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THE OFFICIAL NEWSLETTER OF THE WORLD FEDERATION OF NEUROLOGY

Raad Shakir Named a Commander of the British Empire in the U.K. New Year Honors List

Citation was for "services to global neurology"

COMMENTARY ON THE CBE AWARD FOR PROF. RAAD SHAKIR BY WFN PRESIDENT WILLIAM M. CARROLL

Prof. Raad Shakir has been a prominent figure in neurology in the United Kingdom for more than 20 years and was one of the key persons in the organization of the successful London 2001 World Congress of Neurology. His contributions to both neurology in the U.K. and to the World Federation of Neurology (WFN) have been witnessed by many.

He has provided dedicated service over many years aided by his multicultural education and experience. Together with his detailed understanding of the varied cultural sensitivities in the global neurological community, he has been a successful leader. Before being elected to the position of Secretary-Treasurer General of the WFN in 2009, he had

"I am honored and humbled by the CBE award for services to global neurology. This recognition from HM the Queen has been only made possible because of the dedication and efforts of all neurologists I have worked with from across the world, to whom I am indebted."

– Prof. Raad Shakir

assumed this position in 2007 on the unexpected retirement of the incumbent. He immediately displayed these skills and commitment in this new role. With then-WFN President Johan Aarli, he was able to negotiate an understanding with the Peoples Republic of China, which enabled the Chinese Neurological Society to join the WFN without fracturing the memberships of the Hong Kong and Taiwanese neurological societies. This was no easy task as two previous WFN presidents had been less successful. His WFN presidency commenced in



2014 and was marked by a commitment to empower the regional WFN organizations. This was crowned by the establishment of the African Academy of Neurology (AFAN) in 2015 and its first Congress in Tunis in early 2017. see RAAD SHAKIR page 2

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NATIONAL BRAIN WEEK 2020 IN INDIA

National Brain Week was organized as a virtual event this year on the background of the ongoing coronavirus pandemic.

PRESIDENT'S COLUMN

Prospects for 2021

BY WILLIAM M. CARROLL, PRESIDENT OF THE WORLD FEDERATION OF NEUROLOGY

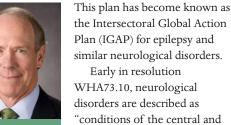
An Important Conjunction

s this column goes to press in the first issue of World Neurology for 2021, it is surprising to see the energy and the activities the WFN will be involved in after such a trying 2020. I will enlarge on the role of the WFN in the COVID-19 pandemic, but first I wish to highlight two important events that occurred late last year and early this year.

The first was the adoption by the World Health Organization (WHO) of

resolution WHA 73.10. As was communicated to all member societies in November and again in my column in December, this particular resolution was a landmark event. For the first time, neurological disorders were recognized by the WHO for what they are: a looming threat to individuals and societies, including both economic and personal burdens.

In common language, the WHO plans to develop an all-encompassing action plan to mitigate the effects of neurological disorders on brain health throughout life.



WILLIAM CARROLL, MD

that include epilepsy, headache disorders, neurodegenerative disorders, cerebrovascular diseases, including stroke, neuroinfectious/ neuroimmunological disorders, neurodevelopmental disorders and

peripheral nervous system

see PRESIDENT'S COLUMN page 3



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FROM THE EDITORS

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

elcome to the February 2021 issue of World Neurology. This issue begins with the news that Prof. Raad Shakir, immediate past president of the World Federation of Neurology (WFN), has been made a Commander of the British Empire (CBE) in the U.K. New Year Honors List, with a commentary on this remarkable honor provided by WFN President William M. Carroll

Next. Dr. Carroll updates us on the many activities planned for the WFN in 2021, including plans with the World Health Organization (WHO) and the WFN regional organizations, the Brain Health Initiative (BHI) and COVID-19, the WFN Needs Registry, the World Congress of Neurology (WCN) and the upcoming Annual General Meeting (AGM) of Council of Delegates meeting COD meeting planned for WCN 2021.

With regard to the WCN, WFN Vice President Ryuji Kaji reminds all readers to submit abstracts to the WCN 2021 in Rome. Dr. Kaji also announces the creation of a new award for service to

Although Dr. Shakir did not instigate the

WFN African initiative in 2006, there is

his subsequent leadership enabled the

regional affiliated WFN organization.

WFN support for the African initiative

to develop two neurological training

centers each in both Anglophone and

his energy, enduring funding was

Francophone Africa. An early limitation

established to the benefit of neurology

in Africa. Such an outcome both freed

up valuable WFN funds for additional

was the funding of these centers. Through

no doubt his enthusiasm at the time and

initiative to be transformed into the AFAN

and for AFAN to take its place as an active

As WFN President, Dr. Shakir also led

RAAD SHAKIR

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STEVEN L LEWIS, MD

the WFN. In his column on the WFN Committees and Specialty Groups, WFN Secretary-General Wolfgang Grisold reports on the many activities of the WFN Tropical and Geographical Neurology Specialty Group and Standards & Evaluations Committee.

