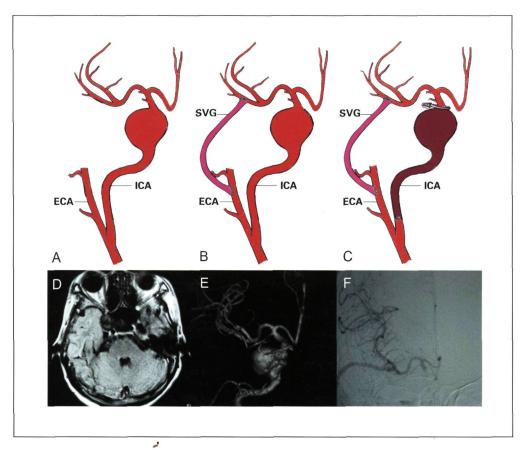


Canadian Journal of Neurological Sciences

Volume 38 Number 5 September 2011



Revascularization for Complex Cerebral Aneurysms - Pages 712-718

Bai-Nan Xu, Zheng-Hui Sun, Chen Wu, Jin-Li Jiang, Ding-Biao Zhou, Xin-Guang Yu, Garnette R. Sutherland, Bao-Min Li

Figure: Patient 1. Illustration of a large intracavernous aneurysm. A, B, C: Schematic illustration of the procedure. D: Preoperative MRI showing a right intracavernous ICA aneurysm. E: Preoperative 3D digital subtraction angiography showing an intracavernous aneurysm. F: Postoperative digital subtraction angiography showing a patent bypass vessel and no aneurysm.

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46th Annual Congress

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Canadian Journal of Neurological Sciences

Volume 38 / Number 5 / September 2011

EDITORIALS

667 Safety, Not Only Efficacy Still to be Proven for Controversial New MS Treatment

Marcelo Kremenchutzky

669 Treating Intellectual Disability; Look for Creatine Peaks in the Brain

Asuri N. Prasad

671 Helping the FTD Patient-Caregiver Dyad Gabriel C. Léger, Fadi Massoud

REVIEW ARTICLES

673 Delirium: A Review

Teneille Emma Gofton

681 Consciousness and Cell Memory: A Dynamic Epigenetic Interrelationship

Arthur J. Hudson

689 Rabies in the Critical Care Unit: Diagnostic and Therapeutic Approaches

Alan C. Jackson

HISTORICAL REVIEW

696 Neuroscience in Nazi Europe Part I: Eugenics, Human Experimentation, and Mass Murder

Lawrence A. Zeidman

ORIGINAL ARTICLES

704 Causes for Treatment Delays in Dystonia and Hemifacial Spasm: A Canadian Survey

Mandar Jog, Sylvain Chouinard, Doug Hobson, David Grimes, Robert Chen, Meetu Bhogal, Susan Simonyi

712 Revascularization for Complex Cerebral Aneurysms

Bai-Nan Xu, Zheng-Hui Sun, Chen Wu, Jin-Li Jiang, Ding-Biao Zhou, Xin-Guang Yu, Garnette R. Sutherland, Bao-Min Li

719 Prevalence of Childhood Epilepsy in Canada

A.N. Prasad, X. Sang, B.A. Corbett, J.G. Burneo

723 Depiction of Seizure First Aid Management in Medical Television Dramas

Andrew D. Moeller, Jeremy J. Moeller, Susan R. Rahey, R. Mark Sadler

728 Impact of the Cognitive Status on the Memory Complaints in MS Patients

M. Demers, I. Rouleau, P. Scherzer, J. Ouellet, C. Jobin, P. Duquette

734 Cyst Formation Following Radiosurgery for AVMs: Report of 3 Cases

Q. Al Hinai, D. Tampieri, L. Souhami, A. Sadikot, D. Sinclair, R. Leblanc

741 Complications in MS Patients after CCSVI Procedures Abroad (Calgary, AB)

Jodie M. Burton, Katayoun Alikhani, Mayank Goyal, Fiona Costello, Chris White, David Patry, Robert Bell, Michael D. Hill

