NORLD NEUROLO GY

THE OFFICIAL NEWSLETTER OF THE WORLD FEDERATION OF NEUROLOGY

World Brain Day Celebration in India

BY CHANDRASHEKHAR MESHRAM, GAGANDEEP SINGH, AND SANJEEV THOMAS

ike every year, World Brain Day was celebrated with great enthusiasm
July 22 in different cities in India, under the aegis of the Indian Academy of Neurology. This year's theme "Clean Air for Brain Health" has more relevance for developing countries.

Nagpur

Dr. Chandrashekhar Meshram organized the meeting of neurologists, neurosurgeons, psychiatrists, and other social groups to plan the World Brain Day Celebration. The press announcement was released on July 21. The public education program on air pollution and brain health was arranged in an auditorium the same day.

The program was inaugurated by renowned actor and psychiatrist Dr. Mohan Agashe. Mr. Chandrakant Channe, noted artist and president of Basoli group of children, was the guest of honor.



Inauguration of World Brain Day. From left to right, Chandrakant Channe, Chandrashekhar Meshram, and Mohan Agashe.

Nandatai Jichkar, mayor of Nagpur, also attended the event. Dr. Meshram delivered a talk on air pollution and the brain and highlighted the importance of World Brain Day and public education

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Sept. 17-20, Rome, Italy

Report on the 68th Session of the WHO Regional Committee for Europe

BY WOLFGANG GRISOLD

he World Federation of Neurology (WFN) is a global non-state actor, and has the possibility to participate in the regional WHO meetings. As with last year in Budapest, the WFN was represented this year by Wolfgang Grisold in Rome.

The meeting took place in the governmental sector of Rome (Auditorium della Tecnica, Viale Umberto Tupini 65) and was opened by high ranking Italian politicians, including the prime minister and the health minister. The WHO was represented by Tedros Adhanom Ghebreyesus,

director general, and Zsuzsanna Jakab, WHO regional director for Europe.

The WFN was able to make a statement, this time on stroke. This statement can be found on the WHO website and was jointly made with the World Stroke Organization (WSO), the European Stroke Organization (ESO), and the European Academy of Neurology (EAN).

An oral statement was also delivered by Francesca Pezzella, a representative from the ESO. It states the importance of stroke, as endorsed by four large specialist societies. This statement may WELCOME TO
THE 68th SESSION OF THE
WHO REGIONAL COMMITTEE FOR EUROPE

AOBPO ПОЖАЛОВАТЬ
НА 68th CECCИЮ
EBPOПЕЙСКОГО РЕГИОНАЛЬНОГО
КОМИТЕТА ВОЗ

Opening ceremony: choir sings Italian music, ending with Verdi's Nabucco.

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PRESIDENT'S COLUMN

World Congress of Neurology Through the Years

he World Congress of Neurology (WCN) is the jewel in the calendar of the World Federation of Neurology (WFN). A just completed site visit to Rome and the final site visit for Dubai scheduled for December prompted the topic for this issue of the President's



column. Until the 2011 Congress held in Marrakesh, Morocco, World Congresses had been held every four years. From 2011, the WFN recognized that with the increasing number of high

quality neurology meetings the WCN was at risk of being made relatively invisible. The 2011 WCN was a test of a biennial Congress and one which proved most successful.

Importance

To the WFN, the WCN is of paramount importance for a number of reasons. First, it is the major educational effort of the WFN. All other educational activities



Kyoto, Japan, the site of the XXIII world congress.

undertaken by the WFN, including regional training centers, regional teaching courses, department visits, junior traveling fellowships and research grants may be of importance but they can never exceed that of the WCN. It comprises the end result of two years of intensive planning and the contribution of the world's best experts for the topics selected for each WCN.

Not only is it the flagship educational vehicle of the WFN, it also provides the major contribution to the lifeblood of the WFN. Without the income that the WCN generates, the WFN activities would be severely curtailed in what it could achieve each and every year. By being such a visible and important meeting, it highlights the emphasis with which the WFN promotes education in neurology.

It is fair to say that the WCN sets a high standard for a broad range of attendees through the structure and the content of its scientific and educational course programs. I will say more on this below.

History of the Early World Congresses of Neurology

The WFN WCNs grew out of the same desire of neuroscientists and neurolo-

gists to form an international organization and hold a regular internationally recognized meeting. Understandably, these meetings underwent some early evolution in format, structural organization and title before being recognized as the WFN's WCN, which is evident below.

The First International Neurological Congress,



Marrakesh, Morrocco, the site of the 2011 WCN.

known as the Sixth International Congress of Neurological Sciences, was held in Brussels in 1957, during which the WFN was founded. As former WFN President Johann Aarli, states in his book, "The History of the World Federation of Neurology"1, the Sixth International Congress was more comprehensive in the neurosciences and effectively became the first International Neurological Congress. It was not until the following International Neurological Congress, the seventh, held in Rome in 1961, that the active participation of the WFN as an independent organization occurred. Nevertheless, as is shown below, the Brussels International Congress of Neurological Sciences became the Sixth World Congress of Neurology and the Rome International Neurological Congress became the Seventh World Congress of Neurology for ease of numerical sequencing. The 25th World Congress of Neurology, to be held in

2021, will be in Rome and will therefore be a special celebration for 60 years of World Congresses of Neurology. Indeed, only two other venues have held a WCN twice: Vienna in 1965 and Kyoto in 1981 which had the honor again in 2013 and 2017, respectively. Kyoto was the most successful to date in numerical attendees, and Vienna was one of the most profitable. It was not until the 1981 Congress in Kyoto that the appellation *World Congress of Neurology* appeared to be formally adopted and the meeting was known as the 12th WCN.

The Modern Era

From 2009, the frequency, venue selection and organization of the WCN changed. Congresses became biennial, rotated sequentially by global quarters (Asia, Africa and Middle East, Europe, and the Americas) and the WFN assumed overall responsibility for the WCN organization,

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World Congresses and Their Venues

The Sixth International Congress of Neurological Sciences was also known as the First International Neurological Congress. Brussels 1957

Seventh International Neurological Congress also known as the Second International Congress of Neurology. Rome 1961

Eighth International Congress of Neurology also known as the Third International Congress of Neurology. Vienna 1965

Ninth International Congress of Neurology also known as the Fourth International Congress of Neurological Sciences. New York 1969

10th International Congress of Neurology also known as the Fifth International Congress of Neurology. Barcelona 1973

11th International Congress of Neurology also known as the Sixth International Congress of Neurology. Amsterdam 1977 12th World Congress of Neurology Seventh International Congress of Neurology. Kyoto 1981

13th World Congress of Neurology. Hamburg 1985

14th World Congress of Neurology. New Delhi 1989

15th World Congress of Neurology. Vancouver 1993

16th World Congress of Neurology. Buenos Aires 1997

17th World Congress of Neurology. London 2001

18th World Congress of Neurology. Sydney 2005

19th World Congress of Neurology. Bangkok 2009











Santiago, Chile, the site of the XXII world congress.

