Graduation time is upon me after four years of service in the Office of President located, for the first time, outside the Western countries, where the WFN has had its traditional strength since its inception in 1957. During my initial year, we faced a number of challenges in following the Memorandum and Articles of Association adopted anew in 2001. I am pleased to report, however, that the subsequent years went considerably more smoothly, with steady progress towards our objective established at the onset. Thus, despite initial logistic concerns, the system has prevailed, confirming my belief that things somehow eventually work out in the mysterious Orient.

Thousands of thoughts cross my mind at the closure of the Kyoto Office, but I will keep my swansong short according to the Japanese tradition of not dwelling upon a happy ending.

Although I wind down our operation with a sense of great personal satisfaction, I hasten to add that I would not have accomplished my goals without help from others. In particular, I wish to thank Johan Aarli and Richard Godwin-Austen,

Contd. on page 4

WFN JUNIOR TRAVELLING FELLOWSHIPS–2006

The WFN is once again offering ten Junior Travelling Fellowships for young neurologists from developing countries to travel to a WFN approved meeting in 2006. Applicants should hold a post not above that of Associate Professor and should not be over the age of 42 years. Applications should include the name and dates of the proposed meeting to be attended, a CV and bibliography, and a letter of recommendation from the Head of the applicant’s department. If a paper or poster is to be presented, the applicant should include an abstract. An estimate of expenses, to a maximum of £1,000, should be made. Applications should be sent to the WFN office to arrive by 20th February 2006. Awards will be announced in mid-March.

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Editorial Statement

Although great care is taken to ensure accuracy, the WFN and Elsevier B.V. cannot be held liable for any errors or inaccuracies in this publication. Opinions expressed are those of the authors. Elsevier B.V., the Editor, the WFN or the Granter cannot be held responsible for the validity of clinical treatments, dosage regimens or other medical statements made. Any dosage referred to should be checked against the relevant data sheet for the product.
The mega event of WFN, the XVIIIth World Congress of Neurology in Sydney in November, was a great success. The attendance was large, scientific deliberations excellent, and the social events magnificent under the dynamic leadership of Geoffrey Donnan and William Carroll in the perfect environment of the beautiful city of Sydney. A short report on the Congress is included in this issue.

The second major event in Sydney was the WFN elections. The innings of the new team will start from 1st January 2006 and continue for the next four years. We wish all of them great success. The outgoing team under the leadership of Jun Kimura performed remarkably well in the last four years. The WFN has become stronger and financially more sound. Jun Kimura, in his Presidential Column and Annual Report, has given a detailed account of his four year term as the WFN President. One of his greatest contributions was the funding of World Neurology from the Japan Foundation for Neurosciences and Mental Health to the tune of $50,000 annually. We all thank him for his great contribution. He has touched upon the educational needs of the poorer countries and has also not failed to mention that he was the first President of this organisation from outside the Western countries. WFN is a global organisation but its Management Committee, since its inception, remains European orientated through the process of elections or selections. This trend needs to be changed to give it a global outlook.

There are a number of reports from young neurologists who availed themselves of the generosity of the WFN, Elsevier and GlaxoSmithKline to attend the World Congress of Neurology in Sydney and some other conferences. All have words of praise for providing them with financial help to attend conferences. This process needs to be not only continued but further supplemented by other donors as well so that more and more young neurologists can avail themselves of this facility.

This issue carries a report on Neurology in Pakistan which is written by one of the Past Presidents of the Pakistan Neurological Association. Pakistan is a fast developing country with a sound economy. However, the neurological education programme is not developing as fast as the overall development of the country. This is true of most of the countries on the Indian subcontinent and the other developing countries of the world. More needs to spent on the health sector and medically orientated educational programmes so that people living in these countries can get better specialised treatment.

The 14th European Stroke Conference in Bologna (Italy) was undoubtedly a well attended conference. Some of the turning points and trials were on the treatment of acute ischaemic stroke be it non-hemorrhagic or hemorrhagic. The main stress was on the window—should it remain in the domain of three hours or can the window be prolonged and more patients become eligible for the therapeutic benefits. Stroke is a global problem and one of the great killers. All efforts and trials need to be conducted for finding a better remedial therapy for such patients.

Stephen Casper has given a vivid account of British Neurology from 1920-1965 which was incorporated in a rickety film. The contrast between neurology today and then is vast. The difference between the teachers and the taught then and now is equally great. This is not just so in neurology but in all educational fields. Neurology today is mostly based on modern technology and less and less on clinical judgement. However, the latter was the only contributing factor in the past for the treatment of patients. Anyway, it is a great record of neurology practised over a century ago and Stephen Casper must have spent a lot of his time to present it to the readers of World Neurology.

My wife Amar and I send our best wishes to the readers of WN for a Happy, Prosperous and Healthy New Year.

Jagjit S. Chopra, FRCP, PhD
Editor-in-Chief
Officers of WFN, as well as Julien Bogousslavsky, William Carroll, Marianne de Visser, Roberto Sica, and Ted Munsat elected and co-opted Trustees for their wisdom and dedication. Robert Lisak and Jagjit Chopra served with finesse as editors of the *Journal of the Neurological Sciences* and *World Neurology*. I received constant support from the London Office directed by Keith Newton with help from Susan Bilger. I wish also to thank Carrie Becker for her fund raising effort and Monica Brough for her contribution in organizing educational activities. Last but not least, Ms. Machiko Miyamoto kept the Kyoto Office in order, and Ms. Sheila Mennen, who, with help from Leigha Rios and Wendy Sebetka, maintained the Iowa Office and ran the monthly Trustees conference calls and a multitude of other, related chores.

Having been involved with the WFN for the past 12 years in one capacity or another, I can testify that we have come a long way towards changing the organization in a positive way. It is now more goal oriented and proactive in pursuing the stated mission of the WFN to promote the education of neurologists. To further extend the ongoing programs and initiate new projects, we need a long-range plan on how best to carry out our objectives, which in turn depends on an elaborate budget process. We must clarify our strategy in defining priorities for the use of WFN funds, investing as much as possible in projects. At present, we believe an appropriate reserve should equal estimated expenses needed to sustain the organization for four years between the WCN, which currently provides a major source of income. To expand our activities, we must increase the efforts to extend our fiscal base, possibly with the use of a professional management company, another major project we were unable to complete despite concerted effort. Additional fundraising will clearly influence the whole development of WFN.