Drs. Chandrashekahr Meshram, JMK Murthy, Nirmal Surya, U Meenakshisundaram and Gagandeep Singh report on the many activities that recently occurred around National Brain Week in India, revolving around the theme of preventive aspects of the neurological diseases. Dr. Meshram also reports on the new monthly webinar series, "Inspiring People in Neurosciences," with an exciting schedule

educational projects and elevated the visibility and support for the WFN. The benefit of WFN's increased recognition as leader in neurological education in one of the most difficult yet needful areas of the world will pay dividends for many years through elevating the standard of neurological care in Africa.

The development and establishment of the Pan American Federation of Neurological Societies also occurred in Latin America during Dr. Shakir's presidency. His influence and guidance were fundamental in driving this successful outcome.

Dr. Shakir displayed the same dedication and skill in WFN dealings with the World Health Organization (WHO). Intimate involvement with WHO-related activities such as the Neurology Atlas of 2017 and

of remarkable neurologists speaking about inspirational neurologists, a free educational series for which neurologists around the world and at all stages of their career should find of great interest.

In this issue's WFN Training Center report, Drs. Olivier Kapto and Ratsitohara Santatra Razafindrasata, from Burkina Faso and Madagascar, respectively provide a nicely illustrated report of their successful year of specialty training at the WFN Training Center in Rabat, Morocco.

The history column by Peter J. Koehler provides his insights into the potential neurological origins of visions reported by a classic figure from the Middle Ages.

Finally, this issue also details the notice of elections for open positions in 2021 to be voted on at the AGM of the COD meeting at the WCN in October 2021.

Thanks to all readers for your interest in World Neurology. We look forward to continued submissions from neurologists and neurological societies worldwide to inform all neurologists about the remarkable variety of activities and opportunities available to enhance the field of neurology and our care of neurological patients around the globe. •

in heading the neurology Topic Advisory Group for the revision of the International Classification of Diseases (ICD-11) required enormous effort, patience, and skill over a considerable period of time.

The WFN and the global neurological and stroke communities are indebted to Dr. Shakir for his efforts. The interaction between the WFN and the WHO has led to a fundamental change in the way the WHO now views stroke (as a disease of the brain) and in the classification of neurological diseases in ICD-11. Both will be advantageous to the promotion of neurological care worldwide, and both are a direct result of his inspirational leadership and the respect in which he is held by all.

He is a worthy recipient of this prestigious award. •

New Award for WFN Service

FIRST VICE PRESIDENT, WEN

- he World Federation of Neurology (WFN) has the following awards given on a regular basis and presented during each World Congress
- of Neurology (WCN). • WFN Medal for Service to
- International Neurology (biennial)
- WFN Medal for Scientific Achievement in Neurology (biennial)
- Ted Munsat Award for Service to Education (biennial).
- A Lifetime Achievement Award is made on an ad-hoc basis at the discretion of the trustees.
 - To recognize particular service of

merit by members or employees of the WFN, the WFN Meritorious Service Award has been created. Two awards may be made at each WCN. There will be no honorarium. The guidelines for the Meritorious Service Award are detailed here:

- 1. The WFN Meritorious Service Medal will be awarded to any member or employee of the WFN or WFN Member Society who has given exemplary service to the WFN.
- 2. Nominations are to be submitted by a financial Member Society and accompanied by a statement of up to 300 words describing the meritorious

service of the nominee(s).

- 3. Two medals will be awarded at each World Congress, with due regard to gender diversity.
- 4. Nominations will be accepted when submitted by a financial Member Society using the nomination form on the WFN website.
- 5. Nominations can be submitted until June 30 in a World Congress of Neurology year. Calls for nominations will go out in the year of a World Congress.
- 6. The WFN President will, with the aid of a subcommittee from the WFN Trustees, determine the awardees. •



continued from page 1

traumatic brain and spinal cord injuries." Subsequently, these disorders do occur as comorbidities of epilepsy and that many may benefit from similar public health measures to be developed for epilepsy.

Since this development, the WFN has been engaged with the International League Against Epilepsy, the International Bureau for Epilepsy, and the International Child Neurology Association in preparing the broader neurological fraternity, including members of the Global Neurology Alliance to be ready to contribute to the proposed plans if requested by the WHO.

The second important event has been the launch of the WFN Brain Health Initiative (BHI). The BHI arose through the perceived need to promote brain health more generally and more widely. This ambitious initiative is aimed at the global population and not just the WFN and its specialty constituents. Many members of the Global Neurology Alliance (GNA) have their own educational advocacy programs. Indeed, the WFN does this also through its biennial WCN and the annual disease specific World Brain Day (WBD), lately always partnered with a GNA member.

In this initial phase, the BHI will comprise five separate but sequential modules. The first two, titled "An Introduction to Brain Health" and "What Happens When Brains Are Not Healthy" were launched on Jan. 11 and the parallel webinar Feb. 17. The webinar also included contributions from each of the WFN regional organizations.

Modules 3 to 5 will follow soon with a launch webinar that will hopefully feature a wider collaboration from member societies.

The reason for highlighting the fortunate conjunction of these two crucial events is that there is an evolving momentum on the importance of brain health. Triggered in part by the Global Burden of Disease (GBD) study of 2016 showing neurological non-communicable disorders (nNCD) are the leading cause of disability and the second leading cause of death, a growing number of organizations and people are recognizing that brain health is not only a natural gift but that for some its attainment requires active, effortful participation as does the maintenance of optimum brain health.