747 Founder Mutation for α-sarcoglycan-LGMD2D in a Magdalen Islands Acadian Cluster

M. Tétreault, M. Srour, J. Allyson, I. Thiffault, L. Loisel, Y. Robitaille, J.P. Bouchard, B. Brais

753 An International Needs Assessment of Caregivers for Frontotemporal Dementia

Tiffany W. Chow, Fabricio J. Pio, Kenneth Rockwood

NEUROIMAGING HIGHLIGHTS

758 Widespread Symmetrical Subcortical Band Heterotopia Jason G. Emsley, Susan R. Rahey, R. Mark Sadler, Matthias H. Schmidt

760 Persistant Anterior Falcine Sinus: Demonstration by CT Angiography

Charles C. Matouk, Daniel M. Mandell, Timo Krings, Robert A. Willinsky, Karel G. terBrugge

BRIEF COMMUNICATIONS

762 Missing Huntington's Disease for Tardive Dyskinesia: A Preventable Error

Hrishikesh Kumar, Mandar Jog



Canadian Journal of Neurological Sciences

Number 5

							1			

Volume 38

765 Creatine Deficiency Syndromes: Diagnostic Pearls and Pitfalls

Claire Hinnell, Michael Samuel, Fadi Alkufri, Keyoumars Ashkan, Yusof Rahman, Charles Turner, R. Neil Dalton, Lina Nashef

768 OFF-Rebound Dyskinesia in Subthalamic Nucleus Stimulation in Parkinson Disease

Jee-Young Lee, Han-Joon Kim, Ji Young Yun, Sun Ha Paek, Beom S. Jeon

772 Glucocerebrosidase Mutations in a French-Canadian Parkinson's Disease Cohort

Anne Noreau, Jean-Baptiste Rivière, Sabrina Diab, Patrick A. Dion, Michel Panisset, Valérie Soland, Nicolas Jodoin, Mélanie Langlois, Sylvain Chouinard, Nicolas Dupré, Guy A. Rouleau

774 Multiple Brain Cysts: An Unusual Form of Demyelinating Disease

Mario Habek, Ivan Adamec, Kamelija Žarković, David Ozretić, Vesna V. Brinar

COMMENTARY

777 New Anticoagulants for Atrial Fibrillation: The Beginning of A New Era in Stroke Prevention

David J. Gladstone, Karen M. Earl, Tammy J. Bungard, Jafna L. Cox, Alan Bell, Paul Dorian, Naeem Dean, Thao Huynh, Anil Chopra, John Eikelboom, Ashfaq Shuaib

783 Health Research Funding in Crisis

Michael O. Poulter, G. Bryan Young

LETTERS TO THE EDITOR

785 To the Editor - More Than 'Answers We Can Use', We Need to Ask the Right Questions

Re: Pelz D. CURES and the dilemma of unruptured intracranial aneurysms. Can J Neuro Sci. 2011 Mar;38(2):191-2.

Tim. E. Darsaut, Jean Raymond, J. Max Findlay

785 To the Editor - Unruptured Intracranial Aneurysms: Some Questions Answered, Many Questions Remain

Re: Pelz D. CURES and the dilemma of unruptured intracranial aneurysms. Can J Neuro Sci. 2011 Mar;38(2):191-2.