The poorer countries among our members face considerable difficulties when trying to organize educational activities. The Trustees addressed those needs through various programs conducted by the Education Committee. The CME Program, for example, currently supports 36 member societies in such locations, which fall within the World Bank's classification of "low income" states. These developing countries will continue to receive priority attention. Expanded allocation of resources wherever possible will further enhance our educational effort. We also support locally organized educational meetings by repayable loans. We recognize that this is not enough, as poor countries have limited industry support. I hope more affluent national or regional neurological societies in that part of the world will continue to help in any way they can. As an additional option worth exploring, the WFN should promote local or regional conferences, with budget allocation if necessary.

These are some of my thoughts for the future of WFN, which is in excellent hands with Johan Aarli as President and Vladimir Hachinski as First Vice President. Julien Bogousslavsky will succeed Richard Godwin-Austen as Secretary-Treasurer General in one year. Marianne de Visser, William Carroll and Roger Rosenberg will serve as elected and co-opted Trustees. Being a member of the Executive Committee is like a set of twin babies; it is clumsy if somebody else has it. But our memory has its own way of transforming even the hardship into a positive and rewarding experience. It is my great pleasure to offer this sense of relief as a token of welcome to the new team on the eve of their term as Officers and Trustees.

During this interval, I attended, in addition to the WCN 2005 in Sydney (as described in the President’s Annual Report), the 8th Annual Meeting of the Chinese Society of Neurology in Chong Qing from September 7th through the 11th, the 18th Annual Scientific Meeting of the Hong Kong Neurological Society on October 29th and 30th, the 27th Annual Convention of the Philippines Neurological Association from November 23rd through 26th, and the 2nd International Neurology Forum in Vietnam on December 4th and 5th. It was my pleasure to take part in these Asian conferences at the conclusion of my WFN Presidency, as they all signaled a new initiative to combine forces to improve the level of neurological practice in this region with emphasis on clinical neurology. The WFN advocates such practical sessions that contribute substantially for continued medical education of neurologists. I wish to take this opportunity to congratulate the organizers for a job well done and wish them continued success in promoting education and research unique to the respective area.

In concluding this report, my heart goes out to the delegates of national member societies who rendered warm and kind support for our venture with helpful feedback, and chairs and members of various committees who assisted the Trustees with multiple tasks throughout my tenure. The credit is certainly theirs for my term coming to a reputable finish. According to the signs of the Oriental zodiac, we are about to celebrate the beginning of the year of the dog, known for its escalating speed. With this spirit in mind, I hope the WFN will take a giant jump forward in 2006 and beyond under the new administration. With these thanks and with these hopes, I bid you farewell wishing you the best for the New Year.

Jun Kimura, MD
President, WFN
XVIIIth WCN—A Report

The XVIII World Congress of Neurology held in Sydney between 5 and 11 November 2005 was, by all accounts, an outstanding success. The Sydney Convention and Entertainment Centre, situated on the boardwalk of picturesque Darling Harbour, around from the world-famous Sydney Harbour, provided the perfect setting for this Congress. The SCEC complemented the relaxed conviviality among attendees and the high standards of the innovative teaching and scientific programme. The five main theme days were book-ended by the state-of-the-art Frontiers in Neuroscience lectures, which commenced each day, and the harbourside debates provided a relaxing, enjoyable and highly stimulating closing to end each day’s scientific programme in the evening. The overall depth of the programme was extraordinary with cutting edge neurology appropriately admixed with a broad range of topical lectures, symposia and presentations on global, ethical, regional, historical and practical neurological issues. The teaching courses held on the two days of the weekend prior to the commencement of the Congress and the breakfast sessions were targeted at both young and practising Neurologists respectively. More young Neurologists were offered free or reduced registration fees to this Congress than any other previous World Congress of Neurology. The organisers were delighted with the response in both these areas.

As a consequence of the high standard of topical thematic issues, there was an intense media interest in the Congress, which enabled neurology in general and a number of specific topics to be exhibited to the broader community. Each day press conferences targeted diseases such as epilepsy, multiple sclerosis, stroke, dementia and Parkinson’s disease. Thanks indeed are due to those who contributed to this important aspect of the Congress.

If there was one complaint to be made, it was that the programme offered so much that decisions by delegates on where to go next were often difficult to make. This was especially so given the limited time between the major sessions in the mornings. Future Congresses could do well to note this small point.

Attendees were also treated to a magnificent social programme beginning with the Opening Spectacular on the Sunday evening. This commenced with a lecture by Charcot to his students on the origins of neurology and its potential in the future. It was then followed and complemented by the gifted comedians, the Umbilical Brothers, who highlighted the quirks of the neurological exam, setting new heights for teaching techniques. Short welcoming speeches were given by Geoffrey Donnan, Chairman of the Congress Organising Committee, David Burke, President of the Australian Association of Neurologists, Jun Kimura, President of the World Federation of Neurologists, and William Carroll, President of the Congress. These were followed by the world-famous jazz musician, James Morrison, complemented by an outstanding performance on the didgeridoo by Matthew Donnelly. On the Tuesday night the Congress was treated to an orchestral concert at the iconic Sydney Opera House, where the Sydney Symphony under conductor Richard Gill performed Schubert’s Symphony No. 5 and Harold in Italy by Berlioz.

Wednesday evening saw the new concept for Congress dinners begun in London in 2001 flower spectacularly in Sydney. Guests were treated to a plethora of different thematic entertainment areas, cuisines and quality beverages punctuated by live entertainment providing for a full range of tastes in a carnival atmosphere. It was an evening of enjoyment and socialising to complement the Congress.

The Thursday of the Congress saw an addition to the regular programme, with the beginning of the Neurological Tournament of the Minds. Four eminent Neurologists from each of 21 countries participated in the runoffs for a place in the finals. Six successful teams made it through to the final on the Friday, where the United Kingdom triumphed over Canada.

The Closing Ceremony was brief, to the point and characterised by the now familiar relaxed but efficient Australian organisation. It ended with the invitation from Professor Niphon Poungvarin to attend the XIX World Congress of Neurology in Bangkok, Thailand. Congratulations are due to the Australian Association of Neurologists, the World Federation of Neurology, the combined Organising Committee, speakers, attendees, sponsors and exhibitors for an outstanding World Congress.

J.S. Chopra, G.A. Donnan, W.M. Carroll
WFN Research Group on Organization and Delivery of Neurological Services

Enlarged Executive Committee meeting, Sydney, WCN 2005

Minutes

The meeting was attended by Bosko Barac (Zagreb, Croatia), Leontino Battistin (Padova, Italy), Jagjit Chopra (Chandigarh, India), Vida Demarin (Zagreb, Croatia), Marinko Dikanovic (Slavonski Brod, Croatia), FranzGerstenbrand (Vienna, Austria), Athasit Vejjajiva (Thailand), Suthipun Jitpimolmard (Khon Kaen, Thailand), Dragutin Kadojic (Osijek, Croatia), Ivo Lusic (Split, Croatia), Jayantha Bennet Peiris (Colombo, Sri Lanka), BhimsenSinghal (Mumbai, Bombay, India), ZlatkoTrkanjec (Zagreb, Croatia), David BVodusek (Lubljana, Slovenia). The meeting was chaired by Bosko Barac and Jagjit Chopra.

