

**? WHO
SHOULD
ATTEND**

Directors, CEOs | Association Presidents | Vice Presidents and Professionals |
Neurology / Neurosurgery Researchers and Academicians | Chemistry Scientists |
Clinical Services Managers | Healthcare Workers and Druggist | Doctors, Residents
and Hospital PR | Research Laboratories | Drug development Companies | Research
Institutes and Members | Supply Chain Companies | Neurology / Neurosurgery
Startup Companies | Manufacturing Companies | Training Institutes | Business
Entrepreneurs and Students | Young Investigators

EURO NEUROLOGY AND NEUROSURGERY CONGRESS

MARCH 26-27, 2020 | PARIS, FRANCE

Venue

**Mercure Paris Charles De Gaulle
Airport & Convention**

BP 20248 -Roissypôle Ouest -Route
de la commune -95713
Roissy CDG Cedex

2

**DAYS WITH MORE
THAN 45 SESSIONS,
KEYNOTES & TALKS**

12+

**INNOVATIVE
FEATURED
SPEAKERS**

20+

**HOURS OF
NETWORKING
EVENTS**

60+

**INTERNATIONAL
SPEAKERS**

125+

**EDUCATIONAL
SESSIONS**

2020

EURO NEUROLOGY

WELCOME MESSAGE



Dear All,

We cordially invite you to participate to the Euro Neurology and Neurosurgery Congress to be held in Paris on March 26-27, 2020.

A right choice of conference destination is an important aspect of any international conference. So Paris is a beautiful place where it will be possible to show your personal scientific work in an international neuroscience congress. In particular young investigators and students must be stimulated to present their contribution in neurological sciences.

The program will contain keynote sessions, oral and poster presentations and a student forum. Also, educational workshops and highlights of the day sessions will be available.

There will be six sessions with each four parallel topics on specific basic and clinical themes concerning different diseases of the nervous system and on specific investigation techniques.

There will also be a large opportunity to meet recognized experts in different fields of neurology and neurosurgery.

So we hope that many of you will be able to come during springtime in Paris and have not only a rewarding scientific congress but also a fascinating exploration of the city.

Jacques L De Reuck

Professor, INSERM U1171 Degenerative and Vascular Cognitive Disorders, Université de Lille 2, France.

WELCOME MESSAGE

Dear Colleagues,

The Euro Neurology 2020 in Paris will give you an update on the latest news in Neuroanaesthesia and Neurointensive Care. The fast growing field of Neurointensive Care is a fascinating part of Critical Care Medicine. Especially the management of ischemic stroke and intracerebral hemorrhages has achieved major breakthroughs in the last years. The same holds true for Neuromonitoring and Neuroanaesthesia. The program for the Paris Conference promises cutting-edge science and a brought overview on the field of Neurointensive care and Neuroanaesthesia. Beside that, the city of Paris in April is always worthwhile to visit. Looking forward meeting you at the Euro Neurology 2020.

Stefan Schwab

*Professor of Neurology, Director and Chair, Department of Neurology,
Friedrich-Alexander University Erlangen-Nuremberg, Germany*



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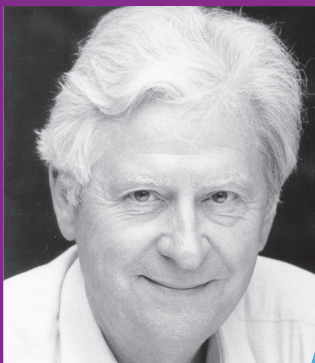
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PRESENTATION FORUM

KEYNOTE FORUM / MINI-PLenary SESSIONS

Presentations under Keynote Forum or Mini-Plenary Sessions includes abstracts with remarkable research value selected by the program committee. These significant speeches are delivered by globally recognized honorable speakers and it is open to all registrants.

DISTINGUISHED SPEAKERS FORUM (ORAL ABSTRACT SESSIONS)

In this forum, speakers and experts of the research field gets an opportunity to showcase their noble research work that involves comprehensive research findings. These formal oral presentations include a wide range of talks covering basic research to advanced research findings in accordance to the theme and scientific sessions of the conference.

