### **Resident & Fellow Rounds**

November 2020 **NPub.org/rf** 

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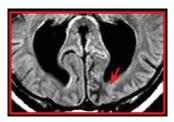
#### A summary of recently published articles in the Neurology® Resident & Fellow Section

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#### November 3, 2020, issue



This issue features 2 Clinical Reasoning cases: the first presents a man with recurrent aphasia, headaches, and confusion and highlights the importance of maintaining a broad differential that includes treatable infections particularly in patients on immunosuppression. The second discusses how to approach the treatment of acute myasthenic crisis in a patient with possible coronavirus disease 2019 (COVID-19). The Teaching NeuroImage depicts

nonketotic hyperglycemic hyperosmolar state, an important stroke mimic (see featured image). In a Teaching Video NeuroImage, a 3-month-old patient with epileptic spasms is diagnosed with Aicardi syndrome based on characteristic ophthalmologic findings including chorioretinal lacunae.

## Clinical Reasoning: A 73-year-old man with recurrent aphasia, headaches, and confusion

A 73-year-old man had recurrent aphasia, headaches, right-sided weakness, and confusion. The case emphasizes the importance of consideration and treatment of cryptococcal meningoencephalitis and fungal infection.

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## Clinical Reasoning: Therapeutic considerations in myasthenic crisis due to COVID-19 infection

A 45-year-old woman with acetylcholine receptor antibody–positive myasthenia gravis reported to the emergency department with respiratory symptoms similar to her father's. Managing critically ill patients during a pandemic requires considering how treatments may affect underlying neurologic conditions.

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## Teaching NeuroImages: Nonketotic hyperglycemic hyperosmolar state mimicking acute ischemic stroke

This case of a 55-year-old man highlights acute ischemic stroke mimic in nonketotic hyperglycemic hyperosmolar state.

Page e2600

## Teaching Video NeuroImages: Epileptic spasms and characteristic ophthalmologic findings: A diagnostic conundrum

This case of a 3-month-old girl with developmental delay and epileptic spasms showcases the usefulness of ophthalmologic assessment for children with epileptic spasms.

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#### November 10, 2020, issue

This issue's Clinical Reasoning case reviews the need for genetic workup in cases of familial cognitive and cerebellar dysfunction and expands our understanding of frontotemporal dementia. The Teaching NeuroImage showcases Fabry disease as an uncommon cause of carotid artery dissection. The Teaching Video NeuroImage reminds us of the significance of the Beevor sign in patients with facioscapulohumeral muscular dystrophy and presents a unique "inverted" form. The Training in Neurology article describes a novel open-access online teaching platform for delivering high-yield clinical education to neurology residents across the United States during the COVID-19 pandemic.

# Clinical Reasoning: A 72-year-old man with a progressive cognitive and cerebellar syndrome

A previously healthy man developed balance and behavioral issues and had been committed to a psychiatric unit for 2 years. Testing revealed several neurologic problems, particularly in executive function, behavior, and memory. The case examines behavior issues and cerebellar ataxia in behavioral-variant frontotemporal dementia. Page e2707

## Teaching NeuroImages: An uncommon cause of carotid artery dissection: Fabry disease

The case looks at Fabry disease in a 49-year-old man. Page e2711

#### Teaching Video NeuroImages: Inverted Beevor sign in facioscapulohumeral muscular dystrophy

Beevor sign features in this case of a 50-year-old man with facioscapulohumeral muscular dystrophy.

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# Training in Neurology: Rapid implementation of cross-institutional neurology resident education in the time of COVID-19

This Training in Neurology article looks at cross-institutional lecture series implementation in light of COVID-19. The pandemic has highlighted the need for such training, and further study and development of offerings is ongoing. Page 883

#### November 17, 2020, issue

This issue's Clinical Reasoning case presents a man with progressive weakness and eyelid droopiness and discusses how to approach the rare cases when ocular weakness can be seen in

myopathies. The Pearls & Oy-sters article reviews the approach to managing CSF leak and characterizes when to consider surgical repair in patients with low-pressure head-aches and characteristic imaging findings.

#### Clinical Reasoning: Bilateral ptosis, dysphagia, and progressive weakness in a patient of French-Canadian background

A 40-year-old man began experiencing progressive weakness in his early 30s. Oculopharyngeal muscular dystrophy, more common in people of French Canadian descent, is seen in this patient with *POLG* mutation.

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# Pearls & Oy-sters: Dural defect repair as treatment for refractory headache from cerebrospinal fluid leak

A 19-year-old woman with daily headaches and lower back pain presented to the headache clinic. CSF leak due to a traumatic fall from a horse was suspected. This case emphasizes the importance of looking into clinical–radiologic correlation in diagnosis.

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#### November 24, 2020, issue

This issue's Clinical Reasoning article presents a case of a patient with a rare Guillain-Barré syndrome variant that developed in the setting of COVID-19. In the Mystery Case article, you can reason your way through the case of a young woman with migraine, hearing loss, and blurred vision. Though the article presents a forme fruste or atypical variant with partial manifestations of the classic triad, the clues to diagnosis are present.

#### Clinical Reasoning: A case of COVID-19-associated pharyngeal-cervical-brachial variant of Guillain-Barré syndrome

In this case of a 49-year-old man diagnosed with COVID-19, upper limb weakness, reflex issues, and respiratory insufficiency suggested neuromuscular disorder. The case highlights the severity of Guillain-Barré syndrome associated with COVID-19 in a rare variant of the disorder.

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## Mystery Case: Migraine, hearing loss, and blurred vision in a young woman

A 39-year-old woman presented with progressive headaches and testing revealing mild cognitive impairment. The patient additionally experienced encephalopathy, hearing loss, and visual distortion. Radiologic testing may be useful with subtle symptoms suggesting Susac syndrome.

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Roy E. Strowd III and Whitley Aamodt *Neurology* 2020;95;976-977 DOI 10.1212/WNL.000000000011037

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