

Still, do no harm

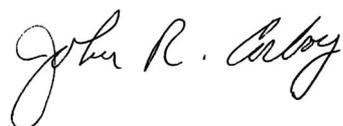
A commentary published a decade and a half ago in *BMJ* expounded on “Why the Hippocratic ideals are dead.”¹ This issue of *Neurology® Clinical Practice (NCP)* both underscores challenges to these ancient Hippocratic tenets and pays homage to their enduring influence in the context of modern medicine.

Two articles and accompanying editorials reflect esteem for teachers and consideration for colleagues. Tanner et al. (p. 474) suggest that incorporating students into clinic may both enhance student learning and improve preceptor productivity. An accompanying editorial by Wijeratne et al. (p. 458) expands on the future role of incorporating students to reduce physician burnout and mitigate shortages of neurologists. A commentary by Melissa Armstrong (p. 512) and an accompanying editorial by Satya-Murti and Weathers (p. 462) discuss email strategies to target stress and increase productivity in clinical practice.

“First, do no harm” is still a noble goal, complicated by the risk/benefit ratio inherent in modern technology. Dhawan et al. (p. 464) discuss the role of the King-Devick test to identify real-time concussion and asymptomatic concussion in youth athletes. Patterson et al. (p. 499) provide updated recommendations for detection and diagnosis of Niemann-Pick disease type C.

Restriction to field of expertise is a difficult charge in neurology, where substantial overlap makes diagnostics and therapeutics challenging. Bock et al. (p. 488) discuss cognitive-behavioral changes in patients with amyotrophic lateral sclerosis. Opasker et al. (p. 531) report cerebral venous thrombosis as a rare complication in transgender patients on cross-sex hormone therapy.

We welcome your feedback on this issue and invite suggestions for improving *NCP*.



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REFERENCE

1. Loeffler I. Why the Hippocratic ideals are dead. *BMJ* 2002;324:1463.



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