STUDENT FORUM

POSTER SESSION

This session is particularly introduced to encourage more number of student participation at international conferences, however it is not restricted only to students since it is also available for the participants with language barrier. There are specific guidelines to be followed to prepare the poster. Poster topic should be selected only from relevant scientific sessions with in-depth technical details.

YOUNG INVESTIGATORS FORUM

An exclusive opportunity for students and young investigators to present their research work through a formal oral presentation. Young Investigators Forum provides a global platform for young researchers and scholars to showcase their valuable contribution to the scientific world and to get acknowledged by the global scientific community of experts. It is an excellent opportunity to recognize young scientific assets with promising research ideas. These oral presentations are of shorter time duration with 10-15 minutes of informative and precise presentations in relevant scientific sessions.

NO SECRET IS SAFE SHARE YOUR RESEARCH

<https://neurology.peersalleyconferences.com/>

**TIME TO
CONNECT
WITH YOUR
PEERS**



Register & Participate

in

**EURO NEUROLOGY
2020**

**TYPES OF
ACADEMIC
REGISTRATIONS**

**SPEAKER
REGISTRATION**

COMBO A

(Registration + 2 night's accommodation)

COMBO B

(Registration + 3 night's accommodation)

DELEGATE REGISTRATION



EDUCATIONAL WORKSHOPS/ RESEARCH WORKSHOPS/CORPORATE WORKSHOPS/MINI- SYMPOSIA

With an aim of transferring knowledge among the participants, workshops are introduced as a part of international conferences. These interactive and occasionally practical sessions gives an opportunity for participants to engage in detail discussion. Workshops are mostly scheduled for 60 to 90-minutes. It may range from learning about a specific topic relevant to international education, products and research which sometimes involves practical demonstration. It helps in enhancing skills, knowledge and understanding of the research field in depth through interactive discussions.

HIGHLIGHTS OF THE DAY SESSIONS

"Highlights of the Day Sessions" is introduced to discuss and focus a ray upon previous day ORAL ABSTRACT presentations by experts to summarise the key findings. It helps in getting better insights into the various dimensions of the topic.

EDUCATIONAL SESSIONS/ TRAINING PROGRAMS

Educational Sessions or training programs are specifically designed for a better understanding of the latest findings and technologies. These are generally 45-minute sessions that gives an exposure to the multidisciplinary field, that provides in-depth learning experiences and address educational needs.

MEET THE PROFESSOR @ NETWORKING SESSIONS

This session involves open discussion between the experts and session attendees, it gives enough time for getting answers to specific questions and doubts. It is an opportunity for attendees to increase their professional networking, sometimes also leads to an excellent collaboration opportunity.

SCIENTIFIC TRACKS/ SESSIONS

Neurology | Neurosurgery | Neuroscience | Neuropsychiatry | Pain Disorder and Management | Central Nervous System | Child Neurology | Neuro-Oncology and Brain Tumors | Neurophysiology | Neuroimmunology | Neuropathology | Neuroimaging | Neurodegenerative disease and Neurodegeneration | Neurological Disorders | Sleep Disorder | Stroke | Movement Disorders | Parkinson's disease | Epilepsy | Multiple Sclerosis | Alzheimer's Disease and Dementia | Neuromuscular Disease | Case studies and Clinical trials | Novel Treatment Strategies

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TYPES OF BUSINESS REGISTRATIONS

SPEAKER REGISTRATION

COMBO A

(Registration + 2 night's accommodation)

COMBO B

(Registration + 3 night's accommodation)

DELEGATE REGISTRATION

TYPES OF STUDENT REGISTRATIONS

REGISTRATION

YIF

COMBO A

(Registration + 2 night's accommodation)

COMBO B

(Registration + 3 night's accommodation)