20th World Congress of Neurology. Marrakesh 2011

21st World Congress of Neurology. Vienna 2013

22nd World Congress of Neurology. Santiago 2015

23rd World Congress of Neurology. Kvoto 2017

24th World Congress of Neurology. Dubai 2019

25th World Congress of Neurology. Rome 2021

PRESIDENT

continued from page 2

and retained 60 percent of the profits, thus enabling less well-endowed regions and venues to be selected and so increase the "reach" of the WCN.

Even though the local host society no longer acted on behalf of the WFN in the organization of the WCN with a 50 percent division of profits, the local host society retained for each WCN the essential and important "local" element which distinguishes a WCN from the other regular global meetings.

Also important for the development of the regional representative organizations was the ability for the local host WFN member society to enter into a formal cooperative arrangement with the regional organization to their mutual financial and developmental benefit. For example, the Moroccan

Society partnered with the Pan Arab Union of Neurological Societies in the organization of the 2011 WCN and pledged a portion of their profits to the still emerging African Academy of Neurology.

A number of other aspects distinguish the modern WCN from earlier forms. First, these are the employment of a global professional conference organizer by the WFN, which ensures continuity of structure so that each congress does not have to learn from scratch the essentials of holding a WCN.

Second, the WFN Congress Committee is charged with overall responsibility for WCN oversight and reports directly to the trustees.

Third, the WFN has permanent Scientific and Teaching/Educational Committees with regularly rotating members and chairs determined by the president and



The Cloud/La Nuvola, Rome, Italy, the site of the World Congress of Neurology in 2021.



Dubai, the site of the XXIV world congress.

Finally, all of the members of the Global Neurological Alliance (see my last President's Column) are asked to contribute to the program for each WCN. Altogether, these changes have resulted in a recognizable high quality product that is readily distinguishable from other global meetings and is a highly valued asset of the WFN and its member societies.

Dubai 2019 (Emirates Neurology Society) and Rome (Society of Italian Neurology) 2021 are both shaping up to be exciting and rewarding World Congresses and will be led by Presidents Suhail Abdulla Alrukn and Antonio Federico, respectively.

The process to select the site for the 2023 WCN is underway with strong bids lodged by Buenos Aires, Mexico City, and Montreal and will be decided at the Council of Delegates meeting at the beginning of the Dubai WCN next year.

Reference

Aarli Johann. The history of the World Federation of Neurology: the first 50 years. (2014) Oxford University Press



WORLD BRAIN DAY

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activities. He also explained the natural and manmade causes of air pollution and effects of air pollution on the brain. He mentioned that out of the 15 most polluted cities in the world, the first 14 are in India. He suggested that a nation-wide campaign for clean air is the need of the hour. The event was attended by 500 people.

This was followed by screening of the national award-winning educational movie "Astu," based on dementia. After the movie, Agashe, who was in the lead role in the movie, interacted with the audience and explained the finer details about dementia and the role of caregiver. Dr. Sudhir Bhave, psychiatrist, interviewed Agashe.

Dr. Meshram gave an interview on All

India Radio, explaining various aspects of air pollution, including effects on the brain and means for reducing air pollution.

World Brain Day posters were displayed in prominent places in the city, including in hospitals and clinics.

Print media had carried the campaign with great interest, and there were 14 publications in various newspapers in English, Hindi, and Marathi languages.

Nellore

Dr. Bindu Menon Foundation, Apollo Speciality Hospitals, and Jain Hub participated in World Brain Day July 22. The theme "Clean Air for Healthy Brain" was propagated. As automobiles contribute a great deal to air pollution, a cycle rally was organized which started from the main ground of Nellore VRC Center and went across the town.

A press meeting was organized prior to the cycle rally. Prof. Menon, senior neurologist, addressed the meeting and emphasized the need for clean air for a healthy brain. Among the various forms of air pollution, Dr. Menon emphasized that vehicle induced pollution is a major contributor for air pollution. He encouraged the public to use cycles, especially youngsters, and switch to pedal power. Clean air is essential to prevent several diseases, including brain, stroke and degenerative disorders.

More than 100 cyclists of all ages participated in the cycle rally. All wore

T-shirts featuring the slogan, "Clean Air for Healthy Brain" and the WFN emblem. The cycle rally was a huge success. Print and electronic media covered the event.

Dr. Menon thanked all the participants of the cycle rally for making the event a huge success.

Ahmedabad

Dr. Shailesh Danri published the articles on air pollution and brain health in local newspapers in the Gujarati language.

Sholapur

Dr. Prasanna Kasegaonkar gave a detailed interview on All India Radio on air pollution and brain health.

Trichy

Tamil Nadu Pondicherry Association of Neurologists issued the press release and its president, Dr. M. A. Aleem gave a detailed interview highlighting the role of air pollution in stroke and degenerative brain diseases. •



FROM THE EDITORS





BY STEVEN L. LEWIS, MD, EDITOR, AND WALTER STRUHAL, MD, CO-EDITOR

e'd like to welcome all of vou to this issue of World Neurology. This issue begins with the wellillustrated report by Chandrashekar Meshram, Gagandeep Singh, and Sanjeev Thomas about the many festivities that occurred during World Brain Day in India. Next, WFN Secretary-General Wolfgang Grisold reports on the 68th Session of the WHO Regional Committee for Europe that he attended in Rome this past September. Dr. Grisold also reports on the third high-level meeting of the United Nations on noncommunicable diseases, which was held in September at the U.N. in New York Citv.

In the President's Column, WFN President William Carroll provides an overview of the history and venues of the WFN's World Congresses of Neurology through the years, including the WCN XXIV in which will be held October 2019 in Dubai. Fittingly, in this issue's history column, Edward H. Reynolds provides background and historical details of the Second International Congress of Neurology that was held in 1935 in London, England. Also in this issue. WFN Treasurer and WCN Tournament of the Minds organizer and moderator Richard Stark has an exciting announcement about free registration for WCN 2019 in Dubai for Tournament of the Minds teams. Please see his article for

important details.