The Chairman expressed his personal gratitude to all the eminent colleagues, who supported the idea of the necessity of continuation of the activities of the RG ODNS, from the very beginning, when the RG was founded, to the present time. He accentuated the points exposed in the documents presented in the WFN Web Sites: www.wfneurology.org/research_groups.htm—25. In the continuation, during the preparation of the London WCN, the EC RG was active in organizing a meeting with the representatives of the WHO in line with the proposal of the then Chairman WFN Research Committee Professor Munsat (in 1989), that the RG organizes a joint meeting (Conference) in coordination with the neurology officers of the WHO in order to make joint efforts to improve the neurology services worldwide. Primarily the aim would be to assure a minimum level of staff and organization, necessary to achieve better neurological services for improving mental health and neurological status, often degraded due to afflictions of neurological system in the population of developing countries.

With this purpose Chairman Barac and Secretary-Treasurer Lechner organized a visit to the headquarters of the WHO, where they had a meeting with then WHO neurology officer Dr. Filipko, discussing the need that the activities of the WFN RG, deliberated and published so far, could be implemented through a good organization, officially discussed and verified by the bodies of the WHO. Neurologists are now able to disclose and make diagnostics of many nervous diseases and afflictions, which have effects on human behavior, mental status and sensory motor effectiveness: epilepsies, dementias, cerebrovascular diseases, and infectious diseases leading to the degradation of mental integrity, sensory and/or motor performance.

A fruitful discussion followed, in which the RG members explained important opinions and proposed some specific initiatives.

The discussants were: Franz Gerstenbrand, Jagjit Chopra, Suthipun Jitpimolmard, Jayantha Bennet Peiris, BhimsenSinghal, Leontino Battistin, Vida Demartin, David BVodusek.

The list of the new Executive Committee has been proposed as follows: Chairman: Bosko Barac. Co-Chairmen: Jagjit Chopra, Athasit Vejjajiva, Franz Gerstenbrand, R.P. Sica, Rubio Donnadieu, Philip Gorelick, Leon Prockop, J.B. Peiris. EC: BhimsenSinghal, Ben Hamida, Ioannis Milonas, Suthipun Jitpimolmard, David BVodusek. Secretary: Vida Demarin Secretary-Treasurer: Leontino Battistin (proposed for the RG Liaison officer to the WHO).

The Chairman expressed thanks on behalf of the elected officers of the RG for the trust placed in them, hoping that the new EC will be efficient in achieving the goals of the RG.

Conclusions: 1. In line with the proposed ideas and initiatives the RG will continue its activities along with the past experience and the accepted programs of activities, taking into account the new proposals and the regional or local needs of neurologists in different regions of the world. 2. The RG ODNS will organize, when possible, regional conferences or symposia, possibly in coordination with the other WFN Research Groups, as a continuation of the two Conferences, or possibly as a specialized session during the national or regional meetings, directed towards the investigations of the best possible, rational organization for specific problems in neurological diseases, appropriate to a certain regional or cultural tradition. 3. Relating to big social problems in the present world, neurologists can perform an important part in these functions, together with psychiatrists and social services, preventing the deterioration of mental health in endangered individuals and groups worldwide. Therefore our RG ODNS must strengthen such activities and initiate, when possible, with the authority of the WFN, possibly through the WHO bodies, systematic preventive activities, in our times of big miseries and enormous human agonies worldwide. The RG ODNS can help with WFN functions, especially in the less developed countries, and so to support a stronger engagement of the WHO in solving the present problems of mental...
health as an important element of social stability worldwide. The EC member should function as a delegate of the RG ODNS, as a liaison officer of the RG in the WFN bodies and to the WHO in specific questions. 4. The Executive Committee (EC) should be modified with several Co-Chairmen, responsible for different areas of the world or for specific problems in the organization of neurology. 5. Research activities of the RG should be made easily accessible to all members of the RG and possibly of the WFN, which is possible by present information technologies and the Internet, and which would enormously increase the efficacy of the WFN and of the medical and health services worldwide.

Bosko Barac
Chairman, WFN ODNS

WFN Junior Fellowship Reports

I would like to convey my sincere thanks and gratitude to World Federation of Neurology for awarding me with the travelling fellowship scholarship. I attended the XVIIIth World Congress of Neurology in Sydney from 5-11th November 2005. It was a great experience for a young neurologist like me. I attended the following educational courses: 1) Child neurology for adult neurologist. 2) EMG update. 3) Use of Botulinum Toxin in Neurology. 4) Vertigo and neuro otology. These courses helped me to refresh and update my clinical knowledge and will help my clinical practice. The frontiers of neuroscience and main theme lectures were elaborative and gave me new insight to the subject.

Nirmalendu B. Bhowmik
Dept of Neurology, BIRDEM Hospital
Shahbag, Dhaka

I sincerely thank the World Federation of Neurology for the Travelling Fellowship to attend the International Epilepsy Congress in Paris from August 28 to September 1, 2005. This was my first conference outside Asia. It was a great experience personally meeting and interacting with the leaders in the field of epilepsy in the beautiful city of Paris. All the sessions were well planned and of rich academic standards. The sessions on epilepsy genetics and childhood epilepsies were two of the many such well planned exercises. I also presented a scientific paper at the meeting. The muscle and nerve and multiple sclerosis topics and the Frontiers of Neuroscience Lecture, without doubt, was a great experience. The spectacular welcome reception included a trip in time that took us to Professor Charcot’s classrooms and left us with a sensation like one says in Portuguese ‘saucade’ (indescribable sensation of memory and emotion), THANK YOU to the WFN and to Elsevier.

Otto J. Hernandez Fustes
InNeuro, Hospital Pilar, UTP
Curitiba, Brazil

As winner of a GlaxoSmithKline Junior travel fellowship award, 2005, I attended the XVIII World Congress of Neurology in Sydney, Australia held on November, 2005. I sincerely thank WFN for awarding me the Junior Travel Fellowship to attend this congress. I also thank Glaxo-SmithKline for giving me the opportunity to attend the Congress. I had a golden opportunity to hear and meet the world’s leading experts in all fields of neurology and updated my present knowledge. This is a big exposure for my future career. I enjoyed many of the sessions; free discussion of Young Neurologists in training group is a fantastic way to exchange knowledge. I had a chance to meet Dr. Jun Kimura, President of the World Federation of Neurology because of this congress and I enjoyed Sydney. I wish WFN will open up more opportunity for the young neurologists especially for the third world countries.