POSTERS

TYPES OF ADDITIONAL REGISTRATIONS

Accompanying Person

E-Poster

Virtual Presentation

Workshops

Start-Ups



Concurrent Educational Sessions

THURSDAY, MARCH 26, 2020

NEUROLOGY	NEUROSURGERY	NEUROSCIENCE	NEUROPSYCHIATRY
- Neurochemistry - Neuromuscular Medicine - Neurocritical Care - Neuro-Oncology - Child Neurology - Intervention Neurology - Geriatric Neurology - Stroke	- Pediatric neurosurgery - Stereotactic neurosurgery/ Functional neurosurgery - Skull base surgery - Vascular neurosurgery - Spinal neurosurgery - Oncological neurosurgery	- Behavioral neuroscience - Clinical neuroscience - Computational neuroscience - Cognitive neuroscience - Developmental neuroscience - Neuroimaging	- Psychiatric genetics - Psycho-oncology - Mind/brain monism - Psychiatric epidemiology - Cultural and religious considerations - Mental well-being and mental illness

GROUP PHOTO | COFFEE BREAK

PAIN DISORDER AND MANAGEMENT	CENTRAL NERVOUS SYSTEM	CHILD NEUROLOGY	NEURO-ONCOLOGY AND BRAIN TUMORS
- Pain management programs - Sleep therapy - Psychotherapy - Psychogenic Pain Disorder - Chronic Pain Syndrome	- White and gray matter - Spinal cord - Brain - Cranial nerves - Difference from the peripheral nervous system - Clinical significance	- Neuro-Oncology - Pain - Psychological disorders - Case reports - Childhood epilepsy - Neonatal neurology	- Neuro-Oncological disorders - Spinal metastasis - Intracranial metastasis - Skull metastasis - Psychosocial Advances in Neuro-Oncology

LUNCH BREAK

NEUROPHYSIOLOGY	NEUROIMMUNOLOGY	NEUROPATHOLOGY	NEUROIMAGING
- Neurophysiology of Pain - Surgical Neurophysiology - Systemic Neurophysiology - Neurochemistry - Neurophysiology Facilitation of Respiration - Clinical neurophysiology - Metabolic Disorders in Neurophysiology	- Neuroinflammation - Research in neuroimmunology - Auto Immune Neuropathies - Neuroimmunological disorders	- Neuropathology of Neurodegenerative disorders - Neuropathology of Aging - Neuropathology of Neuro-Oncology - Neuropathology of Brain Tumor - Neuropathological techniques - Treatment and advancement in neuropathology - Neuropathology approaches - Clinical Neuropathology - Functional Neuroanatomy	- Neuroimaging techniques and their relation with Neurology - Recent advancements in Neuroimaging - Functional magnetic resonance imaging - Functional Magnetic Resonance Imaging (fMRI) - Magnetoencephalography - Cranial ultrasound - Magnetic resonance imaging

COFFEE BREAK

NEURODEGENERATIVE DISEASE AND NEURODEGENERATION	NEUROLOGICAL DISORDERS	SLEEP DISORDER	STROKE
- Batten disease - Huntington's disease - Parkinson's disease - Amyotrophic lateral sclerosis (ALS) - Alzheimer's disease - Motor neuron disease	- ALS - Epilepsy - Parkinson's Disease - Brain Aneurysm - Spinal Cord Tumor - Memory Disorders - Multiple Sclerosis - Arteriovenous Malformation - Headache - Dural Arteriovenous Fistulae - Stroke - Brain Tumors - Peripheral Neuropathy	- Insomnia - Sleep Apnea - Parasomnias - Narcolepsy - Obstructive sleep apnea - Restless legs syndrome - Sleepwalking - Jet lag	- Ischemic Stroke - Haemorrhagic Stroke - Thrombotic stroke - Rehabilitation - Stroke Management - Stroke Case reports - Angioplasty and stenting

Concurrent Educational Sessions

FRIDAY, MARCH 27, 2020

MOVEMENT DISORDERS

- Parkinson's disease
- Progressive Supranuclear Ophthalmoplegia
- Dystonia
- Blepharospasm
- Parkinson plus syndromes
- Secondary Parkinsonism
- Cerebral palsy

PARKINSON'S DISEASE

- Signs and symptoms of Parkinson's disease
- Secondary Parkinsonism
- Parkinsonian gait
- Brain cell death
- Parkinsonism
- Bradykinesia
- Parkinson's care, rehabilitation and treatments

EPILEPSY

- Seizure
- Epilepsy surgery
- Epileptogenesis
- Photosensitive epilepsy
- Focal seizures
- Generalized seizures
- Epilepsy treatment

