Minding the gaps in evidence, professionalism, and patient care

Neurologists are faced routinely with making decisions regarding clinical and practice challenges where gaps exist. In this issue of Neurology® Clinical Practice (NCP), we examine ways to moderate barriers that prevent optimal patient care, from improving communication between patients and their providers—and among providers—to exploring diagnostic and therapeutic strategies in the absence of compelling evidence.

Insight can be gained from listening to patients themselves. Two articles and an accompanying editorial by Schneider and Galifianakis (p. 203) discuss innovations in caring for patients with Parkinson disease. Boersma et al. (p. 209) reveal patients’ perspectives on palliative care needs and Wilkinson et al. (p. 241) report a randomized, controlled trial on patient satisfaction with telemedicine.

Likewise, it is illuminating to hear from neurologists regarding strategies to improve professionalism and ensure quality care. Strowd et al. (p. 230) conducted a cross-sectional assessment of generational differences in perceptions of professionalism. Morgenlander et al. (p. 277) discuss the challenges and benefits of developing a 1-year neurology residency program for advanced practice providers to help mitigate the current shortage of neurologists.

In our Practice Current series, Luca Bartolini (p. 271) examines existing evidence and various approaches to the question “What is your diagnostic evaluation of cryptogenic stroke?” In one of 2 articles on the American Academy of Neurology’s recently published guideline on botulinum neurotoxin (BoNT), Govindarajan et al. (p. 281) discuss payment policy perspectives. Richard Barbano (p. 206) discusses remaining questions regarding the interchangeability of different preparations of BoNT for particular indications.

As valued readers, we invite your feedback and suggestions to help us fill in the gaps at NCP.

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