Aminu Rahman
Department of Neurology
BIRDEM Hospital, Dhaka, Bangladesh

It was a matter of great pride and privilege for me to receive the prestigious Elsevier-WFN Junior Travelling fellowship award for attending XVIIIth World Congress of Neurology, Sydney, Australia as a birthday gift on October 4. With this, I had an opportunity to discuss my field
of interest i.e. Cerebral venous sinus thrombosis with the leaders in this field. I could interact with like-minded people working on same subject. The idea of this presentation was to highlight the safety and efficacy of this therapy in the management of CVT. It was heartening to know that many people the world-over are also trying this therapy with good outcome. Apart from my field of interest, the quality of lectures and the vast topics covered in the congress were also of a high standard and one could update all the new things happening in the field of Neurology, both in research and on the clinical side. Overall, I feel deeply satisfied after attending the conference and thank the World Federation of Neurology for the generous help offered in making this dream a reality.

Manish Modi
Chandigarh, India

The National Centre for the Research and Rehabilitation of Hereditary Ataxias in Cuba, and I in particular, are grateful to the WFN for supporting Dr. Sanchez Cruz so that he participated in the 16th International Symposium on the Autonomic Nervous System in Los Cabos, from October 6 to 9, 2005 (American Autonomic Society). An article of the investigation presented by Dr Sanchez Cruz (Autonomic Nervous System Function is Controlled by the Polymegatamine Size and the Time of Evolution in Spinocerebellar Ataxia Type 2) will be sent for publication possibly in the Journal of the Neurological Sciences or in another Journal of the WFN.

Luis Valazquez Perez
Director
Centre for the Research and Rehabilitation of Hereditary Ataxias
(CIRAH in Spanish), Cuba.

I sincerely thank the WFN for awarding me a grant to attend World Congress of Neurology in Sydney, from 5th November to 11th November, 2005. I attended the scientific sessions and had an opportunity to interact with the experts on Stroke and Dementia. As I am working on Vascular Dementia, I had a great opportunity to update myself which is helpful for me and my Institute. This was my first international exposure to a Neurology Conference. I had two poster presentations, namely Neuroleptic Malignant Syndrome and Medication Overuse Headache. My work was appreciated. I enjoyed my stay in Sydney.

Suman S. Kushwaha
Assistant Professor (Neurology)
Institute of Human Behavior and Allied Science, Delhi, India

The World Federation of Neurology CME Evaluation Project
A Report

The first phase of the evaluation research study has now been completed. I would like to take this opportunity to thank all those who responded to my emails and forwarded the consent forms. A small number of participants were selected from this group for a key informant interview. The data from this stage is now being analyzed and will be integrated into the second phase of the study.

All the WFN education committee members and national CME coordinators will be invited to complete an online survey in early December. Completion of these surveys should take less than 15 minutes. The online survey is meant to capture the current WFN CME program in your country and your motivation for enrolling in, and expectations of, the program and whether the program has met these expectations. I am hoping to get a 100% response rate (hopefully you all will give 15 minutes of your valuable time to this important activity).

The results from the interviews and surveys will be presented to WFN Education Committee members at the AAN meeting in San Diego in April, 2006, at a special focus group session. This will help us to discuss and reflect on what is working and what needs to be improved.

The WFN CME evaluation study has raised the profile of the WFN CME program. Many in the Global CME/CPD community are looking at the WFN experience as a great learning model for other global CME initiatives.

I presented a poster (Authors: Sriharan, Munsat, Brough) on the WFN CME evaluation project at the Tenth Annual Meeting of the Global Alliance for Medical Education in New York, in June 2005. I will be presenting another poster titled ‘A model for Delivering International CME Programmes (Authors: Sriharan, Munsat)” at the Alliance for Continuing Medical Education meeting in San Francisco in January 2006.

Abi Sriharan
Consultant Education Assessment Project, WFN

President’s Annual Report, 2005

The end of 2005 marks the completion of duties for the current Management Committee elected at the Annual General Meeting (AGM) held in conjunction with the World Congress in London. Thus, I am writing the last annual report in my capacity as President. I have asked the Officers, Trustees, and Committee Chairs to prepare a year-end report, detailing our work, which will appear either in this or subsequent issues of World Neurology. As my own activities have already been described in the President Columns published in earlier issues, I will today touch only upon the major events of the past year.

This year’s Annual General Meeting (AGM) took place during the 2005 World Congress of Neurology (WCN, Sydney, Australia). I wish to first thank Drs. William Carroll (President), Geoffrey Donnan (Chairman), Sam Berkovic (Chairman, Scientific Program), Stephen Davis (Chairman, Education Program), Richard Macdonell (Secretary), John Morris (Chair, Local Organizing Committee), Shonna Peasley (Congress Manager) and all others connected with the WCN 2005 for organizing superb scientific and social events, and for incorporating the WFN AGM into an already tight schedule. I know it took considerable planning to accommodate the Council of Delegates (COD) meetings and various WFN committee functions. There was maximal attendance by Delegates...
without compromising their participation in the WCN programs. A large contingency of Delegates attended the AGM, some from member societies that are traditionally less able to contribute to the affairs of WFN. Thank you to everyone involved for your effort.

The Council of Delegates met on November 6th. After a welcome by the President, and a roll call by Richard Godwin-Austen, the Secretary-Treasurer General, a moment of silence was observed in memory of Drs. Donald Paty and Victor Soriano. The Delegates then approved the minutes of the previous AGM held on September 5, 2004, the accounts of the Federation for the last financial year ending on December 31, 2004, and the recommendation to reappoint Messrs Griffin Stone, Moscrop & Co. as auditors of the organization. The important task of selecting the new Management Committee ensued. Out of many eminently qualified candidates, the COD elected Dr. Johan Aarli (Norway) as President and Dr. Vladimir Hachinski (Canada) as First Vice President, both starting in 2006, and Dr. Julien Bogousslavsky (Switzerland) as Secretary-Treasurer General, starting in 2007. Dr. Marianne de Visser (Netherlands), the longest in office of the three Trustees, retired this year, and was re-elected for the second term. She will join Drs. William Carroll (Australia) and Julien Bogousslavsky (Switzerland) whose terms remain, and Dr. Roger Rosenberg, a newly co-opted Trustee. The Delegates also approved two Regional Directors, Drs. Ashraf Kurdi for the Pan Arab Region and Jacques De Reuck, President of the European Federation of Neurological Societies as nominated by their respective regions. The next COD in 2006 will consider the remaining Regional Directors, including Dr. Bhim Sen Singhal, who will be nominated by the Asian Oceanic Association of Neurology. The delegates from six countries (Czech Republic, France, Italy, Mexico, Spain and Thailand) then addressed the COD with their bids. Finally, Dr. Marianne de Visser, as Chair of the Membership Committee, proposed the Uganda and Vietnam Neurological Associations for membership in the WFN, with both receiving unanimous approval.