This issue also features many reports from recipients of WFN Junior Traveling Fellowship awards from around the world, who presented the results of their research at high level neurology conferences around the world.

Finally, Martin J.B. Taphoorn and Martin J. Van Den Bent provide a heartfelt obituary on the life and passing of Dr. Charles J. Vecht (1947-2018), the founding father of Dutch neuro-oncology.

We hope you all enjoy the varied contributions from this issue by neurologists from around the world, about neurology from around the world, and for neurologists around the world. •



Opening speech with Zsuzsanna Jakab, WHO Regional Director for Europe.

WHO

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be useful in the regional context for WFN member states to further emphasize the importance of stroke treatment.

The main program points were:

- Affordability of medical services
- Vector borne diseases and vaccination
- $\bullet \ \ Non-communicable \ diseases \ (NCDs)$
- Men's health
- Budget program

In this report, the topics relevant for neurology will be discussed.

"No one left behind" is a self-explanatory motto of this year to describe that all persons in European countries should have access to health coverage. Despite the fact that Europe is one of the richest regions in the world, a large disparity of out of pocket costs for patients exists. In summary, in those countries in Europe that are the poorest, the percentage of self payment and individual payment (out of pocket) is highest.

Whether people can afford to pay

for health care is a question of growing importance, and varies greatly in European regions. It is alarming that some health costs, for example, dentistry, are not covered at all in some countries.

The wish and recommendation is the move toward a European health plan, with health coverage of EU citizens. Residual and out of pocket payment need to be reduced or ideally abolished.

An action plan to improve public health preparedness and response in the WHO European Region is on the way. Turkey was specifically mentioned in this WHO meeting. This country is providing free medical care for more than 3 million Syrian refugees, which was greatly acclaimed by the delegates.

Vaccine-Preventable Diseases and Immunization: Realizing the Full Potential of the European Vaccine Action Plan

The issue of vaccination deficits in Europe has reached large dimensions. As all vaccinations need a herd immunity of 95

percent to be effective, the present trend to refuse or reduce vaccinations has a large impact. Worldwide, and in Europe in particular, individualist ideas and antivaccination activists have successfully undermined the vaccination strategies; subsequently, new threats from diseases that had been prevented, and seemed to have been extinguished by vaccination, reappear.

As an example, measles presents with 40,000-60,000 cases per year in Europe. Although it can be harmless, measles can be more severe, or even extremely severe as in measles encephalitis. Similar concerns can be expressed for polio, which is presently extinct in Europe.

The need for vaccination and protection needs to be on the agenda of European states. Also vaccination for personal health is an emerging issue, as non-vaccinated health professionals pose a risk for the dissemination of infectious diseases.

Non-Communicable Diseases (NCDs)

The topic of NCDs is of growing importance, as they are the most frequent cause of death and disability. In addition to high income countries, NCDs are becoming increasingly important in low income regions of the world. Lifestyle and nutrition are the most important modifiable risk factors. The issue of NCDs will be the subject of further conferences, in particular the New York meeting at the United Nations on Sept. 27. (See the report on page 5.)

From the contributions, it seems that cardiology is very active and stressing the importance of cardiovascular disease. Despite our statement on stroke and success with the new ICD 11, neurology still needs to carefully watch the final implementation of the ICD-11, which will only be in 2021.

Other neurological NCDs, such as dementia, trauma, and neuromuscular disease were not included in the discussions and will also need more advocacy from the neurological community.

Environment

The important role of the environment on diseases is increasingly attracting attention. The WFN and its Applied Research Group on the Environment (Prof. Reis, France; Prof. Wasay, Pakistan) have already devoted the WFN World Brain Day 2018 to the environment. Also the WHO statement from 2017 in Budapest clearly defines the importance of environment for the risk of stroke.

As the environment is an increasingly important factor, the WHO will organize a conference dedicated to the environment and diseases in Geneva this year.

Summary

The WFN as a non-state actor is grateful to the WHO for cooperation and also to be able to participate at this high-level meeting. Many of the issues discussed are important for neurology, not only in Europe, but also worldwide. The experience and inclusion in this meeting enhances the awareness of regional and global aspects of the WHO. •

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WORLD FEDERATION OF NEUROLOGY

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The Third High-Level Meeting of the United Nations on Non-Communicable Diseases

BY WOLFGANG GRISOLD, MD

"Time to deliver, leaving no one behind."

he third high-level meeting of the United Nations (U.N.) on Non-Communicable Diseases (NCDs) was held Sept. 27 at the UN in New York City. It scaled up multistakeholder and multisectoral responses for the prevention and control of NCDs in the context of the 2030 Agenda for Sustainable Development. The World Federation of Neurology (WFN), represented by Wolfgang Grisold, was able to participate in this high-level meeting through the support of the Austrian Society of Neurology and the Austrian Health ministry.

The meeting was attended by heads of state and government, parliamentarians, ministers of foreign affairs, finance, and health, heads or senior representatives of relevant United Nations entities, civil societies, the private sector, philanthropic foundations, academia, medical associations, indigenous leadership, and community organizations. The meeting highlighted the importance of noncommunicable diseases for the WHO.

Non-communicable diseases such as stroke, dementia, other degenerative diseases, brain cancer, and neuromuscular diseases are an important part of neurology. In particular, stroke and the recent modifications of the ICD-11 classification, aim toward an improvement of the care of stroke patients worldwide. To continue this important development is a critical task of the neurological community.



U.N. building, where the meeting took place.



Mrs. Mandela speaking on health issues.



WHO Secretary General Tedros Adhanom Ghebreyesus.

The meetings follow a structured pattern, with openings, plenaries, and various dedicated side meetings. There were key speakers, and following these, many speakers from states around the world illuminated the multitude of aspects of NCDs. The efforts are directed to achieve the Sustainable Development Goals, in particular Goals 3 and 4.

There were several interesting keynote speakers, such as Mr. Bloomberg, Mrs. Mandela, director general of the WHO Tedros Tedros Adhanom Ghebreyesus, and several ministers of health, who gave key speeches on the importance of preventing diseases, including the influence of modern lifestyle, the need to reduce sugar content in food, the adaptation of nutrition, excess of sodium, and the recreational abuse of tobacco and alcohol. These changes are spreading fast around the world, making the prevention of NCDs a high priority.