MULTIPLE SCLEROSIS

- Primary progressive MS
- Relapse-remitting MS (RRMS)
- Secondary progressive MS (SPMS)
- Clinically isolated syndrome (CIS)
- Multiple Sclerosis Treatment and Management

GROUP PHOTO

COFFEE BREAK

ALZHEIMERS DISEASE AND DEMENTIA

- Causes and Prevention of Alzheimer's
- Vascular Dementia
- Alzheimer's Disease Diagnosis and Symptoms
- Recent Studies & Case Reports
- Alzheimer prevention and risk factors
- Alzheimer's Clinical Trials and Studies

NEUROMUSCULAR DISEASE

- Spinal muscular atrophy
- Myasthenia gravis
- Researches on Neuromuscular disease and disorders
- Myositis, including polymyositis and dermatomyositis
- Myopathy
- Charcot-Marie-Tooth disease

CASE STUDIES AND CLINICAL TRIALS

- Neurology Case Studies
- Neurosurgery Case Studies
- Parkinson's Case Studies
- Epilepsy Case Studies
- Alzheimer's Case Studies
- Movement Disorder Case Studies
- Neurology Clinical Trials
- Neurosurgery Clinical Trials
- Parkinson's Clinical Trials
- Epilepsy Clinical Trials

NOVEL TREATMENT STRATEGIES

- Neuroprotective strategies
- Multiple sclerosis therapeutic strategies
- Emerging therapies
- Stem-cell therapy
- Gene therapy
- Deep-brain stimulation
- Antiepileptic drugs
- Hurdles in treating neurological diseases



Title: A post -mortem neuropathological study of iron deposition in the brain during the aging process and in neurodegenerative and cerebrovascular diseases

Jacques L. De Reuck | Université de Lille 2, France

Abstract:

Introduction: The role of iron (Fe) accumulation in the brain is still a matter of debate. The present review examines the available post-mortem data in the aging brain and in those with neurodegenerative and cerebrovascular diseases.

Methods: Although there are several histological techniques to demonstrate Fe deposition we will restrict to those studies using particle induced X-ray emission (PIXE) and 7.0-tesla magnetic resonance imaging (MRI) with the GRE T2* weighted sequence.

Results: On PIXE analysis the Fe concentration is significantly higher in gray than in the white matter areas. On MRI the highest concentrations of Fe are found in the substantia nigra and globus pallidus, followed by the putamen, caudate nucleus and thalamus. During normal aging there is no increase of Fe between adult and elderly brains. However, the amount of Fe is lower in young up growing persons. Most neurodegenerative diseases display Fe accumulation during the progression of their disorder. This is the most severe in frontotemporal lobar degeneration and to a lesser degree in amyotrophic lateral sclerosis and Parkinson's disease. In brains with cerebral infarcts the Fe accumulation is high while in lacunar infarcts and ischaemic white matter changes it is low or absent.

Discussion: In all neurodegenerative diseases there is evidence that Fe accumulation contributes to further neuronal degeneration and promotes disease progression. In acute cerebrovascular diseases the Fe increase is a secondary phenomenon due to disturbances of the blood-brain barrier.

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Title: Radiological findings of less common sellar & parasellar lesions

Yonca Anik | Kocaeli University, Turkey

Abstract:

Congenital, developmental, infectious, vascular and tumoral lesions are encountered in the sellar and parasellar region. Besides most common lesions there are numerous pathologies. Neuroimaging features play an important role on diagnosis and differential diagnosis. Radiological findings of less common lesions including ecchordosis physaliphora, intrasellar cavernous hemangioma, lymphocytic hypophysitis, granulomatosis with polyangiitis (Wegener), amyloidosis, idiopathic granulomatous hypophysitis, Tolosa-Hunt syndrome, xanthomatous hypophysitis, pituitary tuberculosis, pituitary abscess, sellar carotid aneurysm, epidermoid and dermoid cysts, langerhans cell histiocytosis, hamartoma, glioma, clival fibrous dysplasia, chondrosarcoma, teratoma, lymphoma, schwannoma, germinoma, pituitary cytoma, giant cell bone tumor, meningioma, collision tumors, aneurysmal bone cyst, atypical teratoid/rhabdoid tumour, and metastasis will be discussed.