The COD resumed on November 10th to discuss all reports that were published in the March issue of World Neurology as part of the audited accounts for 2004 submitted to the UK authorities. The committee chairmen present in Sydney had the opportunity to elaborate more recent activities they considered important, and to invite questions from the Delegates. The discussion included the recent development concerning the future administration of the WFN. During the 2004 AGM, the COD recommended that WFN enter contractual negotiation with a Brussels-based Professional Management Company (PMC) as the WFN administrative partner. Following lengthy negotiations, we were unable to reach an agreement that would have secured the much needed continuity of the administrative process. The Trustees, realizing that we were testing the water with no prior experience, proceeded cautiously to avoid a premature decision without fully assessing any potential drawbacks of this type of association. We still favor the general concept of a partnership with a PMC. The new administration will explore this possibility further as one of their priorities. The COD then took up suggestions from Drs. Sarosh Katrak (India) and Ricardo Nitrini (Brazil) on the selection of speakers for the WCN, and from Dr. Amos Korczyn (Israel) regarding the finance of WFN. At the conclusion, Keith Newton announced the venue of the WCN 2009. I congratulate the Thai Society for their successful bid for the next meeting in Bangkok on October 24th-30th, 2009 and wish the best for its anticipated success. I would also like to thank the other contenders for demonstrating an interest to host the Congress and allowing their names to be put forward to contest the post.

In addition to COD, most WFN Committees met in Sydney. These included the Finance Committee (Mark Hallet), Fundraising Committee (Julien Bogousslavsky), Management Committee (Jun Kimura), Membership Committee (Marianne de Visser), Nominating Committee (Thomas Brandt), Public Relations and WHO Liaison Committee (Johan Aarli), Publications and Website Committee (Piero Antuono), as well as the Editorial Board for World Neurology (Jagjit Chopra). Dr. Ted Munsat, as Chair of the Education Committee, held the Education Coordinators meeting to exchange views from member societies participating in the WFN CME program.

During the past year, various WFN committees worked hard to achieve improved world recognition of the role of neurologists in treating neurological disorders, as summarized in their respective reports. As Chair of the Public Relations Committee and liaison with WHO, First Vice President Aarli made a concerted effort to improve our overall tactics for facilitating patient access to neurologists in less affluent countries with publication of the Neurology Atlas. Dr. Bogousslavsky spearheaded a project to collect available population-based stroke data working with the World Health Organization and the International Stroke Society. The Research Committee under the direction of Dr. Rosenberg continued with the internet review of recent advances in therapeutic regimens in each discipline represented by some 30 research groups on the WFN site (www.wfneurology.org). The Education Committee, with Dr. Munsat as Chair, implemented an increasing number of training programs on a global scale. These include CME programs in 36 countries based on the distribution of Continuum generously donated by the American Academy of Neurology, an educational program in Zambia under the direction of Dr. Gretchen Birbeck,

To take office from January 1, 2006

President
Johan A. Aarli,
Norway

First Vice-President
Vladimir Hachinski,
Canada

Trustee
Marianne de Visser,
Netherlands

Secretary-Treasurer
Julien Bogousslavsky
(Take up office from January 2007)

Venue for XIXth World Congress of Neurology, 2009
Bangkok, Thailand
Neurology in Pakistan

Neurology is a specialty which encompasses a large number of diseases extending from simple headache to cerebrovascular disease, inflammatory and non-inflammatory diseases to a large group of congenital and hereditary disorders. Knowledge of how the brain operates, its connections, and details of how it impacts on the various functions of the nervous system are being unraveled but a lot more still needs to be understood. The new diagnostic techniques and their refinement in the last few decades have changed the management of so many disorders which at time were considered untreatable. The revolution in the imaging techniques like MRI and PET scan has helped enormously in the field of neurosciences. The syndromes are being converted into definite entities of disease with the better understanding of pathophysiology. Now the window of opportunity to manage acute stroke at the earliest possible time is changing the untreatable disease. Emergency neurology is establishing itself as a separate specialty by itself.

Genetic analysis of CNS disorders has set out upon a new strategy for prevention of these disorders and the time is coming up rapidly whereby even genetic manipulation will be a reality. The era of a general physician to treat all medical disorders including Stroke, Epilepsy, Parkinson disease and other CNS disorders is changing with time. It is not possible for a general physician to treat myriads of diseases with highly variable diagnostic techniques and their implications. Therefore, the role of specialty is ever increasing. As I mentioned the concept of active management of ischemic stroke in the earliest possible time needs a specialist who could work in a team and take immediate and prompt diagnosis and management decisions.

In Pakistan, the perception of the patient with regard to who should manage him/her is also changing. The concept of specialty and its importance is being realized by the general physician as well as the people at large. The general physicians are realizing that the neurologist would be in a better position to manage the complex neurological diseases. In developing countries like Pakistan, the role of the specialist Neurologist is even more important. In the developed world there is about one neurologist for a population of 20,000. Pakistan is one of the largest populous countries in the world with approximately 150 million inhabitants and about half the population less than 20 years of age. The total number of qualified neurologists is about 70 who are practising in the seven largest cities of the country. The approximate ratio is one neurologist for a population of 2 million. The people have to travel long distances to consult these few neurologists and at the most for chronic disorders or when the disease has taken its toll.

It is obvious that if we could train and provide qualified neurologists even at the tertiary care hospitals of the country, the management of many acute and sub acute neurological disorders would be achieved. At the moment there are only 6 institutions in the whole country which are offering Neurology residency programs. The total numbers of trainees in these institutions are 6 per year. It shows the dismal and alarming situation for the specialty. In the developing countries like Pakistan, acute and chronic CNS infections are quite common and cause significant morbidity and mortality. Not to mention the CNS tuberculosis which affect each and every part of the nervous system and if timely diagnosis and management is not done the squeal of disease is horrible.

