressed TSH level as a predictor of poststroke fatigue in patients with acute ischemic stroke

Poststroke fatigue (PSF) is a common symptom that negatively affects the rehabilitation of stroke survivors. It is of clinical importance to understand which biochemical factors predict PSF. This study indicated that thyroid function profiles may predict fatigue after acute ischemic stroke, suggesting that neuroendocrine responses could play a role in PSF.

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Multimodal nocturnal seizure detection in a residential care setting: A long-term prospective trial

Reliable nocturnal seizure detection with a simple device is possible for patients with epilepsy and an intellectual disorder. The authors studied the detection of nocturnal seizures with a bracelet measuring heart rate and movement. The sensor detected 86% of major seizures with a positive predictive value of 49%.

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In Focus

Views & Reviews

Gauging seizure risk

Epileptology is poised for change. Neurologists will soon base clinical decisions on chronic ambulatory EEG recordings that can reveal cycles of brain activity. Understanding epilepsy as a cyclical disorder with predictable fluctuations in seizure risk may enable dynamic treatment strategies, signaling a new era of personalized neurologic care.

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NB: "Self-management in epilepsy: Web-based seizure tracking applications," p. e2027. To check out other Resident & Fellow Opinion and Special Articles, point your browser to Neurology.org/N and click on the link to the Resident & Fellow Section. At the end of the issue, check out the Clinical/Scientific Note discussing the comorbidities of tuberous sclerosis complex and the phenotypical differences between patients with and without tuberous sclerosis complex. This week also includes a NeuroImage titled "Surviving cerebral malaria."

NEW EPISODE



November 20, 2018

Devastating neurologic injuries in the Syrian war (see the December 2018 issue of Neurology® Clinical Practice)

- 1. Neurology: Clinical Practice: Devastating neurologic injuries in the Syrian war
- 2. What's Trending: Standards for Neurologic Critical Care Units: A Statement for Healthcare Professionals from The Neurocritical Care Society

In the first segment, Dr. Jason Crowell talks with Dr. Maher Saqqur and Yasmeen El Hajj Abdallah about neurological injuries in the Syrian War. In the second part of the podcast, Dr. Andrew Schomer focuses his interview with Dr. Asma Moheet on standards for neurologic critical care units.

Disclosures can be found at Neurology.org.

No CME this week: Interviews based on articles from *Neurology: Clinical Practice, Neurology® Genetics*, and *Neurology® Neuroimmunology & Neuroinflammation* are excluded from the CME program.



Spotlight on the November 20 issue

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