It is hoped that along with improvement in health standards generally there will be increasing emphasis on the importance of brain health. People, societies, health care practitioners and governments need to advocate in concert for measures that reduce the risk of brain ill-health and injury.

Brain Health Initiative and COVID-19

From the above, it is clear that the WFN will be focusing its virtual efforts on brain health including the Brain Health Initiative.

It is opportune to compare the preparations for this challenge with that which the world has had to undertake for the challenge of COVID-19. Although over a much shorter time frame, the world has begun to introduce a viable response to the pandemic. With the same energy and commitment, the world will meet the challenge of the increasing burden of neurological disorders.

Through 2020, the WFN has participated with two groups developing means to capture, measure, and treat any neurological state generated by the COVID-19 pandemic.

Both the WHO Global Forum on Neuro-COVID-19, headed by Tarun Dua (WHO Brain Health Unit) and the Neuro COVID-19 Coalition inaugurated by Andrea Winkler (University of Munich), have worked in parallel to assess the acute effects and the late effects of

COVID-19 infection.

The development of the WHO Global COVID-19 Clinical Case Record Form (CRF) provides a uniform CRF that can be employed in the acute and importantly the post-infective stage of COVID-19 illness and will ensure as far as possible that the data collected from anywhere will be viable and informative. Thanks go to Richard Stark and Alla Guekht for their efforts on our behalf with these groups. It is envisaged that the WFN will continue to be associated with these two groups through 2021.

World Brain Day

Following on from the successful collaborations with the International Headache Society in 2019 and the International Parkinsons Disease and Movement Disorders Society through the peak of the pandemic in 2020, the WFN will likely partner with the Multiple Sclerosis International Federation in 2021.

The WFN decision on this topic was made only after careful consideration. Multiple sclerosis (MS) and other immune-mediated CNS inflammatory disorders have an important success story to disseminate, share a link with severe and often fatal COVID-19 disease, have caused concern among those with MS with regard to treatments and COVID-19 vaccination and highlight again the risk the pandemic poses to ongoing neurological management through the diversion of resources.

The success story for MS is that with the continuing development of effective therapies and the post-marketing observations, it has become evident that the accrual of disability from MS has been dramatically reduced and even more so if treatment is begun early. Furthermore, there are now therapies arriving that promise to slow the later, progressive phase of MS.

Communication Thanks to the efforts of member

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societies and the London office staff of the WFN, we now have the ability to communicate rapidly and with high fidelity. Efforts now will be centered on maintaining this facility as is it clearly to the benefit of us all. Thanks also to those who maintain the WFN website, a never-ending task. The recent update of the homepage to accommodate the Brain Health Initiative is a case in point.

Needs Registry

Another crucial example of the benefits of reliable communications is the completion of the Needs Registry survey by some 115 of the 122 member societies. The data is now undergoing preliminary statistical evaluation, and it is hoped that this will be able to be shared with members soon. It is likely that the Needs Registry survey data will also be helpful for the IGAP.

World Congress of Neurology and Council of Delegates Meeting

Planning and organization of the 25th WCN will be a major effort through this year. Ryuji Kaji, chair of the WCN Congress Committee, reports on the progress of this WCN in this issue. At this time, it appears quite unlikely that this congress will be a wholly physical or face-to-face meeting. Kenes, the WFN professional conference organizer (PCO), has experience and expertise to hold a hybrid meeting or a totally virtual meeting, whatever eventuates. The WFN, the Society of Italian Neurologists and Kenes hope to hold off a final decision on the format of the WCN until April, some six months before the WCN. Given the uncertainties about the pandemic and the likelihood of a hybrid meeting, the trustees have determined to again conduct the scheduled elections electronically as was done successfully in 2020. In this regard, I draw your attention to the notice of elections and the call for nominations for those elections.

Submit Abstracts and Join Us at WCN 2021 in Rome

BY RYUJI KAJI MD, WFN FIRST VICE PRESIDENT

s the chair of the Congress Committee, I cordially invite you to join the 25th World Congress of Neurology (WCN) to be held Oct. 3-7, 2021, in Rome, Italy. Since the pandemic of COVID-19 will not completely fade out by then, we are most likely to have a hybrid-type congress, providing you the option of attending in person or virtually. The committee has decided that we will remain flexible until the end of March as to what extent the meeting can be held online.

The world is now suffering from COVID-19, which is comparable to

Spanish flu or the influenza pandemic that occurred 100 years ago. At that time, peculiar neurological conditions were reported. These included encephalitis lethargica or von Economo's encephalitis, which is now hypothesized as a sequela of the pandemic. Similarly, there are various neurological manifestations of COVID-19, such as anosmia, stroke, so-called "brain fog" and others. Despite the difficulties of having WCN 2019 at this time, it is a unique opportunity to discuss various consequences of the pandemic not only scientifically but also in terms of its impact on neurological education and patients' care during the crisis to put our

best pieces of knowledge together.

