In Focus

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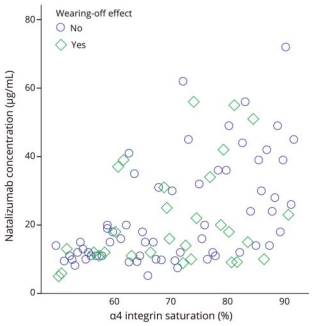
Robert A. Gross, MD, PhD, FAAN, Editor-in-Chief, *Neurology*®

Notable in *Neurology* this week

This issue features an article that describes the clinical characteristics of acquired amyloid transthyretin (ATTR) amyloidosis after liver transplantation with grafts from patients with hereditary variant ATTR amyloidosis; another reports a test of the ATN scheme on discrimination of patient populations with specific features. A featured Views & Reviews article elucidates the similarities and differences of tics and functional tic-like movements.

Articles

The natalizumab wearing-off effect: End of natalizumab cycle, recurrence of MS symptoms



Patients with multiple sclerosis (MS) might be reluctant to extend intervals between natalizumab infusions as they feel they are in need of their next infusion because of a wearing-off effect. The authors investigated and conclude that the wearing-off effect is not associated with low natalizumab concentrations or low natalizumab receptor saturations.
Page 739

From editorialists Mowry & Bourdette: "We need to be mindful that we still do not know what causes wearing-off symptoms in some patients, and we need to more thoroughly determine that such symptoms are not caused by subclinical reactivation of MS."
Page 735

Relationships between *DMD* mutations and neurodevelopment in dystrophinopathy

While muscle weakness is effortlessly recognized in dystrophinopathy, neurodevelopmental problems are not. Using a combination of parent-reported information and genetic data, the authors show that speech delay and learning difficulties are more common in boys with mutations in the 3′ end of *DMD*. Clinicians should consider screening for dystrophinopathy in young boys presenting with neurodevelopmental problems to avoid diagnostic delays and initiate appropriate treatment.
Page 741

Prospective natural history study of *C9orf72* ALS clinical characteristics and biomarkers

This report describes natural history and pathobiology for the largest genetic subset of patients with amyotrophic lateral sclerosis with a *C9orf72* mutation (C9ALS). This prospective study of C9ALS and preclinical mutation carriers defines baseline clinical characteristics, biomarkers, and pathologies. This work sets the stage for upcoming clinical trials for *C9orf72*-targeted therapeutics.
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MORE ONLINE

Editor's Summary
Audio summary of highlighted articles.
NPub.org/edsum

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High-precision plasma β-amyloid 42/40 predicts current and future brain amyloidosis

A blood test is highly accurate in identifying the brain changes of Alzheimer disease. The combination of plasma β-amyloid 42/40, age, and *APOE* ε4 status is highly concordant with amyloid PET status and predicts future amyloid PET status. Accurate blood tests for Alzheimer disease could change the field.
Page 746

From editorialists Bendlin & Zetterberg: "While it appears that clinicians change treatment plans for individuals with mild cognitive impairment and dementia after determining amyloid status via a PET scan, whether this positively influences clinical outcomes remains to be seen."
Page 737

NB: "End of life: Expert care and support, not physician-hastened death," p. 729. To check out other Special Editorials, point your browser to Neurology.org/N. At the end of the issue, check out the Resident & Fellow Clinical Reasoning article discussing the path to diagnosis of a patient presenting with acute encephalopathy, rigidity, and fever. This week also includes a Resident & Fellow Section article titled "Teaching NeuroImages: Electroretinograhic artifacts in EEG."

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October 22, 2019

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High-precision plasma β-amyloid 42/40 predicts current and future brain amyloidosis (see p. 746)

1. High-precision plasma β-amyloid 42/40 predicts current and future brain amyloidosis
2. What's Trending: Practice guideline update summary: Pharmacologic treatment for pediatric migraine prevention

In the first segment, Dr. Jeff Burns talks with Dr. Randall Bateman about his paper addressing how high-precision plasma β-amyloid 42/40 predicts current and future brain amyloidosis. In the second part of the podcast, Dr. Teshamae Monteith speaks with Dr. Andrew Hershey on his practice guideline update summary article on pharmacologic treatment for pediatric migraine prevention.

Disclosures can be found at Neurology.org.

Spotlight on the October 22 issue

Robert A. Gross

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