Foreword

Martin Farlow

Martin Farlow is Professor of Neurology and Vice-Chairman of Research in the Department of Neurology at the Indiana University School of Medicine in Indianapolis. He is also Associate Co-Director of the Indiana Alzheimer's Disease Center in Indianapolis and leads a large Alzheimer and related dementias clinical trials site, having led and/or contributed to over 150 clinical trials over the last 25 years. Dr. Farlow is a member of many professional associations including the AAN, ANA and AGS. He is also a founding member in both the American Society of Experimental Neurotherapeutics and the International Society for CNS Clinical Trials and Methodology. Dr. Farlow has lectured on topics of aging, dementia, and Alzheimer's disease at more than 300 meetings, conferences, and hospitals/medical schools throughout the world. A prolific author, Dr. Farlow has presented more than 470 abstracts at professional meetings and has authored or co-authored more than 460 articles published in peer-reviewed journals. Dr. Farlow's research focuses on clinical trials of investigational drugs for the treatment of Alzheimer's disease and related dementias, being the lead investigator on major studies including tacrine, donepezil, rivastigmine, CAD106 and solanezumab. Dr. Farlow also has clinically characterized and helped determine genetic linkage for several familial dementias including the second mutation associated with autosomal dominantly inherited Alzheimer's disease, Gerstmann-Straussler-Scheinker disease, and multi-systems tauopathy with dementia.

Welcome to the fall edition of *US Neurology*. This issue features a number of topical articles that have been chosen for their evaluation of current practices and research that directly affect neurologists and other practitioners involved in the care of patients with neurological illness.

We begin with an editorial on the subject of Alzheimer's disease (AD), a condition that is becoming more common in our aging population. Drug candidates in AD have a high failure rate, and poor early detection methods make clinical trials difficult and expensive. Cummings et al. discuss the role of default mode network assessment using functional magnetic resonance imaging (MRI) in phase II clinical trials, a method that could provide more robust information to justify a phase III study.

Patients with multiple sclerosis (MS) face a number of challenges in terms of physiological, psychological, cognitive, social, and spiritual needs, and this is addressed by three articles. In an editorial, Zackowski discusses the need for an evidence-based exercise prescription for people living with MS. Gallagher and Bethoux review the benefits of the therapeutic arts including art therapy, dance and movement therapy, and music therapy, in promoting self-efficacy, emotional well-being, and motor control in people with MS. In addition, Kannan and Yadav describe the role of vascular disease risk factors such as obesity, smoking, hyperlipidemia, hypertension, type 2 diabetes and metabolic syndrome, on outcomes in people with MS.

This issue contains two articles on epilepsy. The first, an editorial by Fisher, presents the important changes in the International League Against Epilepsy revised operational classification of seizure types. In the second, an expert interview, Harden discusses the challenges of sudden unexpected death in epilepsy, why new guidelines were needed from the American Academy of Neurology and the American Epilepsy Society, and the key recommendations of these new guidelines.

Movement disorders remain an important focus of the neurology world. Talman and Shah review the latest data on the emerging surgical technique of MRI-guided focused ultrasound, which has demonstrated efficacy and safety in patients with essential tremor and is now under clinical investigation for the treatment of Parkinson's disease (PD). Also on the subject of PD, Barrett discusses risk factors for psychosis in patients with PD, a characteristic symptom that is associated with a more severe disease burden.

In another review, Kahkeshani and Sheikh discuss the significance of headache in the emergency room and the need to rule out dangerous causes of this common clinical presentation. Finally, Darki and Beydoun present an interesting case of delayed appearance of conductance block in multifocal neuropathy (MMN). MMN is a rare but treatable condition that is frequently misdiagnosed, and this case emphasizes the importance of its early recognition.

US Neurology would like to thank all expert authors who contributed towards this edition. Special thanks to our Editorial Board for their continuing support and guidance. We are also grateful to all organisations and media partners for their ongoing support. We trust that you will find this edition of *US Neurology* useful and insightful. ❑