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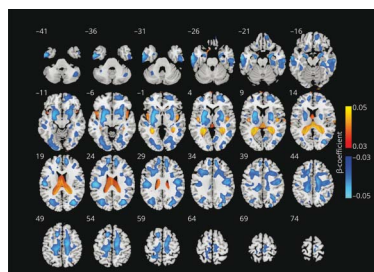


Notable in *Neurology* this week

This issue features an article that investigates the longitudinal effects of combination antiretroviral therapy on cognition and neuroimaging biomarkers in treatment-naïve people with HIV; another looks at the association of ultraprocessed food consumption with the risk of dementia. A Historical Neurology article examines views on the memory and treatment of cognitive impairment in 17th-century Spain through the work conducted by Juan Gutiérrez de Godoy.

Articles

Association of Structural Measurements of Brain Reserve With Motor Progression in Patients With Parkinson Disease



This study investigated the association between baseline structural measurements of brain reserve and clinical progression in Parkinson disease (PD). Patients with PD with greater brain reserve—or higher deformation-based morphometry values—had greater compensatory capacity, which was associated with slower rates of clinical progression. This is a step toward a neuroimaging biomarker that can quantitatively assess motor progression in PD.

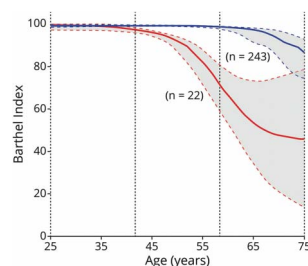
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Effectiveness of Antiseizure Medication Duotherapies in Patients With Glioma: A Multicenter Observational Cohort Study

Approximately 30% of patients with glioma need an add-on antiseizure medication (ASM) due to uncontrolled seizures on ASM monotherapy. This multicenter retrospective cohort study aimed to determine whether levetiracetam combined with valproic acid (LEV + VPA) is more effective than other duotherapy combinations, including either LEV or VPA, in patients with glioma. LEV + VPA was ultimately more effective than other ASM combinations.

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Trajectory Pattern of Cognitive Decline in Cerebral Autosomal Dominant Arteriopathy With Subcortical Infarcts and Leukoencephalopathy



This study analyzed the trajectory pattern of cognitive decline from ages 25 to 75 years in patients with cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy (CADASIL), the most frequent hereditary form of ischemic cerebral small vessel disease. Cognitive alterations developed throughout the progression of CADASIL and varied largely according to the stage of the disease.

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Continued

Inertial Gait Sensors to Measure Mobility and Functioning in Hereditary Spastic Paraplegia: A Cross-sectional Multicenter Clinical Study

This study assessed the potential of sensor-based gait assessments for patients with hereditary spastic paraplegia (HSP) in a clinical setting by correlating sensor-based gait parameters with HSP clinical scores. Mobile gait analysis provided cyclicity parameters that correlated with measures of disease severity, patient-reported outcomes, and gait impairment in HSP, building a basis for future applications in monitoring disease progression.

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NB: "Criteria for Defining Interictal Epileptiform Discharges in EEG," p. 430. To check out other Resident & Fellow Journal Club articles, point your browser to [Neurology.org/N](https://www.neurology.org/N) and click on the link to the Resident & Fellow Section. At the end of the issue, check out a Pearls & Oysters article discussing reversible postpartum pseudocoma state associated with magnesium therapy, and another on stereotactic EEG-proven insular epilepsy with nonlocalizing scalp EEG. This issue also includes a NeuroImage titled "Giant Tumefactive Perivascular Spaces in a Patient Presenting With a First Seizure."

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Spotlight on the September 6 Issue

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