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Title: How to excel as a Neurologist?

Sudhir V. Shah | v. s. G. Hospital, India

Abstract:

A neurologist is not merely a “symptom-reliever” but a compassionate healer who heals a patient by offering therapeutic management at physiological, social, emotional, intellectual and spiritual levels. While perfect and updated knowledge, hard work, sincerity, noble ethics, good communication skills and compassion are prerequisites for excelling as any super specialist, excellent Neurologists always follow these rules or essence of life. 1) They consider their patients as the center of all their activities by maintaining an unwavering focus on good health outcomes and adopting “you first” attitude towards them. 2) Master the art of listening; ensure a proper eye contact and effective communications towards counselling, educating and answering patients and their caretakers. 3) They don’t succumb to time-constraint in decision-making; they maintain humility and compassion; and advocate the truth in most presentable manner. 4) Strictly abide by the virtuous practice, through non-discrimination 5) Being non-hesitant in right and timely referrals. 6) Refraining from unworthy criticism of colleagues from own and other medicinal systems. While, it is important to function in an evidence-based manner, it is also important not to take an acerbic stance against the practitioners. 7) Being respectful in every communication to the referring physician and family physician, which is crucial for creating a harmonious professional network and reciprocation 8) Being professional in every aspect – maintaining a safe distance. Undue emotional attachment with a patient or caregiver can affect the un-biased clinical acumen and decision-making. 9) Ensuring accurate record keeping. Besides the clinical skills, communications, documentations, documenting communications and communicating documentations are important from medico-legal perspectives. 10) Taking care of personal health and respecting family time. Self-care is considered a core competency. These 10 golden rules shall positively influence astute clinical decision-making and ensure the best possible clinical outcomes for a patient. As a Neurologist, your own physical, mental and emotional health must be intact while dealing with patients. Happiness is infective really.

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Title: Suggestions for a biological definition of Alzheimer Disease

Kurt A. Jellinger | Institute of Clinical Neurobiology, Austria

Abstract:

Alzheimer's disease (AD) is a multifactorial, heterogeneous disorder, morphologically defined by the deposition of β -amyloid ($A\beta$) and abnormal hyperphosphorylated tau. Definite diagnosis is made at autopsy according to the updated NIA-AA criteria. Diagnosis of probable AD in life is possible by the AT (N) biomarker system (2018).

AD includes several biologically defined entities:

- Alzheimer continuum (abnormal $A\beta$ regardless of tau status)
- Alzheimer pathological changes (abnormal $A\beta$ but normal tau)
- Neurodegeneration but negative $A\beta$ (SNAP)
- PART (abnormal tau but negative $A\beta$)
- Classical AD (abnormal $A\beta$ and tau)

Several clinico-pathological subtypes differ from typical AD. The prevalence of biological AD is greater than clinical probable AD at any age, in particular at age 85+ years more than 50% of pathologically diagnosed AD cases show various co-morbidities/mixed pathologies. These findings illustrate AD's magnitude of consequences on public health.

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Title: Multidomain cognitive training in a large range of elderly, from healthy to pathological

Béatrice Alescio-Lautier | Aix-Marseille University, France

Abstract:

The most frequently reported complaint during aging is about memory. This complaint may be influenced by one or more cognitive or non-cognitive factors such as decreased attentional abilities, decreased ability to inhibit irrelevant information, slower information processing, the subject's psycho-emotional state (anxiety, depression, stress, sleep disorders) and psychological factors (loneliness due to isolation, decreased self-esteem, lack of self-confidence...). These age-related cognitive impairments show how much better it is to design multidomain approaches to face cognitive aging and related pathologies.

In this context, we developed a training targeting consciously controlled processes at encoding to improve episodic recall in healthy elderly. We minimize processing at retrieval, by using more familiarity than recollection during restitution process. Then, we adapted this training to patients with mild cognitive impairment (MCI) by more emphasizing the encoding processes and using exclusively recognition as a restitution process. Finally, we developed a version for patients with early stage of Alzheimer's disease (AD). Attention was given to minimize errors and negative experiences. Another aspect of the training was the involvement of the caregiver in the training process.

