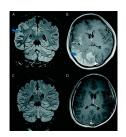
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#### A summary of recently published articles in the Neurology® Resident & Fellow Section

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### August 6, 2019 issue

This issue contains an Emerging Subspecialties article that investigates current opportunities in neurology and education. Two Teaching NeuroImages are also featured in this issue. The first discusses neuroimaging in hemiplegic migraine while the second describes a case of a 48-year-old woman with MELAS.

#### **Emerging Subspecialties: Medical education**

In this article, we sought to investigate the current landscape of opportunities in neurology and education. We also detail the possible career trajectories for fellows and attendings interested in the growing trend of clinician educator. In addition, we identify a current lack of formal training opportunities in neurologic medical education in comparison to other medical fields. Page 273

#### Teaching NeuroImages: Neuroimaging in hemiplegic migraine

A 31-year-old man with hemiplegic migraine presented with a 2-day history of severe right-sided throbbing headache, photophobia, and vomiting. They were associated with numbness and weakness over the left hand, which spread to his left face and left leg. Page e626

### Teaching NeuroImages: A 48-year-old woman with MELAS

We present MRI and magnetic resonance SPECT findings from a 48-year-old woman with genetic testing-confirmed MELAS.

Page e624

### August 13, 2019 issue

This issue starts with a Clinical Reasoning article describing a 68-year-old man with rapid cognitive decline. The issue also includes a Teaching NeuroImages case showing unilateral focal segmental hyperhidrosis from spinal tumor progression. Another Teaching NeuroImage describes a case of X-linked adrenoleukodystrophy as a spinocerebellar variant.

### Clinical Reasoning: A 68-year-old man with rapid cognitive decline

This is a case report of a patient who presented with rapidly progressive dementia who was ultimately found to have a dural arteriovenous fistula with associated venous sinus thrombosis. This case had multiple leading diagnoses that were disproved until we reached the final correct diagnosis. Page 315

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# Teaching NeuroImages: Unilateral focal segmental hyperhidrosis from spinal tumor progression

Imaging of a patient cared for by our service who demonstrated unilateral hyperhidrosis of her thoracic spine, particularly after physical activity, is shown. Although rare, this physical examination finding has been reported in a handful of cases related to syrinx formation from Chiari pathology or trauma, and now with our case, from tumor syrinx progression.

Page e729

## Teaching NeuroImages: X-linked adrenoleukodystrophy: Spinocerebellar variant

A 29-year-old previously healthy man presented with 2 months' history of progressive dysarthria and unsteady gait. Early recognition of this disease can allow proper genetic counseling and institution of dietary therapy or bone marrow transplantation.

Page e731

### August 20, 2019 issue

An Education Research article in this issue is based on understanding barriers to effective goals of care communication for neurology trainees. The Clinical Reasoning article in this issue shows pes cavus and neuropathy. The 2 Teaching NeuroImages featured this issue describe optic and third cranial nerves infiltration as initial relapse of acute lymphoblastic leukemia and enlarged parietal foramina inadvertently labeled as burr holes.

# Education Research: Understanding barriers to goals of care communication for neurology trainees

In this article, neurology residents identify multiple barriers to effective goals of care communication and propose specific desired strategies for improvement. This detailed input from residents will be incorporated into future curricular interventions to improve confidence and skill in leading goals of care discussions.

Page 362

### Clinical Reasoning: Pes cavus and neuropathy: Think beyond Charcot-Marie-Tooth disease

In this article, we describe an 18-year-old woman who presented with neuropathy and tremors. She had been diagnosed with demyelinating form of Charcot-Marie-Tooth disease when she was 7 years old.

Page e823

# Teaching NeuroImages: Optic and third cranial nerves infiltration as initial relapse of acute lymphoblastic leukemia

A 34-year-old man with a history of acute lymphoblastic leukemia under consolidation treatment presented right-side blurred vision and headache associated with complete third right cranial nerve palsy.

Page e829

### Teaching NeuroImages: Enlarged parietal foramina inadvertently labeled as burr holes

A 49-year-old woman presented with status migrainosus. A CT head revealed only bilateral symmetric "burr holes" in the posterior paramedian calvarium despite no prior cranial surgery. Page e827

### August 27, 2019 issue

This issue contains a Clinical Reasoning case describing a 26-year-old man with right hand and arm weakness. The Mystery Case in this issue discusses bilateral alopecia as clue to diagnosis of Gomez-Lopez-Hernandez syndrome in a 38-year-old man. A Teaching NeuroImages case describes isolated and persistent hiccup by tiny ischemia at dorsolateral medulla.

### Clinical Reasoning: A 26-year-old man with right hand and arm weakness

This case emphasizes the broad differential for unilateral distal upper extremity weakness, atrophy, and upper motor neuron signs. Localization and clinical reasoning were complicated by both sensory symptoms and the presence of clinical and electrical myotonia, necessitating evaluation for other central and peripheral disorders.

Page e927

# Mystery Case: Bilateral alopecia as clue to diagnosis of Gomez-Lopez-Hernandez syndrome in a 38-year-old man

Our case describes the diagnosis of Gomez-Lopez-Hernandez syndrome (GLHS). Our case highlights the usefulness of hair findings in the neurologic examination as clues to rare genetic syndromes, with the bilateral patchy alopecia in GLHS representing an illustrative example.

Page 408

## Teaching NeuroImages: Isolated and persistent hiccup by tiny ischemia at dorsolateral medulla

Hiccups with stroke have been reported as one of the symptoms of the lateral medullary syndrome, but isolated and persistent hiccups with stroke are rare. The patient described in this NeuroImage presented with isolated and persistent hiccup and imaging showed tiny lesion in the right dorsolateral medulla.

Page e934



#### **Resident & Fellow Rounds**

John J. Millichap and Roy E. Strowd III Neurology 2019;93;406-407 DOI 10.1212/WNL.00000000000008014

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