

EDITOR'S COMMENT

Nervous diseases



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As a student I enjoyed neurology. The complexity of the underlying mechanisms of neurological disease appealed to my rather academic mind and being married to someone who was then doing a PhD in neurophysiology helped as well. I enjoyed the anatomy of the brain. It was one of the few areas where I felt confident and when my examiner moved from the inguinal canal to the cerebellum in my pass-fail oral at the end of second year, I breathed a great sigh of relief!

But, neurological disease is unpleasant and often severely disabling for those who suffer from it and I must admit that landing up with a degenerative neurological disease has always been one of my fears. As a student I used to skip dermatology tutorials (how I regretted that in later years in general practice!) and spend the afternoon at a stroke rehabilitation unit instead. I was particularly interested in the way that the brain can be trained to do things again. This was at the time when conventional neurophysiological thought was that there was no plasticity in the adult brain – a concept that is now being seriously challenged. I remember being horrified at the age of some of the stroke patients. Many were young, usually black, men and women with severe brain damage as a result of a stroke, often arising from undiagnosed high blood pressure or infarcts as a result of valve damage from rheumatic fever – consequences of diseases of poverty, which of course lead to further poverty as these young people face a lifetime of disability grants and deprivation.

Even now, totally out of clinical medicine, I regularly come across people with neurological disease. There is a man with Parkinson's disease at the gym I go to. He is only about 4 years older than I am and has had Parkinson's since he was 39. He finds that physical exercise keeps him moving and that he needs far less medication as long as he keeps fit. On the few days of the year that the gym is not open he goes to the beach. If he concentrates really hard on how he walks, he can overcome the normal Parkinsonian gait and walk upright, without landing up running forward all the time. Again, an indication of what the brain can do if enough effort is put in.

Then there is the fascinating research that is coming out at the moment about how using your brain can protect against dementias such as Alzheimer's disease. An article in *New Scientist* tells the story of the elderly retired professor whose only sign of dementia was that he could only think 2 moves ahead in chess, rather than his accustomed 5 moves ahead. He went off to see a friend who was a neurologist, who could find little wrong. Some months later, the professor died. An autopsy revealed the anatomical changes of advanced Alzheimer's disease. In most people this degree of damage would have led to serious dementia. In someone who was not only highly educated, but who had kept his brain extremely active into his old age, this was masked. The exact mechanism for this is unknown, but it is likely that a combination of high intelligence, a good education and continuing to stress the brain by performing complex cognitive tasks allows pathways that are unaffected by disease processes to carry on functioning in a way that prevents the normal manifestations of dementia.

I find this enormously comforting – hopefully the 12 years I have spent in tertiary education will pay off in my dotage!

Results of survey

Now to the *CME* survey that so many of you took the time to complete, for which many thanks. It seems that *CME* is doing something right. There was strong support for the way that each issue is topic-specific, something that we have had to fight numerous sales teams over through the years. The CPD programme was also rated very highly – this will hopefully continue to be popular even with the changes in the way that CPD is to be administered. A total of 42% of readers read the whole journal and 43% read most of the journal – a real compliment to our guest editors and to the *CME* team generally. And *CME* seems to be the most popular medical journal among our respondents, with *SAMJ* coming a close second. However, all these accolades do not mean that we can rest on our laurels. We will continue to strive to provide high-quality, up-to-date and enjoyable content.