We will have the most updated sessions on COVID-19 and the nervous system, including a plenary session, so that we can share the strategies to fight against the virus. Also, we welcome abstract submissions on any advances in the other subspecialties of neurology. Our strengths include the worldwide links among membership societies and research groups, and we expect a number of breakthroughs in neurology to be presented at this meeting.

On behalf of our Italian colleagues, we welcome those who will be physically able to visit Rome and enjoy the most historic place in Europe: Inspired by the



past to build the future of neurology. For those who are unable to come, you will also be able to present your paper online. Please submit your abstracts now. The deadline is April 5, 2021. •

HISTORY

Visions or Auras? A case study from the High Middle Ages

BY PETER J. KOEHLER

uring the High Middle Ages (1000-1250 CE), the western part of central Europe was reigned as a universum regnum or Romanum imperium, terms that were replaced later by the Holy Roman Empire (a term used from the 13th century). The political unification of the empire was not like that of France. In fact, the empire consisted of many smaller units (kingdoms, duchies, prince-bishoprics, etc.) and the power of the emperor was limited. The regional rulers, although officially vassals of the emperor, were quite independent. Population and urbanization increased, and the economy was growing. The Black Death (starting in this region around 1347) had not yet decimated the number of inhabitants.

Medical Knowledge

Medical knowledge, mainly based upon the ancient Greek books (the Hippocrates corpus, Galen) that were copied in the scriptorium (writing room), had been

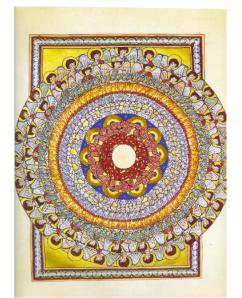


Figure 1. The choirs of the blessed (from *Scivia* I.6 Tafel 9)

passed on by medieval monasteries, in particular of the Benedictine order, since the late sixth century.

Handbooks of medical botany from local gardens also played an important role in the monastic infirmaries. Furthermore, medicine was taught in early urban centers including Ravenna and Bordeaux. In the late ninth century cathedral schools like those in Reims and Chartres offered medical instruction. Salerno, at first an important center for practical medicine (10th century), became a famous center for medical theory in the 11th century. Here the works of Arabic medical authors (including Avicenna (980-1037) and Averroes (1126-1198)), who had previously incorporated Hippocratic, Aristotelean, and Galenic works into their medical corpus, were translated. Autopsies were not done at these schools.

A Benedictine Monastery in Northwestern Europe

In the northwestern part of the Holy Roman Empire, in a newly founded monastery (1150) near the estuary of the Nahe (or Nohe) river into the Rhine, east of Mainz, nuns were singing liturgical songs in a monophonic way (one melodic line). See Figure 2. The texts had been written and the music composed by the abbess founder, an extraordinary woman, who had entered the Benedictine monastery of nearby Disibodenberg at the age of eight (1206). She became magistra in 1136. She experienced visual disturbances from age 3 that, years later, she interpreted as sacred visions. She called it umbra viventis lucis, or reflection of the living light.

In her correspondence, at age 77, to Guibert of Gembloux (1124-1213), a monk who became her secretary in 1177, she wrote, "In this vision, my soul, as God would have it, rises up high into the vault of heaven and into the changing sky and spreads itself out among different peoples,

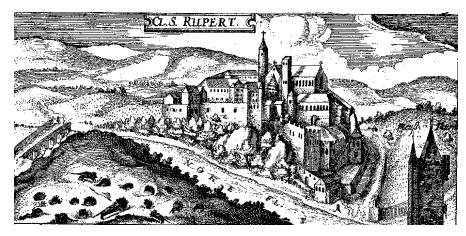


Figure 2. Convent of Rupertsberg near the estuary of the Nahe (or Nohe) river into the Rhine at the time of the 30 Years War (1618-1648).

although they are far away from me in distant lands and places." She further explained that "I do not hear them with my outward ears, nor do I perceive them by the thoughts of my own heart or by any combination of my five senses, but in my soul alone, while my outward eyes are open."

She saw the images while awake, day and night. She was "constantly fettered by sickness" that seemed to be present constantly, resulting in fatigue when "writing the words and visions are there revealed to me."

Furthermore, she noted that "the grip of pain [could be] so intense that it threatens to kill me." She did not write where the pain was felt. She saw a light that was "far, far brighter than a cloud which carries the sun." At a certain moment, she started recording her experiences.

"... the words in this vision are not like words uttered by the mouth of man, but like a shimmering flame, or a cloud floating in a clear sky."

In 1148, she obtained permission from the pope – it was not without danger to assert that one had been chosen by God – and completed the book with the divine revelations, titled *Scivias* (Know the Ways) in 1151. It made her famous as a visionary, preacher, and reformer.

Most readers will have recognized the story of Hildegard von Bingen (1098-1179). The manuscript was written at the St. Rupertsberg Monastery before her death (1179) and illuminated by beautiful miniatures that can be seen at the website of the St. Hildegards monastery. The book was destroyed in 1945, but a copy was made between 1927 and 1933.

A Medical Historian

Almost seven centuries later, a historian of science, Charles Singer (1876-1960), who was married to a medieval historian Dorothy Waley Cohen (1882-1964) and studying a subject on contagion, came across one of the books that had been written by the abbess including Scivias, that was still an early version.