The greatest attention was directed toward diabetes, cardiovascular diseases, and cancer, and also the issue of vaccination. The issue of dementia and other neurological diseases was mentioned by only a few speakers and countries, and it will be a mission of the neurological WFN community to act on their local and international level on behalf of the recognition of neurological disease. The worldwide need for palliative care was only mentioned by one speaker (Somalia), although it is an important issue worldwide.

However, stroke was included in the list: The heads of state and government committed to 13 new steps to tackle non-communicable diseases, including cancers, heart and lung diseases, stroke, and diabetes, and to promote mental health and well-being.

Another important side meeting was directed toward Universal Health Coverage (UHC) in emergencies. This is an important aspect and should provide help for persons in need following an emergency such as catastrophes, but also outbreaks of diseases such as ebola. The need for this was emphasized by Director General Tedros from the WHO.

"Leaving no one behind" is applicable for the prevention and treatment of NCDs and needs to be available universally in medical emergencies.

This meeting not only acknowledges the need for further care of NCDs and highlights the problems worldwide, but also clearly reveals that the advocacy for neurological diseases needs to be increased.

In all sessions, speeches were allowed from countries as well as a few organizations such as non-governmental organizations (NGOs). The meeting allowed listening to a worldwide representation of speakers who gave presentations of their local health systems and also of their efforts to take active measures against NCDs. •

HISTORY

The Second International Congress of Neurology

London, England, 1935

BY EDWARD H. REYNOLDS

ollowing the first International Congress of Neurology in 1931, in Berne, Switzerland, (Koehler 2018), the second congress was held at University College London July 29-Aug. 2, 1935.

The president of the congress was Gordon Holmes, a worthy substitute for Sir Charles Sherrington who was unwell. The secretary general was Samuel Alexander Kinnier Wilson. The congress coincided with the centenary of the birth of John Hughlings Jackson (1835), who was honored by a centenary congress medal given to all of the delegates (Reynolds 2005).

I am the proud owner of Kinnier Wilson's own copy of the medal given to me by his son, James Kinnier Wilson, with whom I have collaborated on Babylonian neurology and psychiatry. Since 2005, two further copies of the medal have come to light, both in the U.S., one of which is now in the Archives of the National Hospital for Neurology and Neurosurgery in Queen Square, London.

Naturally, the main theme of the congress was the Epilepsies. Three other themes were:

- The physiology and pathology of the cerebrospinal fluid
- The functions of the frontal lobes
- The hypothalamus and central representation of the autonomic nervous



The Hughlings Jackson Centenary Medal for delegates at the congress. Reproduced from Reynolds (2005), with the agreement of the BMJ Publishing Group Ltd.

system. In addition, about 250 free communications were given by delegates from 20 countries. Interestingly, the official languages of the congress were English, French, German, Italian, and Spanish, but abstracts had to be in one of the first three languages.

The Epilepsies: William Gordon Lennox (Boston) laid to rest the time honored theory that epilepsy was the result of generalized cerebral arterial spasm by demonstrating no change in cerebral blood flow before a convulsion in 10 patients. At the same time, he introduced a new chapter in epilepsy research by applying Berger's recently discovered human electro-encephalograph (EEG) to 31 patients in whom he showed abnormal electrical changes prior to seizures, which increased during the attacks. Neurosurgeon Wilder Penfield (Montreal) also applied the EEG as well as cortical stimulation to demonstrate the new possibilities for epilepsy surgery in 41 patients with focal cortical atrophy and cicatrix. Jean Abadie (Bordeaux) considered that epilepsy was no longer a disease but a variety of anatamo-clinical syndromes, invariably acquired. Ernest A. Spiegel (Philadelphia) emphasized that the pathogenesis of convulsions must be sought in alterations in ion concentrations across neuronal semi-permeable membranes.

F. Frisch (Vienna) discussed the role of general metabolism including water, salt, and alkalosis. Kazimierz Orzechowski (Warsaw) continued to view epilepsy as vascular in origin, and Mieczyslaw Minkowski (Zurich) discussed the variable neuropathology of epilepsy. Alfred Ulrich (Zurich) considered the role of bromides in the treatment of epilepsy and the value of measuring bromide levels. Louis J.J. Muskens (Amsterdam) stressed the need for special institutions for treating some patients with severe epilepsy.

The Cerebrospinal Fluid: Lewis H.



Gordon Holmes (1876-1965), president of the congress. Public domain.

Weed (Baltimore), Georg Schaltenbrand (Würzburg), and Felix Georgi (Yverdon) all discussed the anatomy, development, and physiology of the choroid plexus and whether the fluid was a secretion, filtrate, or dialysate. Neurosurgeon Hugh Cairns (London) described at least 18 causes of hydrocephalus in infancy and less common causes in adults, including post-operative hydrocephalus following removal of posteria fossa tumours. He also commented on cerebral oedema and shrinkage.

Functions of the Frontal Lobes: Jean Alexandre Barré (Strasbourg) and Paul Delmas-Marsalet (Bordeaux) both discussed ataxic syndromes associated with frontal lobe lesions and the relative contributions of cerebellar, labyrinthine, apraxic, and agnosic factors. Kurt Goldstein (New York) and neurosurgeon Clovis Vincent (Paris) described variable or no mental and behavioral symptoms with frontal lesions. R.M. Brickner (New York) suggested the main function of the frontal lobes was ingenuity. It was at this congress that neurophysiologist John Fulton and his colleague Carlyle Jacobsen presented the results of frontal lobotomy in two chimpanzees. António Egas Moniz and Walter Freeman met, and this probably



Samuel Alexander Kinnier Wilson (1878-1937), secretary general of the congress. Reproduced with permission of James Kinner Wilson.

influenced the latter's endeavors with respect to human frontal lobotomy.

The Hypothalamus and Central Representation of the Autonomic Nervous System: Cornelius U. Ariëns Kappers (Amsterdam) described the phylogenetic development of the autonomic nervous system in amphibia and lower mammals, and Wilfrid E. Le Gros Clark (Oxford) the ontogenetic development in man. Jean Lhermitte (Paris) discussed numerous clinical syndromes and pathologies linked to the hypothalamic, pituitary, and endocrine connections. Alfred W. Adson (Mayo Clinic) promoted the role of sympathectomy in the treatment of Raynaud's disease, hypertension, and other disorders. Otto Löwenstein (Nyon) demonstrated the role of both physical and psychological influences on the vegetative nervous system, illustrated in particular by the pupillary reflex.

