Hippocampal perfusion predicts impending neurodegeneration in REM sleep behavior disorder
Twenty patients with idiopathic REM sleep behavior disorder (IRBD) were scanned during wakefulness. $^{99m}$Tc-ethylene cysteinate dimer SPECT identified patients with IRBD at risk for conversion to other neurodegenerative disorders, such as Parkinson disease or dementia with Lewy bodies; disease progression was predicted by abnormal baseline hippocampal perfusion.
See p. 2302; Editorial, p. 2296

Lewy pathology is not the first sign of degeneration in vulnerable neurons in Parkinson disease
The authors examined the extent of nigral dysfunction and degeneration among 63 controls, incidental Lewy body disease, and Parkinson disease cases, based on tyrosine hydroxylase immunoreactivity and neuron densities. Targeting Lewy pathology may not be sufficient to prevent neurodegeneration in Parkinson disease.
See p. 2307

From editorialist Walter J. Schulz-Schaeffer: “The results...are yet another piece in the growing body of evidence pointing us toward the need to rethink our current concepts of neurodegeneration and disease progression.”
See p. 2298

Ataxin-1 and ataxin-2 intermediate-length PolyQ expansions in amyotrophic lateral sclerosis
The authors assessed the polyglutamine (PolyQ) lengths of ATXN-1 and ATXN-2 in 405 patients with sporadic amyotrophic lateral sclerosis, 13 patients with familial amyotrophic lateral sclerosis, and 296 controls without history of neurodegenerative disorders. Both ATXN-1 and ATXN-2 PolyQ intermediate expansions were independently associated with an increased risk of amyotrophic lateral sclerosis.
See p. 2315

Effects of early-life adversity on cognitive decline in older African Americans and whites
This study rated 6,100 older participants based on experiences with social disadvantage in childhood at baseline, and cognitive function tests were performed at 3-year intervals for up to 16 years. Adverse social experiences in early life may contribute to cognition in later life; both social experiences and effects on cognition varied by racial background.
See p. 2321

Structural brain alterations can be detected early in HIV infection
Brain volumetry results from the Chicago Early HIV Infection Study indicated gray matter alterations and ventricular expansion. The authors cited viral invasion and neuroinflammation as underlying these changes, concluding that the onset of neurologic injury was earlier than assumed, with implications for neuroprotective interventions in HIV infection.
See p. 2328

Lack of progressive arteriopathy and stroke recurrence among children with cryptogenic stroke
Sixty-three children with arterial ischemic stroke (AIS) were divided into two stroke categories: those with an established cause, considered as symptomatic, and those with AIS only associated with risk factors, considered as cryptogenic. Cryptogenic AIS during childhood had a favorable outcome with early and prolonged treatment with aspirin.
See p. 2342; Comment, p. 2346

MRI and EEG as long-term seizure outcome predictors in familial mesial temporal lobe epilepsy
The authors evaluated 103 individuals from 17 familial mesial temporal lobe epilepsy (FMTLE) families, dividing the participants into three subgroups: seizure-free, infrequent seizures, and frequent seizures. Most patients with FMTLE continued in the same clinical status. However, patients with frequent seizures had progression of hippocampal atrophy and none improved unless they underwent surgery.
See p. 2349

Efficacy and safety of ketamine in refractory status epilepticus in children
In this series with no concurrent control group, IV ketamine (KE) infusion at a median dose of 40 μg/kg/min was effective and safe in treating refractory status epilepticus in six children. In three patients not responding to KE, two were successfully treated by surgical removal of epileptogenic focal cortical dysplasia.
See p. 2355

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