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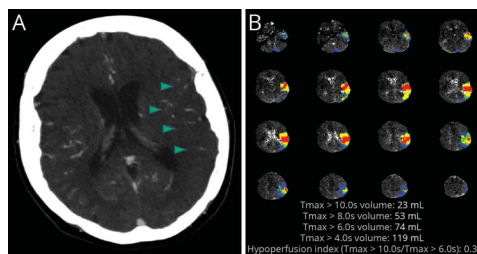


## Notable in *Neurology* This Week

This issue features an article that reviews the safety and efficacy of L-arginine use to treat stroke-like episodes in people with mitochondrial disease; another examines whether the children of women who use serotonergic antidepressants during pregnancy are at higher risk for neonatal seizures and epilepsy. A featured Contemporary Issues in Practice, Education, & Research article identifies obstacles to parental leave for neurology residents and suggests solutions.

## Research Articles

### The Cerebral Collateral Cascade: Comprehensive Blood Flow in Ischemic Stroke



This multicenter retrospective cohort study assessed the cerebral collateral cascade (CCC) on CT studies to measure pial arterial collaterals, tissue-level collaterals, and venous outflow in patients with ischemic stroke. Favorable CCC profiles strongly predicted radiographic and functional outcomes after thrombectomy.

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From editorialists Sharma and Leslie-Mazwi: "...[T]his exploratory study highlights the layers of subtlety in imaging evaluation of potential treatment candidates."

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### Outcomes That Matter to Adolescents With Continuous Headache Due to Chronic Migraine and Their Parents: A Pilot Survey Study

This study highlighted the outcomes that matter to adolescents with chronic migraine and to their parents. The most important outcome measure was a decrease in frequency of severe headache days. The findings suggest that it is essential to consider outcomes beyond total number of headache days when managing patients with chronic headache disorders.

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### Randomized Phase 2 Study of ACE-083 in Patients With Charcot-Marie-Tooth Disease

The evaluation of ACE-083 in patients with Charcot-Marie-Tooth disease type 1 in this phase 2 study found that the injection was safe and well-tolerated at all dose levels. Despite providing greater increases in muscle volume and strength than placebo, ACE-083 was not associated with functional improvements after 6 months of treatment.

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*Continued*

## Risk of Dementia After Hospitalization Due to Traumatic Brain Injury: A Longitudinal Population-Based Study

In this study, major traumatic brain injury (TBI) was associated with an increased risk for incident dementia when adjusted for age and sex by Cox regression, with some attenuation after adjustment for confounders, especially alcohol use and physical inactivity. Minor TBI was not associated with risk of dementia.

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NB: “Bing-Neel Syndrome Mimicking Behavioral Variant Frontotemporal Dementia,” p. 980. To check out other NeuroImages, point your browser to [Neurology.org/N](https://www.neurology.org/N). At the end of the issue, check out the Resident & Fellow Section Child Neurology article discussing a case series of 3 children with very early narcolepsy type 1 who had psychiatric features and motor disturbances. This week also includes a Resident & Fellow Section Teaching Video NeuroImage titled “Oculogyric Crises in a 12-Year-Old Girl With Rapid-Onset Dystonia Parkinsonism.”

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## Spotlight on the June 7 Issue

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