Robert D. Brown, James Torner

787 To the Editor - Ethanol Abuse After a Right Temporal Lobe Resection for Intractable Epilepsy

Farzad Moien-Afshari, José F. Téllez-Zenteno

788 To the Editor - A Case of Bilateral Homonymous Hemianopsia with Macular Sparing

Anne-Marie Dufresne, Martin Savard

September 2011

790 To the Editor - Paraneoplastic Encephalomyelitis, Stiff Person Syndrome and Breast Carcinoma

Julie Lemieux, Louise Provencher, Denis Brunet, Jean-Charles Hogue

792 To the Editor - A Case of Phenytoin-Induced Encephalopathy in a Mathematician with Stage IV NSCLC

Carmela Pepe, Caroline Marchionni

794 To the Editor - Spinal Cord Injury after Prolonged Neck Flexion, is it an Underestimated Risk?

Hussein Alahmadi, Gelareh Zadeh

796 To the Editor - Isolated Unilateral Hypoglossal Nerve Palsy Daniel Mendelsohn, Faizal Haji, Wai P. Ng

797 To the Editor - Melanoma-Associated Retinopathy Report of a Case and Review

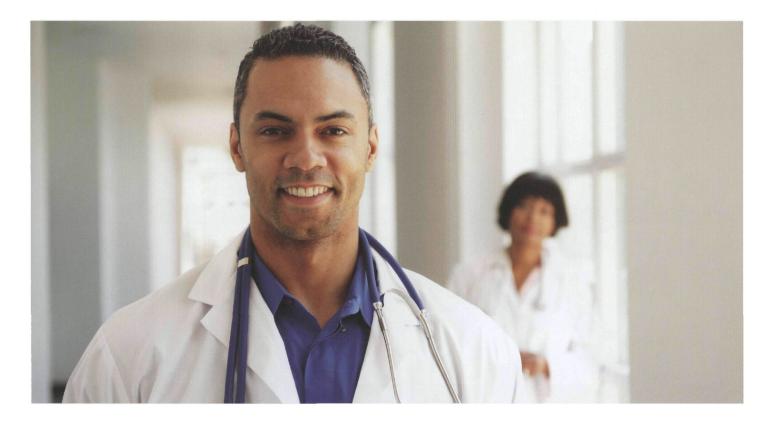
H. Bahig, F. Wein, R.F. Del Maestro

799 Books Received/Books Reviewed

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A-9	Congress Thank You
A-11/12	Information for Authors
A-12	Advertisers Index
A-23	CNS Liftime Achievement Award -
	Dr. Henry J.M. Barnett
A-23	Erratum
	ARAC - The Montreal Jewish General Hospital Alzheimer Risk Assessment Clinic
	Can J Neurol Sci. 2011 Jul;38(4):600-11.
A-26/27	Classified Ads
A-28	Board of Directors/Committee Chairs

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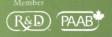


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in the chronic low back pain clinical trials had a clinical diagnosis of CLBP with pain at least 6 months and no signs of radiculopathy or spinal stenosis.1

· ymbalta[®] (duloxetine hydrochloride) is indicated e management of chronic low back pain (CLBP).¹

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Cymbalta® is contraindicated in patients with any liver disease resulting in hepatic impairment.1

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1. Cymbalta® Product Monograph. Eli Lilly Canada Inc., April 8, 2011.



prescribing summary of pages A-15 to A-18



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We look forward to seeing you at our 2012 Congress in Ottawa, Ontario!

















FACED WITH PAIN

IN HER STRUGGLE WITH FIBROMYALGIA

fibromyalgia¹

Pregabalin: first-line treatment for chronic

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AND PAIN-RELATED SLEEP DIFFICULTIES IN FIBROMYALGIA¹

Demonstrated powerful, rapid and sustained pain relief^{1,3-5}

In fibromyalgia:

- In a 14 week study, LYRICA demonstrated significant pain reduction as early as week 1 (p<0.05 for all doses). Mean changes in pain scores at the end of the study for LYRICA-treated patients were significantly greater versus placebo (300 mg/day, n=183: -1.75, p=0.0009; 450 mg/day, n=190: -2.03, p<0.0001; 600 mg/day, n=188: -2.05, p<0.0001; placebo, n=184: -1.04)*
- In another study of 26 weeks' duration of patients who initially responded to LYRICA during a 6-week, open-label phase, 68% of those who continued on their optimized dose (n=279) maintained a treatment response versus 39% of those on placebo (n=287). The time to loss of therapeutic response was longer in the LYRICA group (p < 0.0001)⁴