He changed the subject of his study, now paying attention to the texts and the crenellated shapes, lights, and fortification figures that characterized the miniatures. He believed to recognize the figures from descriptions of patients during migraine attacks and presented the ideas at a meeting of the Historical Section of the Royal Society of Medicine in London (1913).

In 1917, he published a more extensive chapter in his Studies in the *History and Method of Science*. He believed that the



Figure 3. The new heaven and the new earth (Tafel 34).



Figure 4. The Zeal of God (Tafel 26 from *Scivia* Tafel 26).

combination of Hildegard's ill health, the religious visions, and complete recoveries made it probable that she had been suffering from a nervous disorder.

"She was a sufferer from a condition that would nowadays probably be classified as hystero-epilepsy," which had been a popular diagnosis at least in the late 19th century. He also diagnosed migraine, noting that "the medical reader or the sufferer from migraine will, we think, easily recognize the symptoms of scintillating scotoma."

Criticism

There is much to be opposed to the diagnosis of migraine. The present diagnosis migraine with aura including the combination of (usually) visional symptoms with headache was only recognized in the late 18th and 19th centuries. Migraine auras had been described much earlier, but were not named as such. In fact, the term aura derived from the area of epileptic symptoms.

Migraine headache, of course, had already been described by the ancients (Aretaeus, who named it heterocrania and Galen, who changed it into hemicrania). Hildegard described her pain, but did not mention headache in particular. Moreover, the visions she described were too detailed for migraine auras. Furthermore, next to see **HISTORY** page 5

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HISTORY

continued from page 4

her religious works (Scivias, Liber vitae meritorum and Liber divinorum operum the latter also containing descriptions of vision 4 that included anatomy and physiology), she wrote two books on medical subjects, notably *Physica (Liber Simplicis Medicinae; Book of Simple Medicine*, which is an inventory of natural therapies) and *Causae et Curae (Liber Compositae Medicinae; Book of Compound Medicine; Causes and Cures)*.

In the latter book, we find a section on migraine, so, if she would have suffered from migrainous headache, one would expect that she would have recognized this. However, we now know that not everyone suffering from migraine with aura, suffers from headache, in particular if it occurs at older age. Furthermore, visions like those described by Hildegard were not rare.

"I saw a great star most splendid and beautiful, and with it an exceeding multitude of falling sparks which with the star followed southward. And they examined Him upon His throne almost as something hostile, and turning from Him, they sought rather the north. And suddenly they were all annihilated, being turned into black coals... and cast into the abyss that I could see them no more"

Singer's idea of migraine as a diagnosis for Hildegard was later adopted by Oliver Sachs (1933-2015) in his book *Migraine* (1970), noting that they were "indisputably migrainous," further contributing to the present belief that she did suffer from migraine auras.

"Emigranea" in Causae et Curae

Comparing the writing style of the various works by Hildegard, Singer provided arguments that Causae et Curae may not have been written by her. Gertrude M. Engbring (1896-1985), however, author of *Saint Hildegard, Twelfth Century Physician* (1940), believed "Her medical writings were ... compilations of traditional monastic observations and formulas, enlarged by her own studies and practice."

The book contains several subjects of neurological interest. As written above, she distinguished "dolore capitis" (pain of the head) from "emigranea," derived from the Galenic "hemicrania," and wrote about the comorbidity of migraine and melancholy. She opined that migraine derived from black bile and all bad humours. It only concerns one side of the head, either the right or the left side. If the humours are present in superfluous quantity, it is localized in the right side; if black bile gains the upper hand, it is on the left side.

She suggested an original explanation for the unilaterality of migraine, noting that nobody could survive this cruel pain if it would be located on both sides of the head. At the time, it was thought that the ascending vapours, because of the falx



Figure 5. Charles J. Singer

cerebri, went to either the left or the right hemisphere. She wrote that it was not easy to treat this pain. She advised topical application of a mixture of myrrh and aloe with poppy-oil on the head.

De Vertigine and Amentia

Dizziness or vertigo was believed to be caused by too many thoughts without "the leading influence" of the will. The humours rush or, in the contrary, go on "sluggishly without proper order." If these humours come all together so that they rage in the head all in a mess, they deprive the person of understanding (amentia), like a ship that capsizes in a storm and breaks into two parts.

Many may think that the person is possessed by demons, but that is not the case. The brain is influenced by good and bad humours that are present in the body *see* **HISTORY** *page 6*



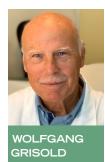
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WFN COMMITTEES AND SPECIALTY GROUPS

Standards & Evaluations Committee and the Tropical and Geographical Neurology Specialty Group

BY WOLFGANG GRISOLD

n this issue, we want to introduce the World Federation of Neurology (WFN) Standards & Evaluations Committee, chaired by Prof. László Vécsei, and the specialty group on Tropical and Geographical Neurology,



chaired by Dr. Chandrashekhar Meshram. All WFN committees are listed on the WFN website, as well as the members of the committees and specialty groups. We are thankful, and acknowledge the work of the committee and the specialty group members. In these articles, we will just mention the chair as the representative for the group.



