

# In Focus Spotlight on the September 25 Issue



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

## [<sup>18</sup>F]FDG-PET is superior to [<sup>123</sup>l]IBZM-SPECT for the differential diagnosis of parkinsonism

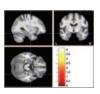
Ninety-five of 107 patients with clinically suspected atypical parkinsonian syndromes (APS) referred for imaging had [<sup>18</sup>F]FDG-PET scans analyzed by visual assessment. The diagnostic accuracy of [<sup>18</sup>F]FDG-PET for discriminating Lewy body diseases from APS was considerably higher than for [<sup>123</sup>I]IBZM-SPECT. [<sup>18</sup>F]FDG-PET reliably differentiates APS subgroups. See p. 1314; Editorial p. 1306

## Association of cognitive dysfunction with neurocirculatory abnormalities in early Parkinson disease

This report provides evidence that in untreated patients with recent onset of Parkinson disease, cognitive dysfunction, white matter hyperintensities on MRI, and neurocirculatory abnormalities (supine hypertension, orthostatic hypotension, absence of nocturnal "dipping") were interrelated. Efforts to minimize blood pressure fluctuations in Parkinson disease might help maintain cognitive function.

See p. 1323

### Glucose metabolism, gray matter structure, and memory decline in subjective memory impairment $\square$



[18F]fluoro-2-deoxyglucose PET and structural MRI were acquired in 31 patients with subjective memory impairment and 56 controls. Cognitive follow-up testing was performed (average follow-up time: 35 months). The cross-sectional difference in 2

independent neuroimaging modalities indicates early Alzheimer disease pathology in those with subjective memory impairment. See p. 1332

From editorialist David Knopman: "SMI [subjective memory impairment] should be taken seriously: no more patting patients on the head and sending them on their way."

See p. 1308

## Lack of replication of interaction between EBNA1 IgG and smoking in risk for multiple sclerosis

The authors used Swedish case-control material consisting of patients with newly diagnosed multiple sclerosis and matched controls. They did not observe any interaction on the multiplicative scale between EBNA1 IgG and any of the 3 risk factors, smoking, DRB1\*15, or absence of A\*02.

See p. 1363; Editorial p. 1310

#### Age at onset of epilepsy, pharmacoresistance, and cognitive outcomes: A prospective cohort study

One hundred ninety-eight children aged <8 years with newonset epilepsy were followed prospectively and reassessed with the Wechsler Intelligence Scale for Children 8-9 years later. Linear regression analyses with interactions between age at onset and pharmacoresistance were used to show that earlier onset of uncontrolled seizures conveyed cognitive vulnerability.

See p. 1384

#### Before the headache: Infant colic as an early life expression of migraine

This study analyzed 154 infant-mother pairs. Infants with a maternal history of migraine were 2.6 times more likely to have colic. When evaluating a child for episodic headaches, asking about colic in infancy may help identify children with migraine, which would allow these children to receive appropriate treatment more quickly.

See p. 1392

#### **VIEWS & REVIEWS**

## Vitamin D, cognition, and dementia: A systematic review and meta-analysis

This review summarized data from 37 studies showing that lower vitamin D levels were associated with lower cognitive scores and that lower levels occurred in patients with Alzheimer disease. Treatment studies are required to establish a cause-effect relationship.

See p. 1397

NB: "Resident & Fellow Right Brain: Not on my watch," see p. e104. To check out other Resident & Fellow submissions, point your browser to www.neurology.org and click on the link to the Resident & Fellow Section.

Podcasts can be accessed at www.neurology.org



#### Spotlight on the September 25 Issue

Robert A. Gross *Neurology* 2012;79;1305 DOI 10.1212/WNL.0b013e31826f3219

#### This information is current as of September 24, 2012

**Updated Information &** including high resolution figures, can be found at: **Services** http://n.neurology.org/content/79/13/1305.full

**Permissions & Licensing** Information about reproducing this article in parts (figures, tables) or in

its entirety can be found online at:

http://www.neurology.org/about/about\_the\_journal#permissions

**Reprints** Information about ordering reprints can be found online:

http://n.neurology.org/subscribers/advertise

Neurology @ is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright Copyright @ 2012 by AAN Enterprises, Inc.. All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