In healthy elderly, results showed improvements on recall processes and benefits for attentional tasks with high mental load as well as on postural control. We also observed a better memory self-perception and self-esteem of the participants.

In MCI patients, results showed a generalization of the benefits from recognition to recall processes, which are memory components that represent part of the core cognitive impairments in individuals at risk of converting to AD.

In patients with early AD, results show a positive impact of the training on recall processes, and verbal fluency.

In conclusion, our results show that when it is specifically designed, a multidomain training can be an efficient tool to positively act on memory and executive aspects of the cognitive decline found in sub-populations of elderly, from healthy to pathological.

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Title: Role of Tshz3 in the development and function of corticostriatal connections and its involvement in ADS-like behavior

Elise Arbeille | University of Aix-Marseille, France

Abstract:

Tshz3, which encodes for a Zinc-finger transcription factor, has been recently identified as a novel effector in neocortex development. Tshz3-null (Tshz3lacZ/lacZ) mice show defects in layer- specific markers of cortical projection neurons (CPNs), whose human orthologues are strongly associated with Autism Spectrum Disorder (ASD). Moreover, Tshz3lacZ/+ mice heterozygous for Tshz3 exhibit ASD-like behavioral deficits and functional changes at CPNs synapses which are established after birth. While the development of the glutamatergic CPNs has been extensively studied, little is known about the link between ASD and defects in CPNs synapses formation and/or function at postnatal stages. Interestingly, preliminary data suggest that ADS-related behavioral abnormalities involve defects in distinct component of the corticostriatal circuits. Removing Tshz3 from glutamatergic CPNs after the birth results in synapse change at the corticostriatal circuitry and in ASD-like behavior as reported in Tshz3lacZ/+ mice, whether: impairment in social communication and repetitive behaviors. These results reveal a dual role of Tshz3, in development and maturation of the brain circuits implicated in ASD from embryonic to postnatal stages, involving different neural populations. Investigating the reversibility of Tshz3-associated dysfunctions in Tshz3 heterozygous mice by restoring the postnatal expression of Tshz3 in specific neural populations and identifying TSHZ3 direct target genes that are required for proper formation and function of brain circuits will uncover the postnatal function of Tshz3 in corticostriatal circuit formation and maturation related with ASD dysfunctions. To address this, we use a combination of genetics, behavioral tests and imaging experiments.

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Title: Physiology and Pathology of NAMPT in CNS

Shinghua Ding | University of Missouri-Columbia, USA

Abstract:

Nicotinamide adenine dinucleotide (NAD⁺) is an essential cell survival factor that participates in various critical cellular processes, including energy metabolism in the brain. In addition, a large body of evidence has suggested that NAD⁺ plays an important role in the pathogenesis of brain diseases. In mammalian cell, NAD⁺ is predominantly synthesized by salvage pathway, where NAMPT (Nicotinamide Phosphoribosyltransferase), also known as Pre-B-Cell Colony-Enhancing Factor (PBEF) is the rate-limiting enzyme to convert nicotinamide to nicotinamide mononucleotide (NMN). NMN is further converted to NAD⁺ by Nicotinamide mononucleotide adenylyltransferase (NMNAT). Here we show that using inducible and conditional knockout mice, we have found that deletion of Nampt in the projection neurons in adult mice leads to a progressive body weight reduction, motor behavioral dysfunction, paralysis and eventually death. Deletion of Nampt also causes a significant neuronal loss and abnormal dendritic morphology in the motor cortex, global reactive gliosis, and neuromuscular junction (NMJ) abnormalities and dysfunction. We further demonstrate that neuronal deletion of Nampt induced mitochondrial functional defects and hyperacetylation of mitochondrial proteins. Using in vivo and in vitro ischemia models, we found that NAMPT knockout mice had significantly larger infarct volume than wild type (WT) mice after photothrombosis, and neuroprotective effect of NAMPT is dependent on its enzymatic activity. Our results demonstrate that neuronal NAMPT is essential for survival and NAMPT exerts a brain and neuronal protective effect after ischemia through enzymatic activity.