Prof. László Vécsei

The WFN Standards & Evaluations Committee

This committee is chaired by Prof. László Vécsei from Szeged, Hungary. Prof. Vécsei is the head of Neuroscience Research Group in the Department of Neurology, Faculty of Medicine at the Albert Szent-Györgyi Clinical Center, University of Szeged, Hungary. Prof. Vécsei has much experience in working in neurological international societies and is presently the secretary-general of the Danub Group. (http://danubeneurology.eu). The committee has several experienced members who are actively involved in the review and decision process.

The important task of the WFN Standards & Evaluations Committee is to evaluate applications from international or national neurological congresses and any other scientific meetings in neurosciences in classical forms and as virtual meetings, for WFN accreditation that apply according to its guidelines as noted on the WFN application form, which can be reached on the WFN website: https://www.wfneurology.org/ meetings-endorsement.

The task of this WFN activity is to keep and improve the standards of the neurological scientific meetings applying for WFN endorsement. This is done according to a structured guideline. Information on the required ethical issues and limitations with regard to relations with the pharmaceutical and other industries are to be found in the application form. Once a completed application is received, it is reviewed by the

committee, and applicants are notified of the decision within two weeks of their application. A meeting endorsed by the

WFN qualifies to use the WFN logo, it is announced on the WFN website and WFN newsletter and after the meeting, a brief summary can be published on the website or in World Neurology.

In addition to meetings, this committee reviews and accredits neurology related guidelines or books or other enduring material which requests WFN accreditation. Depending on its content, it may be reviewed together with the Education Committee, or with the aid of experts or the speciality groups.

The Tropical and Geographical Neurology Specialty Group

This Specialty Group is chaired by Dr. Chandrashekhar Meshram, MD, DM(PGI Chandigarh), India, who is supported by an active membership. He is a consultant neurologist and director of the Brain and Mind Institute in Nagpur, India, and past-president of the Indian Academy of Neurology (2013-14). Prof. Meshram has been active in many agendas for the WFN in the past years.

The specialty group on tropical neurology introduced a timely webinar series in 2020 (see below) on neurological infectious diseases, with an excellent scientific content, impeccable technical support, and has successfully sparked the interest on neuroinfections worldwide.

The Tropical Neurology Specialty Group is the oldest WFN research group established in 1961. The Specialty Group (formerly "Applied Research Group") was formed with the mission to foster research collaboration in aspects of neurological disorders prevalent in the tropics and to



Dr. Chandrashekhar Meshram, MD, DM

disseminate knowledge at international and regional levels. The specialty group holds regular congresses (INTROPICON-https:// worldneurologyonline.com/article/ tropical-neurology-intropicon-2018/), and publishes a special issue on Tropical Neurology in the Journal of Neurological Sciences

Jointly with the Forum for Indian Neurology Education (FINE) and Indian Academy of Neurology, a neuroinfection webinar series was introduced and endorsed by the WFN.

These sessions usually consist of a main lecture and three case presentations.

In the first series, talks were given on neurocysticercosis, cerebral malaria, zika and other arbovirus infections, neurobrucelloisis, encephalitis, cryptococcal meningitis, fungal meningitis as well as the general approach to neurologic infections, among other topics.

During series 2, talks on 12 more topics. Were organized and given. A weblink allows continued viewing of these sessions: https://us02web.zoom.us/j/87248087732.

All of These Activities Are Free.

This timely webinar series in 2020 on infectious diseases was designed at the right time and helped to introduce new technologies, enabling the scientific community to communicate and interact during the harsh and still unpredictable times of COVID. •



Screenshot capture of the inaugural meeting of the 2020 FINE/WFN Neuroinfection Webinar series in 2020.

HISTORY

continued from page 5

and therefore soft and moist. When it will be dry, it becomes ill within a short time. Hildegard localized the soul in the heart (like Aristoteles), but the power of the thoughts ascend to the brain.

Falling Evil

With respect to epilepsy, she wrote that "The humours in man are distributed in just measure. But when they affect the veins of the liver his humidity is decreased and also the humidity of the chest is attenuated: so that thus dried, he falls into disease of such a nature that the phlegm is dry and toxic and ascends to the brain. There it produces headache and pain in the eyes and wasting of the marrow, and thus if the moon is in default, he may develop the falling evil [epilepsy]" (from Liber divinorum operum simplicis hominis cols. 789-91; in Migne, 1855; transl. by Singer, 1917).

In general, the humoral (patho) physiological ideas at the time were quite primitive. Hildegard, for instance, wrote on the purification of the brain by its windows, mentioning the eyes, ears, nose, and mouth. Cold and moist excess from the brain is gathered in nose and throat. Singer opined that the influence of the Salernitan school (see above) may be discerned in several of her scientific ideas. The Regimen Sanitatis of Salerno (a domestic medical practice in the form of a poem), written about 1101, was rapidly diffused throughout Europe, and must have reached the Rhineland

Concluding Remarks

Retrospective diagnoses are always hazardous, in particular if the person lived 1,000 years ago, and one cannot be certain whether Hildegard's visions were caused by, what today we would call, migrainous auras. Some of the illuminations, in particular those with stars and zigzags, and descriptions indeed resemble auras. Many other illuminations, however, do not depict such figures. Publications, in which the author, like Singer, tried to demonstrate the migrainous nature of the phenomenon, usually only show those illuminations that support their view and omit the others.