There is urgent need to promote the specialty and provide well-trained specialists at least in larger tertiary care centers of the country in the first phase. There is urgent need of qualified Neurologists for undergraduate and postgraduate teaching and education so that we could keep pace in the field of neuroscience. The responsibility for prioritizing and implementing the policy lies with the government and partly with the teaching institutions of the country, both in government and the private sector. However, like any developing country, government priorities are not so far sighted. There is dire need of international help and partnership from institutions and the community of neurology to develop liaison with institutions of these countries.

Prof. Shahid Masud Baig MD, FRCP, PhD
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14th European Stroke Conference (ESC) in Bologna

A Report

At the 14th European Stroke Conference (ESC) in Bologna interesting advances in research on stroke were presented. As usual, the selection of posters and oral sessions highlights the major advances in the field. The following summary highlights some of the more significant presentations that might have an impact on therapeutic approaches and management of stroke patients.

Clinical trials: In Bologna were presented the results of the joint analysis of two phase II trials on desmoteplase in acute ischemic stroke with treatment 3 to 9 hours after stroke onset (DIAS; European/Australasian study/DEDAS; US twin study). MRI was used in all patients. DIAS demonstrated dose dependant beneficial effects on reperfusion and 90 days clinical outcome in patients treated with desmoteplase 3 to 9 hours after stroke onset. DEDAS confirmed the results for the 125 µg/kg dose, whereas the 90µg/kg dose
appeared less effective than in DIAS. There were a very low rate of symptomatic intracranial haemorrhages in the doses investigated. Reperfusion and clinical outcome were significantly improved with the 125 µg/kg dose. A larger study, DIAS-2 using perfusion CT for diagnosis in a larger patient population, will try to confirm these promising results.

The results of the WASID (Warfarin versus Aspirin for Symptomatic Intracranial Disease) study showed that among patients with symptomatic intracranial stenosis, the risk of stroke in the territory of the stenotic artery is greatest with stenosis > 70%, particularly among women. Stroke rather than TIA at presentation and recent symptoms also portend greater risk. Age, race, location of stenosis, vascular risk factors and treatment assignment did not independently impact.

Until now, no effective neuroprotectant was known in cerebrovascular diseases. The results of the SAINT I study using NXY-059, a neuroprotectant with free trapping properties, were presented in Bologna. A statistically significant reduction versus placebo on the primary outcome of disability after an acute ischemic stroke (p=0.038) was found measured by the Modified Rankin Scale (MRS). However, on the National Institute of Health Stroke Scale (NIHSS), there was no significant difference in measurement of change in neurological impairment between the treatment groups. The treatment was well tolerated with adverse events similar to the placebo group. The SAINT II study is designed to confirm the tolerability and safety of this agent which will also be tested in intracerebral haemorrhages (CHANT study, Cerebral Hemorrhagic And NXY-059 Treatment).

**Acute Stroke**

In a study comparing 55 patients receiving rtPA in 0-3 hours after stroke onset and 52 patients within 3-4.5 hours, Uyttenboogaart found no difference in mortality and symptomatic hemorrhage rate between both groups. These results seem to confirm that administration of rtPA between 3-4.5 hours after onset is safe, but further studies must confirm that the efficacy is comparable between both groups. The data also suggested that patients over 80 years should not be excluded from thrombolysis.

At the moment, there is increasing evidence that transcranial Doppler (TCD) may increase the benefit of rtPA treatment. In a study based on 103 patients which MCA occlusion, Molina found that microbubbles (MB) may improve outcome in association with TCD and rtPA by lowering the threshold for cavitation.

Large malignant middle cerebral infarct may be complicated by a severe life-threatening brain oedema with mass effect. Treatment with hemicraniectomy and/or hypothermia may be proposed in selected patients. The results of this study suggest that a combined therapy of mild hypothermia and hemicraniectomy in malignant brain infarction does not imply additional risk by side effects and improves quality of life as compared with hemicraniectomy alone.

Predictors of symptomatic intracranial haemorrhage after intraarterial thrombolysis were analysed by Brekenfeld. The authors found that poor collaterals, proximal vessel occlusion and early CT signs that indicate larger infarcts as well as elevated diastolic blood pressure on admission and higher urokinase dose increase the risk of symptomatic intracranial haemorrhage. With brain CT or MRI alone, it may be difficult to establish if intracerebral bleeding after rtPA thrombolysis is related to treatment or not.

**Emmanuel Carrera, MD, and Julien Bogousslavsky, MD**

## REGIONAL CONFERENCES

### 13th Annual Conference of Indian Academy of Neurology

Jaipur, the pink city of India, had the unique distinction from 23rd to 25th September 2005 of hosting one of the best attended meetings of the Indian Academy of Neurology, the 13th annual conference.

Besides the eminent national faculty from every part of the country, the international luminaries included Prof. Jun Kimura (Japan), Prof. Charles Warlow (U.K.), Prof. Marie Bousser (France) and Prof. Ashok Verma (U.S.A.). The conference had many scientific deliberations including CME, guest lectures, symposia, award paper sessions, platform and poster presentations. In all 150 abstracts were discussed in various presentations. Prof. J.S. Chopra, Prof. N.H. Wadia and Prof. B.S. Singhal were the National advisors to IANCON 2005.

The conference started with CME on 23rd September covering topics like investigative and diagnostic Neurology, HIV related neurological syndromes, Hyperammonemic states and encephalitis. In symposium talks were given on traumatic brain injury, new concepts for treatment on dural-arteriovenous malformations and inflammatory myopathies. A MCQ session was held for postgraduates. Day two started with guest lectures on differential diagnosis of peripheral neuropathy and on advancements in interventional neurology. Platform and poster presentations were going on simultaneously. The Presidential oration was delivered by Prof S.M. Katrak and the Dr Anupam Das Guptar oration by Prof. Jun Kimura on the clinical and electrodiagnostic assessment of facial weakness. Symposia were held on pearls and pitfalls in clinical neurology cover-
British Neurology, 1920-1965
A Neurologist’s Labours

In the Rockefeller Medical Library at the National Hospital for Neurology, Queen Square, there is a video titled simply: ‘History’. Any casual viewer of the film’s ten minutes might note only its amateurish attributes: the lack of sound, the unsteady hand of the camera operators, the handwritten captions linking sequences arbitrarily together, and finally its ecletic ‘insider’ subject matter. The film creates bemusing questions. Why, for example, did the film editor place so much emphasis on an old bespectacled man in his garden? Were two Bentleys parked outside a hospital really cinematically noteworthy?

