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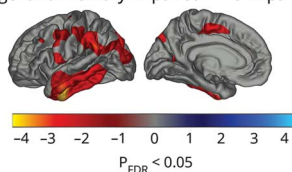
Notable in *Neurology* this week

This issue features an article that investigates false outcome prediction of the Status Epilepticus Severity Score, specifically the corresponding clinical characteristics; another determines the effectiveness of a quantitative speech measure to identify and monitor motor speech impairment in patients with primary progressive aphasia. A featured Contemporary Issues article examines the current state of knowledge in new-onset refractory status epilepticus and proposes an outline for future research.

Articles

Cognitive phenotypes in temporal lobe epilepsy are associated with distinct patterns of white matter network abnormalities

Language- and memory-impaired > No impairment



Cognitive impairment in patients with temporal lobe epilepsy (TLE) is highly heterogeneous, ranging from no impairment to globally impaired cognition. The authors identify distinct cognitive phenotypes within TLE and reveal network abnormalities associated with each phenotype. Such phenotyping could enable the

ability to match patients to treatments, improving cognitive outcomes.

Page 791

Racial differences in intervention rates in individuals with ALS:

A case-control study

This study confirms longer survival in African American patients with amyotrophic lateral sclerosis (ALS) compared to white patients and suggests this difference may be secondary to higher rates of tracheostomy in African American patients. There may be racial differences in patients' choices regarding supportive care for ALS, which should be considered when working with patients.

Page 792

From editorialists Armon & Albert: "In considering the role of ethnicity in end-of-life decisions, great sensitivity is needed, in order not to imply that there is something wrong with opting for [tracheostomy with invasive ventilation]. The same sensitivity applies to patient education. There is a fine line between educating patients about their options and continuing to educate them until all patients make the same choices."

Page 781

Reproductive period and risk of dementia in a diverse cohort of health care members

In a large prospective cohort, events signaling less endogenous estrogen exposure (i.e., later age at menarche, younger age at menopause, and hysterectomies) were associated with elevated dementia risk. Continuing to examine sex-specific risk factors for dementia in women is critical given the large disproportionate burden of dementia experienced by women.

Page 796

Characteristics of graduating US allopathic medical students pursuing a career in neurology

There is a shortage of neurologists and an early loss of students interested in the field. Using the Association of American Medical Colleges surveys, a correlation was identified between strong

Continued

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neuroscience programs/neurology clerkships and students' incidence of choosing neurology. Early contact and specific mentoring for those with interest may be most helpful.

Page 800

From editorialists London & Greenwood: "While converting more students to neurology may be beneficial to the field, we should not aim to recruit individuals who will not be satisfied or productive as neurologists."

Page 786

NB: "Clinical Reasoning: A 71-year-old man receiving treatment for cryptococcal meningitis, developing new-onset lethargy," p. 815. To check out other Resident & Fellow: Clinical Reasoning 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 NeuroImage illustrating biodistribution of IV glyburide. This week also includes a Reflections: Neurology and the Humanities piece titled "The black binder."

NEW EPISODE



April 23, 2019

Montreal Cognitive Assessment as a screening tool: Influence of performance and symptom validity (see the April 2019 issue of *Neurology[®] Clinical Practice*)

1. Montreal Cognitive Assessment as a screening tool: Influence of performance and symptom validity
2. What's Trending: Serum neurofilament dynamics predicts neurodegeneration and clinical progression in presymptomatic Alzheimer's disease

In the first segment, Dr. Gregory Day talks with Dr. Brigid Waldron-Perrine about her *Neurology: Clinical Practice* paper addressing the Montreal Cognitive Assessment as a screening tool. In the second part of the podcast, Dr. Jeffrey Burns focuses his interview with Dr. Mathias Jucker on how serum neurofilament dynamics predict neurodegeneration and clinical progression in presymptomatic Alzheimer disease. The article can be found in *Nature: Medicine* <https://www.nature.com/articles/s41591-018-0304-3>.

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.

Neurology[®]

Spotlight on the April 23 issue

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