John R. Corboy, MD, FAAN, Editor, *Neurology® Clinical Practice*

Issue highlights

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Fleisher et al. (p. 277) conducted a pilot study on disease severity and quality of life (QoL) in homebound individuals with advanced Parkinson disease. The authors report high retention and satisfaction with quarterly interdisciplinary home visits and stabilization of QoL in an often-overlooked population. Hewitt et al. (p. 324) evaluated a single case series of 5 patients with medication-refractory orthostatic tremor who were treated with bilateral VIM thalamic deep brain stimulation. Patients experienced a modest increase of up to several minutes in standing time, which translated to meaningful improvement in standing activities of daily living.

To better understand the clinical utility of levels of serum antiepileptic drugs, Al-Roubaie et al. (p. 344) completed a systematic review of evidence supporting therapeutic drug monitoring (TDM) for antiepileptic drugs. Their analysis shows that TDM of at least some antiepileptic drugs can likely enhance the care of patients with epilepsy.

Besser and Galvin (p. 298) assessed the burden patients and caregivers face to obtain a frontotemporal degeneration (FTD) diagnosis. A survey of 698 caregivers of patients with FTD was analyzed, showing diagnostic delays, with almost half of the surveyed patients reporting that they were not diagnosed until more than 1 year after they reported showing initial symptoms.

The study by Fantaneanu et al. (p. 356) highlights the sustainability needs and financial barriers faced by epilepsy transfer and transition clinics. In an accompanying editorial, Hauser et al. (p. 274) identified a lack of support for redirecting staff duties as well as lack of funding as contributing factors to the failed attempt of Fantaneanu et al. to set up an epilepsy transfer clinic. Hauser et al. described their experience of following and developing a systematic handoff from pediatric to adult care for patients with epilepsy and pointed this as a potential method of reducing trauma related to transfer.

Additional articles in this issue focus on diagnostic challenges. Li et al. (p. 307) designed an educational curriculum for residents to learn ultrasound guidance for lumbar punctures. Martinez et al. (p. 340) described the diagnostic challenges related to low-flow spinal arteriovenous fistulas and the importance of performing a complete spinal angiogram when investigating vascular myelopathy regardless of location or severity.

We welcome your feedback on this issue and invite suggestions for making *Neurology® Clinical Practice* a valuable resource for you and your colleagues.

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