No one is sure why the film was created. Some guess it was used during the 1957 centenary celebration of the National Hospital for Neurology, Queen Square. Certainly the neurologists appearing in the film are recognizable figures in the history of British medicine. The figures are from a time when consultant physicians still wore silk ties, accompanying lounge suits and soft Homburg hats. And rode in chauffeur-driven cars to the doors of their hospitals where an entourage of students, nursing staff, and junior assistants greeted them.

Whatever its original purpose, this film captures such cultural styles from the era of British supremacy in medical neurology and neurological research. It thus blows a fresh, although only impressionistic breeze, into the dusty settings housing the institutional records, correspondences, and diary entries typically cherished by medical historians.

The eccentricities and insider-jokes on display in this film, which would have been instantly recognizable to almost every neurologist across the globe forty years ago, are almost impossible for all but the most senior of neurologists to identify today. In the past, neurologists from San Francisco, New York, Baltimore, Paris, Munich, Breslau, and Montreal (to name but a few of the numerous locations from where post-graduate students attending the National Hospital post-graduate neurology course originated) would have been personally, or at least anecdotally, familiar with the wit and humour subtly displayed throughout the film. They certainly would have been familiar with the contributions made by the film’s main characters. For instance, the commanding and easily-irritated elderly Gordon Holmes (1876-1966) in his famous garden, ordering his equally famous student Francis Walshe (1885-1973) to trim the hedges, would have drawn laughs and groans at any international gathering of neurologists viewing the film. All would have known of Holmes’ prickly reputation and perhaps too stern approach to students and patients alike. No one would have made the mistake of believing Holmes’ expectations of a student in his private garden were less than those he had of them in his wards before he retired.

The sentimental ploy of showing Holmes in his garden surrounded by bursts of colour on a spring morning would also have ushered in a host of other memories of his leadership in British neurology to such a gathering. His career had spanned the exciting period of British supremacy in neurology and neurological research—a time when Britain had been at the forefront of advancements in the medical knowledge of the brain and nervous system. Paralleling these advancements, neurological leaders in Britain like Holmes had campaigned for profound social changes in the organisation of their medical specialty. Before the interwar period there had been only three small special hospitals for nervous diseases in London. Post-graduates in medicine, with training in neurology, typically found only limited and competitive space for employment in the specialty in hospitals, and they frequently held positions as general physicians. In the 1930s this changed, mainly as a result of the efforts of physicians at the National Hospital like Holmes. A number of special departments and posts for neurologists sprang up in hospitals across the country. Research money from the Rockefeller Foundation and the Medical Research Council flooded into the specialty. Philanthropists like Bernard Halleys-Stewart and Lord Nuffield endowed fellowships and prizes for researchers in neurology. The formation, for example, in 1933 of a new, elite professional society, the Association of British Neurologists, marked the beginning of a new chapter in the history of this medical specialty. For it was only around this time that the broader medical culture of Britain came grudgingly to accept neurology’s divergence from general medicine.

Thus, the film commemorates a change in the nature of a medical specialty. British neurology in the twentieth century had transformed from an existing state of knowledge about the nervous system into a recognized medical specialty. While Holmes had played an important role in augmenting that change, more important still, was that his career had encompassed the transformation. For his contemporaries, Holmes had become a symbol of both an old world’s knowledge and the new world’s social order of medicine.

Stephen Casper
Wellcome Trust Centre for the History of Medicine at University College, London

Visit the WFN website at http://www.wfneurology.org
BOOK REVIEWS

Stroke Genomics—Methods & Reviews

Editors: Simon J. Read and David Virley
No. of pages: 351
Price: US$ 125.00
Publication date: 2004
Publishers: The Humana Press

Gene function in human neurological pathophysiology is an important subject which has been discussed in many books. However, the authors in this book have further elaborated on this subject, be it gene therapy in neurological disease, stem cell transplantation after MCA occlusion, endogenous brain protection, production of transgenic and mutant mouse models, mutant animal model of stroke and gene expression, practicalities of genetic studies in human stroke, effective analysis of genomic data and many other chapters in this multi-author book. The book is divided into four parts of introduction, preclinical models, gene manipulations and clinical paradigms and assessing different expression. It is an interesting book which is good for reading by neurologists and those interested in gene therapy.

Jagjit S. Chopra
Editor-in-Chief

Seizures in Critical Care: A guide to diagnosis and therapeutics

Editor: Panayiotis N' Varelas, MD, Ph.D.
ISBN: 1-588-29-342-4
No. of pages: 380
Price: US$ 125.00
Publication date: 2004
Publishers: The Humana Press

A large number of epilepsy patients are admitted to intensive care units (ICU) especially flowing status epilepticus. Neurologists, paediatricians and general physicians invariably have to care for such patients and the majority of the patients do well. However there are a large chunk of patients who need ICU care and the physicians trained in critical care medicine have to handle such patients during devastating events. This book in 14 chapters elaborates on pathophysiology of seizures, stroke and critical care seizures, trauma and seizures, brain tumours of seizures, and seizures in hypoxia, renal and hepatic failure, Organ transplant recipients, hypertension, eclampsia, brain infections, electrolyte disturbances, drugs, alcohol, and a few more conditions. This book is essential for the ICU library and will help those who handle such patients in diverse environments. An excellent book for all medical practitioners.

I.M.S. Sawhney
Assistant Editor

Alzheimer's Disease

Editor: Paul Dash, MD and Nicole Villemarette-Pittman, PhD.
ISBN: 1-932603-12-3
No. of pages: 222
Price: US$ 19.95
Publication date: April 2005
Publishers: Demos Medical Publishing (An American Academy of Neurology Publication)

Several books have been published on AD and this book is an addition to already existing information on this disease which is mostly a disease of the elderly. This pocket book edition highlights on the understanding of AD, how the memory works, diagnosis and stages of AD. Differential diagnosis of this disease and its causes are discussed in detail in addition to its anatomy, biochemistry and neuropsychiatrics. Medication and management of AD are detailed. This is a useful pocket edition for neurologists and general physicians.

Jagjit S. Chopra
Editor in Chief

CALENDAR

International Congress on Gait and Mental Function
3-5 February, 2006
Madrid, Spain
Website: www.kenes.com/gait/

Third Mediterranean Congress of Neurology
8-22 February, 2006
Cairo, Egypt
Website: www.medneuro.com/

4th World Congress for Neurorehabilitation
12-16 February, 2006
Hong-Kong, China
Website: www.wfnr.co.uk/docs/congress_world.htm

International Stroke Conference 2006
16-18 February, 2006
Kissimmee, FL, USA
Website: strokeconference.americanheart.org/portal/strokeconf.