Whatever it may have been, while the convent of Rupertsberg was destroyed during the 30 Years War (1632) and discussions on the origin of the visions will go on, the illuminations remain beautiful and the music angelic ... (Hildegard von Bingen - Voices of Angels - Voices of Ascension - YouTube). •

National Brain Week 2020 in India



Examples of print media coverage from National Brain Week 2020 in India.

BY CHANDRASHEKAHR MESHRAM, JMK MURTHY, NIRMAL SURYA, U MEENAKSHISUNDARAM AND GAGANDEEP SINGH

aking inspiration from the World Federation of Neurology (WFN), the Indian Academy of Neurology has been organizing public education and awareness programs on brain health and brain diseases during National Brain Week for the last seven years with Chandrashekhar Meshram as the convener. The activity is held with the academy's Foundation Day, which is Dec. 16.

National Brain Week was organized as a virtual event this year on the background of the ongoing coronavirus pandemic. Neurologists and experts across the country joined the week-long celebration. The sessions were conducted online daily from Dec. 18-24.

This year's theme was "My Health My Responsibility." The emphasis was on preventive aspects of the neurological diseases. Dr. Meshram planned the program for the week and released the press note.

Past President of the Academy and philanthropist Padmashree Dr. Ashok Panagariya inaugurated the event and addressed the audience on Dec. 18.

After the sessions' concluding function was held, IAN President Dr. JMK Murthy, President-Elect Dr. Nirmal Surya, Secretary Dr. U. Meenakshisundaram, Past-Secretary Dr. Gagandeep Singh, Convener Dr. Chandrashekhar Meshram and Dr. Partha Ray expressed their views about the extremely successful event. Important information regarding the diseases and their prevention was conveyed in the best possible way. Difficult topics were made simple by speakers for understanding by the general public.

The faculty came from different regions and states of the country. After the

talks, the audience got the opportunity to interact with the experts during questionand-answer sessions. During the week, the IAN 3000k Challenge was also organized; 58 neurologists ran for 3109 kms during the week and set the example for the society.

There was an overwhelming response to the event. Print media actively participated in the campaign. The academy has decided to undertake public education and awareness activities more frequently throughout the year during 2021. •

Date	Торіс	Speaker
Dec. 18	Epilepsy	JMK Murthy
	Parkinson's Disease	Pramod Pal
	Brain health	Nirmal Surya
	IAN Foundation Day	Gagandeep Singh
	What is so special about neurology?	U. Meenakshisundaram
Dec. 19	Exercise and prevention of brain disorders	Jacob George
	Exercise and health – how to reverse aging	Sathish Kumar
	Music in brain health	Shantala Hegde
Dec. 20	Headache	Debashish Chowdhury
	Vertigo	Sudhir Kothari
	Gait disorders	Hrishikesh Kumar
Dec. 21	Loss of Vision	Vivek Lal
	Multiple sclerosis	Sumit Singh
	Sleep: Nature's unusual medicine	Joy Desai
Dec. 22	Nerve and muscle diseases	Satish Khadilkar
	Myasthenia gravis	R. Lakshminarasimhan
	Stroke	Kameshwar Prasad
Dec. 23	Diet for prevention of diseases and weight control	Chandrashekhar Meshram
	Neurology on the wheels	Bindu Menon
Dec. 24	Need for neurorehab	Nirmal Surya
	Role of physiotherapy	Hutoxi Writer
	Role of occupational therapy	Murali Krishnan
	Role of speech therapy	Sonal Chitnis
	Role of neuropsychologist	Urvashi Shah
	Advances in neurorehab	Abhishek Srivastava
	Ataxia	Achal Srivastava

Program for National Brain Week India held in December 2020.

Inspiring People in Neurosciences

BY DR. CHANDRASHEKHAR MESHRAM fter the hugely successful educational neuro-infection series with 16 fascinating sessions, the World Federation of Neurology's Tropical and Geographical Neurology Specialty Group in collaboration with the Indian Academy of Neurology is organizing a new series. "Inspiring People in Neurosciences" explore legends who have done great work in the field of neurosciences.

The idea is to ignite young minds to do outstanding work in the field of their choice.

This monthly series will be held 6:30 p.m.-8 p.m. Indian Standard Time (1 p.m.-2:30 p.m. GMT) on the first Saturday of each month.

The series, which started Feb. 6, 2021, was inaugurated by WFN Secretary General Prof. Wolfgang Grisold. WFN President Prof. William Carroll sent a video message that was played for the audience.

The first session's inspirational person was Prof. David Molyneux, emeritus professor at Liverpool School of Tropical Medicine and University of Liverpool in the U.K. The session was chaired by former WFN President Prof. Raad Shakir. Prof. Molyneux gave a talk on neglected tropical diseases. After his talk, Prof. Peter Hotez, Prof. Juerg Utzinger, Prof. Simon Bush, and Prof. Alan Fenwick made important comments.

