



From the Editor

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In an October 2019 blog post, Without Borders drew attention to an article published in *Neurology* that focused on the World Health Organization's diagnostics for neurologic disorders.¹ In the beginning paragraphs of the article, Waldrop et al.¹ state, "The (Essential Diagnostics List [EDL]) seeks to improve global treatment by providing 'a catalogue of tests needed to diagnose both the most common conditions worldwide and diseases of global importance in both primary care and advanced settings.'^{2,3} This first iteration of the EDL includes diagnostic tests enabling the use of medications on the WHO Essential Medicines List (EML), which has guided international policies and funding decisions for the last 4 decades.⁴ Yet there is little representation of neurologic treatments on the EML, including a lack of medications for dementia, multiple sclerosis, neuropathic pain, and movement disorders, as well as commonly used medications for migraine such as triptans (table).⁵

By failing to account for disorders that already lack coverage in the EML, the EDL exacerbates existing categorical oversights for neurologic disorders.⁵⁻⁷ Of the 113 diagnostics tests included in the first edition of the EDL, only 3 explicitly pertain to neurologic diseases: the CSF cryptococcal antigen test for diagnosis of cryptococcal meningitis, the CSF nucleic acid amplification test for diagnosis of CNS tuberculosis, and CSF bacterial culture."

There is an update included at the end of the article: "In July 2019, the 2nd Edition of the WHO's EDL was released. Included in the second edition are 2 additional neurodiagnostic tests: CSF venereal disease research laboratory (VDRL) testing for neurosyphilis and CSF cell cytology."¹ The authors share information on this update as well.

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