World Parkinson Congress
22-26 February, 2006
Washington, DC, USA
Website: www.worldpdcongress.org/

The Second Annual Update Symposium on Clinical Neurology and Neurophysiology
March 6-8, 2006
Conference Secretariat
ISAS International Seminars
POB 574
Jerusalem 91004, Israel
Fax: 972-2-6520558
http://www.neurophysiology-symposium.com

2006 Annual Meeting of the American Society of Neuroimaging
2-5 March, 2006
San Diego, CA, USA
Website: www.asnweb.org/

58th Annual Meeting of the American Academy of Neurology
1-8 April, 2006
San Diego, CA, USA
Website: www.aan.com

16th Migraine Trust International Symposium (MTIS)
18-20 September, 2006
Sophie Mosely, Senior Conference Manager, Hampton Medical Conferences Ltd.
113-119 High Street, Hampton Hill Middlesex, TW12 1NJ, UK
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- Pediatric Neurology: Principles & Practice
- Clinical Neurophysiology of Infancy, Childhood, and Adolescence
- Surgical Assessment of the Epilepsies, with Clinical Neurophysiology and Functional Imaging
- Magnetic Stimulation in Clinical Neurophysiology
- Practical Guide to Epilepsy

2004 ISI Impact Factor of 2.538!

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International Stroke Society

ACTIVITIES TODAY

Promoting prevention and care of persons with stroke and related conditions

The major mechanism to accomplish this activity is to sponsor the World Congress of Stroke which is held over a 3-4 day period and has lectures, poster sessions, and workshops devoted primarily to the research, diagnosis and management of strokes. Not only many of the over 2,000 members attend but other specialists and generalists interested in strokes such as neuroradiologists, cardiologists, interventional radiologists, neuroepidemiologists, basic scientists, vascular and neurosurgeons. Lecturers and speakers from throughout the world come and give a talk on all aspects.

Fostering the best standards of practice: In addition to the World Congress of Stroke, our website and the journal which is to be launched soon are the other methods to enhance the educational aspects of stroke to professional health care workers and to the lay public as well. ISS is seeking for the way for individuals in the world to learn not only up-to-date stroke diagnosis and treatment strategies, such as endovascular techniques and stenting, but laboratory research on stroke prevention and management including neuroprotective mechanisms.

Education in collaboration with other international, public and private organizations: Aside from “sponsoring” the World Congress of Stroke in which ISS members, specifically the Scientific Committee, decide on the symposia, topics, speakers, selection of posters and research presentations, the ISS “endorses” other regional and international stroke meetings, but does not participate in the program content, underwrite costs nor receive any of the profits from the meetings. The ISS has endorsed a variety of these meetings in recent years such as in Japan, India, USA, China, Georgia and Argentina, in order to develop the partnership with national or regional stroke associations from the view of educational programs. Those associations who wish their meeting to be endorsed by ISS, please make a contact to ISS Secretary, Dr. Bo Norrving (Bo.Norrving@skane.se).

WHO and ISS: The WHO Chronic Disease initiative: stroke prevention high on the agenda: The new report from the World Health Organization on Preventing Chronic Diseases: a vital investment is a major initiative with far reaching consequences. The report gives new projections on the burden of diseases as well as the economic impact. The situation is particularly grave in low and middle income countries. Stroke is high on the agenda in this initiative, being clearly preventable. Without urgent action, deaths from stroke will increase over the next decade by 12% globally—and by 20% in low-income countries. More than a third of those who survive a stroke will have severe disability. To halt the rising pandemic major life style factors such as physical inactivity, poor diet and tobacco use must be tackled. WHO is calling for global action on the rising epidemic of chronic diseases. As the first NGO at WHO whose mission is strictly devoted to stroke, ISS is actively joining this challenging work. ISS has an ongoing collaboration with the WHO and the World Federation of Neurology in the Global Stroke Initiative, which includes promotion of stroke surveillance systems and stroke prevention programs.

ANNOUNCEMENTS

The 2nd Helsingborg Consensus Conference “European Stroke Strategies” organized jointly by the ISS, WHO-Europe, the European Stroke Council and the International Society of Internal Medicine will be held in Helsingborg, Sweden, 22-24 March 2006 (www.umea-congress.se). The conference will prepare a new consensus document on stroke management in Europe, set new targets for the Year 2015, and develop an action plan that facilitates the implementation of policy recommendations.

Joint World Congress on Stroke organized jointly by ISS, Mediterranean Stroke Society and Southern African Stroke Foundation will be held in Cape Town, South Africa, 26-29 October 2006 (www.kenes.com/stroke2006/), under the chairmanship of Drs. Werner Hacke and Natan Bornstein. The deadline of the abstract submission is June 15, 2006.

6th World Stroke Congress organized by ISS will be held in Vienna, Austria 24-27 September 2008 (www.kenes.com/stroke2008), under chairmanship of Dr. Michael Brainin.

The International Stroke Society and Blackwell Publishing are pleased to announce the launch of the International Journal of Stroke in February 2006, edited by Prof. Geoffrey Donnan. (This first complimentary issue was distributed at the recent World Congress of Neurology in Sydney).

International Journal of Stroke is a welcome addition to the international stroke journal landscape in that it will concentrate on the clinical aspects of stroke with basic science contributions in areas of clinical interest. To facilitate the international nature of the journal, our Associate Editors from Europe, Asia, North America and South America will coordinate segments of the journal. Reviews of current topics will be broadly based to encompass not only recent advances of global interest but also those which may be more important in certain regions. There will be items of news interest from all parts of the world that relate to all areas of stroke.

- Prognosis and Management in the First Few Days After a TIA or Minor Ischaemic Stroke
- Acupuncture for Stroke in China: Needing More High-Quality Evidence
- Ultrasound Enhanced Thrombolysis for Stroke
- Intracerebral Hemorrhage: Effective Therapy at Last?

Published quarterly, the International Journal of Stroke will be available both online and in print.

ISS has been opening its association to National and Regional Stroke Societies! The ISS, which was founded in 1989 in Kyoto, Japan, is the only professional stroke society with a non-governmental organization (NGO) status at WHO. Though the ISS was mainly formed by individual membership and has been regarded as an individual-based society, ISS has been opening its door to National and Regional stroke societies by accepting them as “National Member” since 2001. In order to meet the increasing demands from national and regional societies, ISS has decided to encourage the affiliation of professional societies, inviting them as “National Member”. This invitation is not associated with any registration or membership fee, and is totally free of charge. Please let us know if your society wishes to accept our invitation. Besides, we will be happy to answer any question which you may have.

President: Julian Bogousslavsky (e-mail: julien.bogousslavsky@chuv.ch)
Secretary: Bo Norrving (e-mail: Bo.Norrving@skane.se)