Other Contributions: Among the numerous free communications worthy of note were:

 Several presentations by Egas Moniz and his colleagues from Lisbon on cerebral angiography

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WFN JUNIOR TRAVELING AWARD

Report on the 18th International Conference of Neurology and Neurological Disorders

. BY HAIDY SHEBAWY

he conference in general was well organized and discussed different neurological topics from participants from all the world.

The venue was the Holiday Inn the Hotel Inn Marne Lavelle in Paris, France.

The conference was not huge like the conference of EAN or AAN. But the moderate number of participants allowed for more opportunity to discuss topics with speakers and was a good chance for sharing experiences and asking questions.

The schedule was planned to be Aug. 23-25, but the organizers compressed the schedule to take place Aug. 23-24.

My oral presentation was on the first day and received a certificate for doing a good job during the conference.

The schedule included oral presentations and poster sessions. The coffee breaks and lunch breaks were very good. The most exciting sessions for me were:

- The lecture by Dr. Bernadete Marcia from Brazil about the spatial reasoning skills in the male brain and the risk of losing it in patents with neurodegenerative disorders.
- The lecture by Dr. Radu Mutihac from Romania about spatiotemporal dynamics of the human effective connectome in neurological disorders,
- which covered a lot about PET and SPECT dynamics and uses.
- There was an exciting case report about ischemic stroke due to hyperthyrodism presented by Dr. Bashir Adam from Nigeria.
- There were sessions about pediatric neurology, neurodegenerative disorders, neuroimaging, and neuroimmunology. •

HISTORY

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 A twin study of heredity in epilepsy by Klaus Conrad (Munich) suggesting 70 percent concordance in uniovular twins and 11.5 preent concordance in binovular twins.

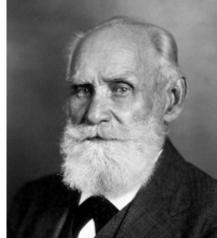
A special guest lecture was given in German by Ivan P. Pavlov (Leningrad), now in his 87th year, on "the types of higher nervous activity, their relation with the neuroses and psychoses, and the physiological mechanism of neurotic and psychotic symptoms." Based largely on his studies of conditioned reflexes and

personality types in dogs, he speculated on the role of human conditioning, including the enormous impact in man of the spoken, heard, and seen word.

Another guest speaker was neurosurgeon Otfrid Foerster (Breslau) who gave the triennial Hughlings Jackson Lecture, which normally would have been given to the neurology section of the Royal Society of Medicine in London. He spoke on "the motor cortex in man in the light of Hughlings Jacksons doctrines" (see Reynolds 2005).

Social functions included a government reception hosted by the Minister of Health at Lancaster House, receptions at the Royal Colleges of Physicians and Surgeons, and a congress banquet at the Grosvenor Hotel.

Revival of the International League against Epilepsy (ILAE): On July 31, a free day at the congress, 32 delegates from 14 countries visited the Lingfield Epilepsy Colony in Surrey, where they agreed to revive the ILAE. The ILAE had been founded at the 16th International Medical Congress in 1909 in Budapest, but had ceased to function after the outbreak of the first world war, the last issue of Epilepsia, the League's journal, having been published in 1915. On Aug. 2 in London, Walter G. Lennox (U.S.)



Ivan Pavlov (1848-1936), guest lecturer at the Congress. Public domain.

WFN JUNIOR TRAVELING AWARD

Nordic Neuropediatric Society

BY DR. MARIAM I. KHAWAJA, MD, NEUROLOGIST FROM JORDAN

t was a great opportunity to attend the 37th meeting of the Nordic Neuropediatric Society, which was held in Copenhagen Sept. 6-8, as one of the awardees of the World Federation of Neurology junior travel award grant. The lectures discussed many important and interesting aspects of pediatric neurology, including researcher promotions, case presentations, investigation perspectives, and proposals. I had the chance to interact and make new contacts with many neurologists and neuropediatricians from different experiences and health system backgrounds.

I also presented an interesting case report as a poster titled, "Ictal Urinary Urge in a Focal Temporal Lobe Epilepsy," and was honored to the receive the award of the "Best poster presentation."

I would like to thank the WFN for giving me this opportunity and their support, as attending these events plays an important role in my development and helps many other young neurologists and neuroscientists. •



Louis Jacob Joseph Muskens (1872-1937), prime mover and first secretary general of ILAE 1909-1914. Elected vice president during the 1935 Congress revival of ILAE. He wisely proposed an American president because of the catastrophic politics in Europe at that time.

was elected president; Louis J.J. Muskens (Netherlands) vice president, Hans Iacob Schou (Denmark) secretary and J. Tylor Fox (Lingfield, U.K.) treasurer. Muskens had been a prime mover and first Secretary General of ILAE from 1909-1914. The ILAE has since evolved into a global professional organization with 120 national chapters in every continent, working closely with the International Bureau for Epilepsy (lay) and the World Health Organisation on a worldwide public health campaign. It celebrated its centenary in Budapest in 2009 and is the oldest international neurological specialty organization (Shorvon et al 2009). •

WFN JUNIOR TRAVELING FELLOWSHIP

15th International Congress of Neuromuscular Diseases

BY DR. NOURELHODA HARIDY, MD, PHD

received the opportunity to present my research of the PhD thesis as a poster titled, "Clinical and Genetic Analysis of Hereditary Neuropathy in Egyptian Population" at the 15thInternational Congress of Neuromuscular Diseases (ICNMD 2018) July 6-10 in Vienna, Austria.

I was awarded the Junior Traveling Fellowship 2018 by the World Federation of Neurology (WFN) with an amount of GBP 1000 toward the travel to Austria.

I am working in the field of neurogenetics and focus on genetic and clinical analysis of different neurological disorders in Egyptian patients. Participating in this international congress was very helpful for me in many aspects. I benefitted from the exposure to my research field and I was provided with an opportunity to learn about different aspects of genetic disorders that affect the neuromuscular system. This helped me in the genotypic and phenotypic correlation of these cases. Also, it provided me with the basics that we need to establish





clinical trials for such disorders. I was able to interact with many neurologists worldwide and established some communication with those working in same area of interest. I am thankful to my supervisors in Egypt (Prof. Sherifa Hamed for her continuous support with necessary requirements and Prof. Abdel Hameed for his encouragement) and to my U.K. supervisor (Prof. Houlden for giving me the opportunity to train in his neurogenetics lab).