Also in neuropathic pain (NeP):

Sustained pain relief (starting at week 2 for LYRICA 150-600 mg/day, n=141; p<0.05 vs placebo, n=65) was demonstrated throughout a 12 week study in patients with DPN or PHN⁵

Demonstrated effective in relieving pain-related sleep difficulties^{1,6}

In fibromyalgia:

 In a 13 week study, LYRICA reduced overall MOS-Sleep Scale scores significantly more at the end of the study vs. placebo (300 mg/day) -19.1, p=0.0174; 450 mg/day: -20.41, p=0.0026; 600 mg/day: -19.49, p=0.0101; placebo: -14.29)

Also in NeP:

LYRICA reduced sleep disturbances across several studies in DPN and PHN, of 8-12 weeks duration

Flexible dosing across all indications^{1†}

LYRICA (pregabalin) is indicated for the management of neuropathic pain associated with diabetic peripheral neuropathy (DPN), postherpetic neuralgia (PHN) and spinal cord injury in adults. LYRICA may be useful in the management of central neuropathic pain in adults. LYRICA is indicated for the management of pain associated with fibromyalgia in adults. The efficacy of LYRICA in the management of pain associated with fibromyalgia for up to 6 months was demonstrated in a placebo-controlled trial in patients who had initially responded to LYRICA during a 6-week open-label phase.

LYRICA is contraindicated in patients who are hypersensitive to pregabalin or to any ingredient in the formulation or component of the container.

The most commonly observed adverse events (≥5% and twice the rate as that seen with placebo) in the recommended dose range of 150 mg/day to 600 mg/day in PHN and DPN patients were: dizziness (9.0-37.0%), somnolence (6.1-24.7%), peripheral edema (6.1-16.2%), and dry mouth (1.9-14.9%) and were dose related; in spinal cord injury patients: somnolence (41.4%), dizziness (24.3%), asthenia (15.7%), dry mouth (15.7%), edema (12.9%), constipation (12.9%), amnesia (10.0%), myasthenia (8.6%), amblyopia (8.6%), and thinking abnormal (8.6%); in fibromyalgia patients: dizziness (37.5%), somnolence (18.6%), weight gain (10.6%), dry mouth (7.9%), blurred vision (6.7%), and peripheral edema (6.1%). In LYRICA-treated fibromyalgia patients, the most commonly observed dose-related adverse events were: dizziness (22.7-46.5%), somnolence (12.9-20.7%), weight gain (7.6-13.7%), peripheral edema (5.3-10.8%). The most commonly observed adverse events in the PHN, DPN, spinal cord injury and fibromyalgia patients were usually mild to moderate in intensity. Discontinuation rates due to adverse events for LYRICA and placebo, respectively, were 9% and 4% in DPN, 14% and 7% in PHN, 21% and 13% in spinal cord injury, and 20% and 11% in fibromyalgia. There was a dose-dependent increase in rate of discontinuation due to adverse events in fibromyalgia.

There have been post-marketing reports of angioedema in patients, some without reported previous history/episodes, including life-threatening angioedema with respiratory compromise. Caution should be exercised in patients with previous history/episodes of angioedema and in patients who are taking other drugs associated with angioedema.

In clinical trials and in post-marketing experience, there have been reports of patients, with or without previous history, experiencing renal failure alone or in combination with other medications. Caution is advised when prescribing to the elderly or those with any degree of renal impairment.

