Modifiable risk factors and multidisciplinary approaches

It is increasingly evident that brain disease cannot be diagnosed, treated, and—perhaps most importantly—*prevented* without consideration of a person's overall health. In this issue of *Neurology® Clinical Practice*, Filley (p. 193) and Breitner and Galasko in an accompanying editorial (p. 190) discuss Alzheimer disease in the context of modifiable risk factors, a view with “important implications for medical care and health policy.” The article by Wright and Flores (p. 201) on vascular contributions to cognitive impairment adds further nuance to this discussion. Rumbaugh and Tyor (p. 224) outline recent advances HIV-associated neurocognitive disorders, another important cause of cognitive disability.

In our Statistics in Clinical Practice section, Wang and Cutter (p. 253) tackle the thorny topic of how to ascertain whether one medication or procedure is better than, equivalent to, or inferior to, an alternative choice. Lonnquist et al. (p. 241) discuss the ethics and logistics of providing neurologic care in criminal systems and state mental hospitals. An accompanying editorial by Satya-Murti and Lockhart (p. 188) elaborates on navigation through these unique practice settings. Liberman et al. (p. 247) describe a potential unintended consequence of rapid thrombolysis—increased administration of IV tissue plasminogen activator to “stroke mimics,” nonvascular conditions that simulate stroke.

We hope you enjoy and learn from these stimulating articles as much as we have. American Academy of Neurology members enjoy Full Access to every issue on the iPad®. If you are not yet a member, download the app and GET THE LATEST ISSUE FREE! (Go to <http://bit.ly/NCPapp> for details.)

A handwritten signature in black ink that reads "John R. Corboy". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

John R. Corboy, MD, FAAN

Neurology® Clinical Practice

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