

Highlights from this issue

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When faced with a difficult problem what do you do: you have looked at the evidence and still you are unsure? Do you perhaps wonder what Dr So-and-so or Professor Whatsit would do? One of the privileges of editing *Practical Neurology* is that we can ask So-and-so and Whatsit to tell us just what they would do and why. In this edition, we have indulged ourselves richly.

Chris Allen lets us listen in on his teaching *on page 97*. We anticipate that most readers will find his teaching tips interesting and useful. We asked Simon Kerrigan and Robin Grant to explore the difficult dilemmas and decisions involved in managing patients presenting with low-grade gliomas *on page 72*. John Paul Leach tells us *on page 103* how he tackles the important issue of discussing sudden unexpected death in epilepsy (SUDEP), in the context of an evolving legal guidance in Scotland. Jane Hanna, Epilepsy Bereaved's director, provides this influential charity's perspective to John Paul's approach to SUDEP *on page 107*.

It can be a challenge to distinguish Parkinson's disease from the various Parkinsonian syndromes. Marjolein Aerts and colleagues have come up with a

novel three-pronged approach to help with this often difficult differential *on page 77*. Diagnostic criteria and disease classifications can seem very dry and theoretical, but they form the basis of much clinical research making it important to have a good understanding of them. New criteria for the diagnosis of Alzheimer's disease and related disorders have been introduced, and these are reviewed for us by Andrew Budson and Paul Solomon *on page 88*.

We often hesitate to include case reports describing rare or unusual diseases in *Practical Neurology*, because they are, well, rare. On the other hand, for patients with these diseases, they have a prevalence of 100%.... We have a rare but treatable cause for our 'difficult case' from Adam Abbs and a discussion of another treatable rarity – Neuro-Sweet's disease – from Gemma Maxwell and colleagues *on page 126*. Attentive and regular readers of *Practical Neurology* should do well in this issue's Test Yourself *on page 135*, from Zuzana Dean and colleagues.

In the UK, neurologists do not undertake neurophysiology, even though it is a central

part their work in other countries. To address this, Roger Whittaker provides an introduction to neurophysiology for our trainees (*on page 108*). The clinicopathological conference is always an excellent way to understand the way to think about clinical problems. We have a report (*on page 116*) from the Edinburgh advanced neurology course where Chris Allen (featuring again) tackles a difficult case.

The events in North Africa through 2011 were dramatic, and nowhere more so than that in Libya. Hani Ben Amer provides a neurological perspective in his letter from Libya *on page 133*, emphasising the rarity there, not of disease, but of neurologists and neurological services.

We sometimes use words to mean more than one thing, and drift between one meaning and another without thinking. Francesco Brigo muses on the way we use the term 'generalised' in describing EEGs and to classify seizures and epilepsies and how this can be potentially misleading *on page 139*. Finally, Prahlad and Nitin Sethi remind us of the need to keep our eyes open to broader differential diagnoses *on page 102*.