

IN BRIEF

TRAUMATIC BRAIN INJURY

Alcohol consumption is the causative factor for many motor vehicle accidents, and crashes involving motor vehicles are in turn one of the prominent causes of traumatic brain injury (TBI). Salim *et al.* report, however, that patients with moderate to severe TBI who test positive for ethanol in their blood have a reduced Injury Severity Score and a decreased risk of mortality, which is independent of age. Although these findings are intriguing, the use of alcohol for acute treatment of TBI is probably inadvisable, not least because individuals who test positive for serum ethanol have a high tendency to experience medical complications while in hospital.

Original article Salim, A. *et al.* Positive serum ethanol and mortality in moderate to severe traumatic brain injury. *Arch. Surg.* **144**, 865–871 (2009).

MOVEMENT DISORDERS

Clinicians find the accurate diagnosis of psychogenic dystonia exceptionally difficult, because the disorder has almost identical symptoms to organic dystonia. The appropriate treatment options for the two similar disorders can differ considerably, emphasizing the importance of an accurate diagnosis. Previous research has shown that abnormalities in the inhibitory systems of the sensorimotor system, which are a distinguishing feature of organic dystonia, are also evident in psychogenic dystonia. Quartarone *et al.* have now confirmed this finding, but did not find evidence of increased plasticity of neural connectivity in sensorimotor circuits—another characteristic of organic dystonia—in patients with psychogenic dystonia. A test based on this latest discovery could, therefore, help clinicians discriminate between these two conditions.

Original article Quartarone, A. *et al.* Abnormal sensorimotor plasticity in organic but not in psychogenic dystonia. *Brain* doi:10.1093/brain/awp213

DEMENTIA

An appreciable proportion of patients with mild cognitive impairment (MCI) will go on to develop dementia. Identifying these individuals at an early stage in the disease will be important, because treatment at early time points could potentially delay or prevent the progression of the disease. Triebel *et al.* tested patients with MCI for impairments in financial capacity and found that individuals who developed dementia within a year after testing had worse financial skills than individuals who did not develop dementia within this time period. This finding was seen both at baseline and at 1 year follow up. Testing for impairments in financial capacity could, therefore, identify individuals with MCI who are likely to develop dementia.

Original article Triebel, K. L. *et al.* Declining financial capacity in mild cognitive impairment: a 1-year longitudinal study. *Neurology* **73**, 928–934 (2009).