I want to express my gratitude and happiness for this great opportunity. Great thanks and best wishes to all members of WFN. •

Dr. Nourelhoda Haridy is assistant lecturer of Neurology in the Department of Neurology and Psychiatry, Assiut, Egypt, and honorary research associate in the Department of Molecular Neuroscience, Queen Square, London, U.K.

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IN MEMORIAM

Dr. Charles J. Vecht (1947-2018)

Founding Father of Dutch Neuro-Oncology

BY MARTIN J.B. TAPHOORN AND MARTIN J. VAN DEN BENT

n July 3, Dr. Charles Vecht, neurologist and neuro-oncologist, passed away at home in Amsterdam at the age of 71, having suffered from a progressive auto-immune disorder over the past years. He is survived by his wife Roselien, their two sons, and grandchildren.

Early after his training as neurologist in Groningen and Amsterdam, and having already succesfully defended his PhD thesis "Haemostasis in Acute Neurological Disorders" during his residency in 1975 at Groningen University, Charles decided to devote his career to neuro-oncology. As the first Dutch neuro-oncologist, he successfully applied for a fellowship at the Memorial Sloan-Kettering Cancer Center in New York City under the supervision of Dr. Jerome Posner.

Returning to the Netherlands, he started a multidisciplinary neuro-oncology clinic in Rotterdam (Dr. Daniel den Hoed Clinic) with the neurologist as the coordinator, similar to the New York City model. With his characteristic enthusiasm and drive, he motivated several Dutch neuro-oncologists to be trained in New York City as well.

In 1992, he was among the founding members of the Dutch Neuro-Oncology Working Group. His research activities were initially focused on neurological complications in cancer, initiating ground-breaking multicenter clinical trials on treatment of single brain metastasis, and optimal dosage of dexamethasone in brain and spinal metastases. His ever-lasting energy and continuous creative ideas secured a prominent role in European Neuro-Oncology as well, with a major participation in the EORTC Brain Tumor Group, which he chaired.

Moving from Rotterdam to The Hague during that time, he created another multidisciplinary neuro-oncology team in Haaglanden Medical Center, including one of the first nursing specialists in the team. His research shifted to gliomas, and specifically epilepsy in brain tumor patients.

As head of the residency program in The Hague, he motivated several residents to start clinical research in neuro-oncology, and to write publications under his supervision. Apart from being encouraging, he was also demanding for his residents, but not less for himself.

At his official retirement in The Hague, he was knighted by the mayor of The Hague for all of his activities in neuro-oncology, nationally and internationally. Charles, however, did not really accept his compulsary retirement, and from 2012, he worked with his friend and colleague Dr. Jean-Yves Delattre at the Department of Neuro-Oncology of the Pitié-Salpétrière Hospital in Paris, France. He continued his clinical research on epilepsy in brain tumor patients until his disease stopped him from doing so.

We have worked with Charles for many years, in Rotterdam, and in The Hague, respectively. The last time we met him as former colleagues was during the 25th anniversary of the Dutch Neuro-Oncology Working Group in late 2017.



During that occasion, he was elected as honorary member and held a festive speech, highlighting the impressive achievements in neuro-oncology over the past 25 years. We respectfully remember Charles, above all, for what he accomplished for us, and for neuro-oncology, both in The Netherlands and abroad. We have lost a remarkable and outstanding colleague and friend, but the inspiration remains.

Free Registration for WCN 2019 in Dubai Offered for Tournament of the Minds Teams

BY RICHARD STARI

he Tournament of the Minds has been a feature of the World Congress of Neurology (WCN) since the meeting in London in 2001. The aim of the tournament has always been to amuse as well as to educate. Over the years, contestants have faced questions that tested not only their knowledge of neurology but also of the history and regional variations of our discipline.

The task of putting the questions together has always been a huge one, with major input from the host society. An experienced committee reviews the questions and tries to format them in such a way that the disadvantage of having English as a second language is minimized. This means relying as far as possible on visual clues and structuring questions so that reading speed is not vital.

The success of the tournament has always relied on the willingness of the contestants to play their role: No one should underestimate the courage and generosity required to appear on a stage and engage in a battle of wits with international colleagues.

To give a feeling of some of the questions asked, pictured here are questions from 2015 (Santiago) and 2017 (Kyoto).

The level of engagement in the tournament has fluctuated. In Sydney in 2005, there were no fewer than 16 teams

entered. More recently, teams tend to have been put together at the last moment so that even some large countries have not fielded a team. Despite this, the standard of the questions and the performance of the stronger teams has remained excellent.

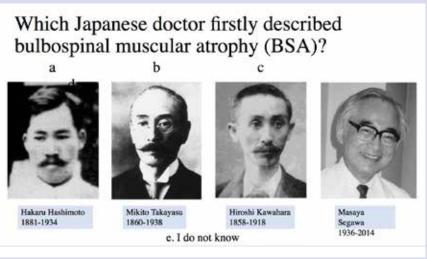
The Scientific Program Committee for WCN2019 in Dubai has confirmed its strong commitment to the tournament and has agreed to promote it with the intention of broadening its appeal. The key to achieving this will be for countries to nominate their teams well in advance. This will enable proper planning and will encourage those supporting each team to participate as audience members.

The format for the tournament will be the same as in recent conferences. There will be an initial knock-out session for all competing teams of 20 multiple choice questions. Audience members will have voting pads so that after each question, the answer is revealed, and we see how well the audience has performed! The top eight teams from this session will proceed to the semi-finals. In each semi-final, four teams answer 20 questions in a "first to the buzzer" format. The top two teams from each semi-final progress to the grand final, which again consists of 20 "first to the buzzer" questions.

Each team consists of up to four members for each session. Substitutes are permitted if a team member is unavailable for a particular session.

see TOURNAMENT, page 9



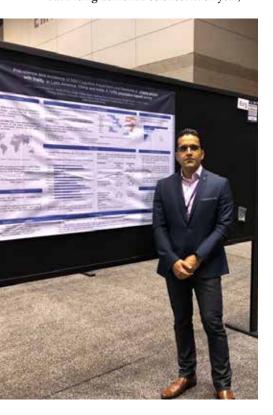


WFN JUNIOR TRAVELING FELLOWSHIP

The 2018 Alzheimer's Association International Conference

BY JORGE J. LLIBRE GUERRA

he 2018 Alzheimer's Association International Conference (AAIC) was held in July in Chicago, Illinois. The AAIC is the largest and most influential international meeting dedicated to advancing dementia science. Each year,



AAIC convenes the world's leading basic science and clinical researchers, next-generation investigators, clinicians, and the care research community to share research discoveries that will lead to methods of prevention and treatment, and improvements in diagnosis for Alzheimer's disease.