Registration is free. Link for the registration: https://forms.gle/ BX3xyKcztAWzLGyu6

Link to join the program: https:// us02web.zoom.us/j/81137122193 A password is not required. •

UPCOMING SESSIONS

Date	Feature
March 6	Prof. Louis Caplan will talk about Prof. C. Miller Fisher
April 3	Prof. Kailash Bhatia will talk about Prof. David Marsden
May 1	Prof. Angela Vincent will talk about John Newsom-Davis
June 5	Prof. Allan Ropper will talk about Prof. Raymond Adams
July 3	Prof. Bhim Sen Singhal will talk about Prof. Noshir Wadia

WFN DEPARTMENT VISIT REPORT

Report From Morocco Trainees in 2020

BY DR. OLIVIER KAPTO AND DR. RATSITOHARA SANTATRA RAZAFINDRASATA

e are Dr. Olivier Kapto, Cameroonian, neurologist at Ouagadougou, Burkina Faso, and Dr. Ratsitohara Santatra Razafindrasata, Malagasy, neurologist at Antananarivo, Madagascar. We are both interested in clinical neurophysiology and are happy to have benefited from the World Federation of Neurology's (WFN's) one-year fellowship at the neurophysiology unit of Ibn Sina Teaching School in Rabat, Morocco. We worked under the supervision of Drs. Reda Ouazzani (head of unit) and El Alaoui Mustapha Faris from January 2020 to December 2021.

The neurophysiology unit has two electroneuromyography rooms under the supervision of Drs. Nazha Birouk, Leila Errguig and Bouchra Kably, one evoked potential room supervised by Dr. Bouchra Kably, one video-EEG room and one standard EEG room under the supervision of Drs. Reda Ouazzani, Leila Errguig and Fatiha Lahjouji.

We were assigned since the beginning

in these different units from 9 a.m. to 3 p.m. every Monday through Friday. Many learning activities are usual in the department: EEG staff with review of clinical cases, interpretation and literature review every Wednesday morning; general staff to discuss EEG-video cases for epilepsy surgery and electroneuromyography review of weekly cases about clinical, technical, and interpretation aspects every Thursday afternoon.

In the EEG unit, we learned the importance of patient history, electrode installation, and results interpretation. We assisted with visual and sensory evoked potentials. The EMG unit has been the most prolific. We started as observers in anatomical landmarks and technical realization. We gradually learned to do it ourselves and at the end, we are able to perform and interpret an EMG exam. We have seen many cases: carpal tunnel syndrome, polyneuropathies, traumatic injuries, polyradiculoneuropathies, brachial plexus injuries, lumbar plexus injuries, myogenic syndrome, neuromuscular junction syndrome, amyotrophic lateral

sclerosis, and facial palsies, among many others. The key point for us is the importance of clinical examination in the EMG test. We had the chance to attend neuromuscular and epilepsy consultations.

Our biggest difficulty was the lockdown, but we continued online learning with Dr. Birouk about the clinical and technical aspects of neuromuscular diseases. We took part in many scientific meetings online.

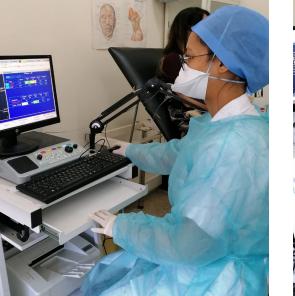
We are grateful to the WFN for this opportunity. We hope it will help us to continue in neurophysiological specialization. We thank the Moroccan authorities for administrative facilitations. We say a big thanks to Drs. Ouazzani, Birouk and their team. Our journey with them was so nice and instructive.

Many thanks, Dr. El Alaoui for your availability and care of us. Our biggest regret is not having the possibility to visit more of Morocco with the lockdown. We think we will come again.

It's a pleasure for us to wish happy New Year 2021 with further expansion of neurology. •









Notice of Elections for 2021

his October, at the Annual General Meeting (AGM) of the Council of Delegates (COD), elections will be held for the following positions:

- President. To take office Jan. 1, 2022 (position vacated by Prof. William Carroll).
- First Vice President. To take office Jan. 1, 2022 (position vacated by Prof. Ryuji Kaji).
- One Elected Trustee. To take office from date of election in October 2021 (position vacated by Prof. Alla Guekht who is eligible for re-election). The names of candidates to be

considered for nomination can be

submitted together with written confirmation of their willingness to stand for election, a brief curriculum vitae (a single type-written page) and written support for their nomination from their national societies. These should reach the WFN London Secretariat office by Monday, April 12.

The Nominating Committee will scrutinize all submissions received and compile an official list six months before the date of the election.

Candidates for the positions of president and first vice president will be required to provide a statement of their goals and objectives for the WFN if elected, which will be published in World Neurology. They will also be required to present a short statement by video prior to the election at a date to be advised. Videos will be available for viewing on the website before the election process begins. This date will also be advised.

Please note that following the closing date, additional nominations can be submitted up to 30 days before the election process by five or more member societies acting jointly.

As in 2020, elections will be conducted electronically in time for the announcement of the successful candidates at the AGM. •