There have been post-marketing reports of events related to reduced lower gastrointestinal tract function (e.g., intestinal obstruction, paralytic ileus, and constipation) in patients. some without reported previous history/episode(s), during initial/acute and chronic treatment with LYRICA, primarily in combination with other medications that have the potential to produce constipation. Some of these events were considered serious and required hospitalization. In a number of instances, patients were taking opioid analgesics including tramadol. Caution should be exercised when LYRICA and opioid analgesics are used in combination, and measures to prevent constipation may be considered, especially in female patients and elderly as they may be at increased risk of experiencing lower gastrointestinal-related events.

Dosage reduction is required in patients with renal impairment (creatinine clearance <60 mL/min) and in some elderly patients as LYRICA is primarily eliminated by renal excretion.

Please see Prescribing Information for complete Warnings and Precautions, Adverse Reactions, Dosage and Administration and patient selection criteria.

† Please consult Prescribing Information for complete Dosage and Administration instructions.



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Effective Tax Planning

Creating financial plans to help you achieve optimal business results is a task that may not be at the top of your daily to-do list, but having a plan can make a significant impact on reaching your personal long-term goals. Tax planning is a key consideration for any business owner, and certainly for Neurologists.

Effective tax planning must factor in both business and personal aspects of your situation. We've highlighted some occasionally overlooked tax-effective methods for building your personal wealth using the proceeds of your ongoing business activities. Done effectively, you'll enhance your company's cash flow and leave yourself with significantly enhanced retirement savings. Here are some ideas to discuss with your financial advisor.

Think of the Dividends

Rather than just a salary, consider receiving a portion of your pay in dividends. This allows for greater freedom in determining the income split between you and your spouse. It also saves on CPP premiums, a valuable benefit, since as an entrepreneur you have to pay both the employer's and the employee's share of contributions. Dividends also offer more flexibility in terms of when to receive payments.

Qualify for the Low Small Business Tax Rate

In most provinces, small businesses with an annual pre-tax income of \$500,000 or less pay a significantly lower rate of tax than regular corporations. (In some provinces, the lower tax rate only applies if pre-tax income is \$400,000 of less.) Time your deductible expenses, investments, and draw the appropriate type and level of income, in order to keep your operation's annual taxable income below the ceiling.

Consider a Higher Salary or Income Splitting

You may regularly only pay yourself what you need for living expenses in order to minimize personal taxes. However, paying yourself a larger salary can actually have two valuable benefits:

- More RRSP Room: The higher your salary, the more you can contribute to a Registered Retirement Savings Plan. Currently, the salary required to contribute the maximum amount of \$22,450 to ones RRSP is roughly \$122,000.
- Lower Business Taxes: Boosting your salary can help reduce your corporate income below the \$500,000 small business threshold, meaning you'll enjoy a substantially lower corporate tax rate. Be mindful to take into consideration, the personal tax payable as a result. It is highly advised that you consult with a qualified accountant to help navigate through your own unique circumstances.

Revisit Your Corporate Structure

As your business prospers, reorganizing can often reap immediate and in some cases, significant tax savings and help you save more for your retirement. This may involve setting up both another operating company as well as adding a holding company to invest the businesses retained profits. A family trust is also often used for creditor protection of assets and gives you the added benefit of splitting income amongst family members, and is also an excellent planning tool used on the future sale of shares of the company, as it offers the possibility of creating separate capital gains exemptions for the beneficiaries of the trust.

Use a Tax-Free Savings Account

From a personal tax perspective, If you have money left over after maximizing your RRSP contributions, consider opening or depositing money into a Tax-Free Savings Account. You can contribute up to maximum of \$5,000 a year into a TFSA. (Take note however, unlike an RRSP, your contributions aren't tax-deductible).

The advantage is that there is no tax on profits you earn inside this account, regardless of whether it's in the form of interest, dividends, or capital gains. And there is no tax due on funds withdrawn from a TFSA, including both your original contributions as well as gains earned inside the plan.

Used alone or in combination, these strategies will help you reduce taxes while investing for the future. Speak to a Scotiabank advisor about optimizing your results with effective tax planning.

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