The AAIC was followed by the 33rd International Conference of Alzheimer's Disease International meeting organized by the Alzheimer's Disease International Society. This meeting is the place for gathering all of the regional and country societies from all over the world, making it possible to develop regional collaboration and advance the development of international policies in dementia.

This year, it was a great pleasure to receive the WFN Junior Traveling Fellowship, making it possible to attend the lectures and discussions on ongoing research projects in both meetings. This was also a unique opportunity to make new contacts and expand collaboration. It was also an honor to have and actively participate in the meeting and present the results of our ongoing research project as oral and poster presentation.

Presentations included:

Oral Presentations: African Admixture: Implications for Cognitive Decline in AD.

ISTAART Diversity and Disparities Professional Interest Area leadership. Ancestry Background: Implications for Cognitive Decline and Mortality in Dementia.

Poster Presentation: Prevalence and Incidence of Mild Cognitive Impairment and Dementia in Older Frailty in Latin America, China and India. a 10/66 Population Based Survey.

The projects presented during the conferences are also the result of teamwork and collaboration. I would like to acknowledge our research team for the accomplished results. In overall, attendance to both meetings was successful and helpful for my future development as a clinician and researcher. Knowledge acquired during the conference and the newly develop collaborations will improve future research projects.

Finally, attendance of the Congress was supported by the WFN, and I want to share my gratitude to the WFN for this great opportunity. Thank you also to the WFN staff and leadership for their support. The WFN Junior Traveling Fellowship is a unique opportunity to create access and share experiences among junior researchers. •

Jorge J. Llibre Guerra, MD, MSc, is from the National Institute of Neurology in Havana, Cuba.

TOURNAMENT

continued from page 8

To encourage countries to nominate teams for the tournament in 2019, the Scientific Program Committee has made a generous offer:

If any country's society nominates a team of up to four members one month before the WCN2019, each of those four members will be entitled to a refund of their registration fees once they have completed all rounds of the tournament for which they qualify.

Furthermore, the four members of the winning team will be offered free registration for WCN 2021 in Rome.

We leave the policy of selecting teams to each member society. Many will choose to select bright young neurologists who might not, without the refund, be able to attend the conference. Others with a competitive spirit may simply choose what they perceive to be their strongest team. However, we encourage all member societies to put a team together, giving team members a great chance to engage in this educational and entertaining activity.

Answers to the questions are:

C: Easter Island or Rapa Nui. The macrolide was named rapamycin after Rapa Nui where it was discovered. TOR is an acronym for "target of rapamycin."

C: Hiroshi Kawahara. He described the condition in 1897, 71 years before Kennedy in 1968. •

WFN JUNIOR TRAVELING AWARD

Report of My Attendance at the Peripheral Nerve Society Meeting

BY DR. ALAGOMA IYAGBA

he 2018 Peripheral Nerve Society Meeting took place July 21-25 in Baltimore, Maryland.

It started with an all-day educational course (basic and clinical aspect of peripheral nerve and neuromuscular diseases). The conference proper started July 22. It featured plenary sessions, oral poster sessions, poster sessions, and industry sessions. (These took place at the end of each day.)

The meeting afforded me the opportunity to see groundbreaking and cutting-edge research on diseases of the peripheral nerve and neuromuscular disorders

I had two poster presentations:

- Development and psychometric properties of the HANP-Q: a new instrument for measuring neuropathic pain in HIV-AIDS (Poster 13).
- Diagnostic accuracy of the HANP-Q: a novel tool for measuring neuropathic pain in HIV-AIDS persons (Poster 25).

The presentations were well received. The questionnaire was said to be simple

to understand and easy to apply in clinical and research settings. Suggestions for future research include doing an external validation of the questionnaire.

The conference afforded me the opportunity to network with colleagues. Of special mention are Prof. Mary Reilly, Dr. Alexander Rossor, and Dr. Mohammed Mahdi-Rogers (all from the Center for Neuromuscular Diseases at King's College in London), Prof. Hans-Peter Hartung (Germany) and Dr. Catherine Mamah (U.S.). They were all excited at my attending the meeting and gave me encouragement and guidance for the future.

On the fourth day of the conference, we had the Annual General Meeting. When the map of participating countries was projected, I was the only participant from Africa save for some South Africans.

On the last day of the meeting, I was part of the inaugural meeting (foundation member) of the Toxic Neuropathy Consortium of the Peripheral Nerve Society, which was initiated by Prof. Guido Cavalleti (Milan, Italy) in February 2018.

On the whole, the meeting was an eye



opener for me with respect to this very rare field of neurology in Africa. It has exposed me to the state of the art and science of peripheral nerve and neuromuscular diseases.

I am grateful to the World Federation of Neurology and the Education

Committee for selecting me for this travel fellowship. •

Dr. Alagoma lyagba is from the Neurology Unit,
Department of Internal Medicine at the University of
Port Harcourt Teaching Hospital, Nigeria University
of Port Harcourt in Port Harcourt, Nigeria.

GERMAN NEUROLOGICAL SOCIETY AND WORLD FEDERATION OF NEUROLOGY

Universitätsklinikum-Erlangen, Department of Neurology

BY BINIYAM ALEMAYEHU

would like to thank WFN and the German Neurological Society for giving me this rare educational opportunity to visit one of the state-of-the-art neurology centers. On my first day at the Universitätsklinikum-Erlangen, Department of Neurology, I was warmly welcomed and introduced to all the staff by Prof. Hagen B. Huttner, as Prof. Stefan Schwab was on the leave, who I had an opportunity to meet on the following Monday. He also warmly welcomed me. Prof. Huttner arranged weekly rotational visits for me in the following fashion:

Week 1: Emergency room
Week 2: Stroke unit and neurointensive care unit

Week 3: Electrophysiology unit Week 4: Epilepsy unit

Week 1:

During my one-week observation in the ER, I had the opportunity to observe first-hand how patients are handed over from paramedics to a treating ER neurologist. I also saw how they quickly engage in evaluating the patients and investigating the patients based on patient complains, especially their approach to stroke patients. These patients are possible candidates for IV thrombolysis, in which the neurologist and ER nurses are highly organized and coordinated in immediately preparing the tPA kit and taking the patient to the CT scan room, in the overall effort to minimize door to needle time.

I had an opportunity to observe the "Teleneurology" service at the ER, in which those nearby health facilities, networked with Universitätsklinikum-Erlangen, had a real-time video discussion with the neurologist in charge and consult the patient's condition and imaging.

Week 2:

During my second week, I had the opportunity to attend daily rounds at the stroke unit and was able to observe the quality of care that intermediately sick patients with different neurological disorders, including stroke, TIA, GBS, and brain tumor patients, get during their admission to the

I also had an opportunity to visit the neurointensive care unit, a 12-bed unit, equipped with state-of-the-art neurocritical care equipment, including continuous EEG monitoring.

Week 3:

In my one-week observation in the electrophysiologic unit, I had an opportunity to observe how ultrasound guided EMG is done in different patients with neurological disorders. I also had an opportunity to observe while other EDx tests are done, including NCS, and evoked potentials. Finally, I had an opportunity to observe botulinum toxin injection sessions for patients with blepharospasm, hemifacial spasm, and spasticity.

Week 4

During my final week at the hospital, I attached to the epilepsy unit, helping with 24-hour EEG monitoring in patients who need pre-surgical evaluation and for diagnostic purposes.

In our Setup

During my four week stay at U.K.-Erlangen hospital, I had an opportunity to observe how patients with different neurological disorders are managed in an ideal setup. As the second most populous country in Africa and home to different international organizations, its high time for us to establish at least one neurology care center that can give a standard neurological care to our patients and become a center for neuroscience research.

I am fully aware that this is a long shot, but we need to work hard and push the policymakers to give due attention on the need to have at least one excellent neurology center, which will have a well-equipped ER, neurocritical care units, stroke unit, and epilepsy units in Ethiopia. In the meantime, I am highly motivated and enthusiastic to improve the current neurology care in our facility by using the experiences I acquired at U.K.-Erlangen. I am planning to work hard in the following areas as a priority:

- Creating public awareness about stroke and TIA and establishing a referral network system with nearby hospitals.
- Short of availability of tPA, optimizing stroke care, by establishing a stroke unit and improving neurorehabilitation for our patients.
- Optimizing emergency management of patients with neurological disorders.
- Strengthening our electrodiagnostic unit by increasing the number and quality of the tests we do currently.
- Strengthening the care we are giving our epilepsy patients currently.
- Training our staff in different neurology fellowship training in order to keep improving the current care and ability to accommodate ever increasing neurosciences care.

I'm optimistic that the future is brighter for neurologists like me. Such a departmental visit gave us the highlight of how care for patients with neurological disorders are much advanced and ever growing in the future.

I am hopeful that both WFN and DGN will keep helping our hospital in



the future, especially in capacity building of our staffs and in our effort to improve the neurology care in Ethiopia. I'm really fortunate to have met Prof. Stefan Schwab, who is really interested in establishing future collaboration between his hospital and our hospital. I hope he will visit our center in the near future and support our endeavors.

Finally, I would like to thank all the staff at Universitätsklinikum-Erlangen for their hospitality during my rotation at different units. •

Biniyam Alemayehu is assistant professor of Neurology at the AAU College of Health Sciences in Addis Ababa, Ethiopia.

WFN JUNIOR TRAVELING FELLOWSHIP



El Hadj Ibrahima Niasse

BY DR. PRISCA-ROLANDE BASSOLÉ

am Dr. Prisca-Rolande Bassolé, a young neurologist, epileptologist, clinical neurophysiologist, teaching and research assistant in neurology at El Hadj Ibrahima Niasse private University / College of Medicine Saint Christopher Iba Mar Diop of Dakar, Senegal.

I had a great honor to participate in the 13th European Congress on Epileptology (ECE) in Vienna, Austria. I'm grateful to the World Federation of Neurology for supporting my attendance at this international congress.

The conference was held Aug. 26-30 at

the Messe Wien Congress Center in the beautiful city of Vienna.

During my training in neurology, I developed an interest in epileptology so it was a personal, educational, and impactful experience for me.

I appreciated all of the topic sessions, especially those on epilepsy in child-hood, the gut microbiota and epilepsy: is there a link?, clinical neurophysiology, epilepsy and stroke, can we do better? I also enjoyed the teaching courses that I attended. They included how to diagnose epilepsy, which helped me to enhance my knowledge of epilepsy.

I presented my abstract, "Early

Epileptic Encephalopathies with Suppression Burst" Aug. 27. The abstract presentation afforded me the opportunity to meet other specialists in epileptology and clinical neurophysiologists, working on similar research areas.

Discussing with them made us develop other research topics that could help improve the diagnosis and follow-up of our patients, particularly in developing

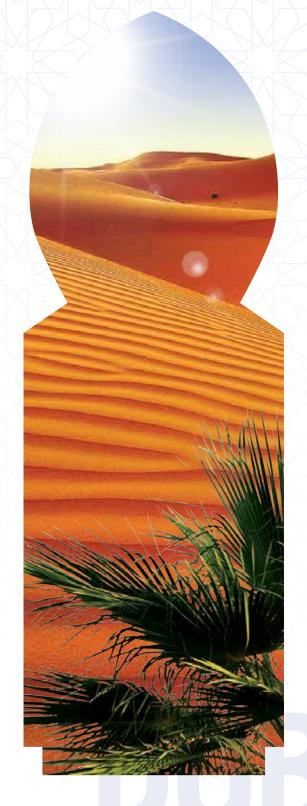
Thank you to my mentor, Prof.

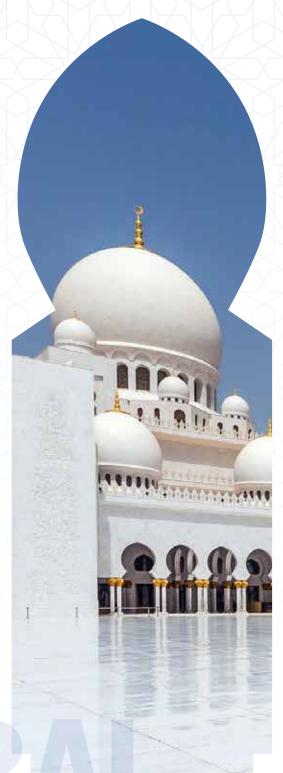
Mansour Ndiaye, who supported my
application. Thank you again to the WFN
for giving me this international scientific
opportunity. •



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