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Title: Giving a voice to neurological disorders in sub-saharan Africa

Chika Okwuolisa | Brain and Spine Foundation

Abstract:

It's a common knowledge that Africa has the least neurological services, and African neurologists and neurosurgeons cannot match the rapid progress in the developed world. And this I write with extreme sadness. As the founder of The Brain and Spine Foundation Africa, it is no gainsaying the fact I am coming from a background of diametric ramifications of health emergencies- ours is a harrowing experience and indeed, a sordid reality that no one can be proud of. Prominent among the challenges in the Nigerian health sector for example, is the escalation of various degrees of neurological emergencies. The world, especially European and American institutions/organizations must rise to this urgency, and bring their technological edges to bear on this very challenging bracket, vis-à-vis the deployment of alleviative fiscal policies. Brain and Spine Foundation, Africa is from the grassroot; we are close to these unfortunate ones who are going through agonies every day, never as a result of any fault of theirs. We hear their cries every day, we see their despairs, because the cost of treatment is usually beyond their reach or there is no neuro-specialist available to attend to them. We render our helps which are usually grossly inadequate. Most importantly, we stay by their sides intentionally to be available for them, and serve as psychological reinforcements for their survival instincts. We watch them die sometimes owing to the lack of adequate facility for treatment and precarious volume of resources available to us, which often empty into paucity sooner or later. Neurological disorders as we all know are associated with high mortality, prolonged hospital stay and socioeconomic burden for the families. Unfortunately, in Sub-saharan African countries, there's a huge disconnect between where disease is and where experts are. We need you, most especially those of African descents to come and help us make changes to our national policies that could help our people. We need your help in working to build up the resources and networks necessary to conduct clinical trials in Africa, and to create education and training programs for health care providers and researchers. We as a Charity Organization are creating awareness, educating the public, providing support and hope, but we also work with the health care structure to ensure there are providers and treatment.

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Title: The Neuroprotective Role of Melatonin in Neurological disorders

Badrah Saeed Ali Alghamdi | King Abdulaziz University, Saudi Arabia

Abstract:

Background: Retroclival hematomas are a rare entity and may occur in 3 compartments, namely the epidural, subdural, and subarachnoid spaces. They are frequently secondary to trauma. Hemophilia is a clinical syndrome affecting usually men and characterized by the inherited tendency to bleed excessively after slight injury. Hemophilia is caused by a specific defect of coagulation factor VIII. The main concern associated with the disease is bleeding, especially after trauma and surgeries. The most serious site of bleeding is the central nervous system.

Case Presentation: An 11-year-old boy diagnosed with hemophilia presented after sustaining a fall. On arrival to the emergency department, his vitals were within normal range and he was fully conscious. Neurologic examination was significant for bilateral abducens nerve palsy; the rest of the examination was unremarkable. Imaging studies with computed tomography (CT) scan and brain magnetic resonance imaging showed subacute retroclival subdural hemorrhage with left cerebellar and upper cervical spine extension. Follow-up imaging with CT scan showed progressive resolution of the hematoma, and the patient had a stable clinical course while receiving factor VII replacement.

Conclusions: Retroclival subdural hematomas are rare and may present either spontaneously or after trauma. Conservative treatment is the usual course of treatment. Patients with hemophilia A are under a constant threat from bleeding, either spontaneous or after trivial injury. The most common cause of death in this patient population is intracranial hemorrhage. The most important aspect of intracranial hematoma management is the early replacement therapy of deficient coagulation factors in patients with hemophilia.

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Title: Proliferating Neural Progenitors after Pallial Injury in juvenile masu salmon *Oncorhynchus masou*

Pushchina Evgeniya Vladislavovna | Russian Academy of Sciences, Russia

Abstracts:

The study of neurogenesis in adult animals constitutes an important area of developmental neurobiology. The purpose of such studies is related with a necessity to identify various types of cells with stem properties in the brain of adult animals for further evaluation of the neurogenesis heterogeneity. In the central nervous system of amniots, postembryonic populations of stem/progenitor cells usually have a glial, radial glial, or astrocytic phenotype. Neuroepithelial cells play a significant role in mammalian embryonic neurogenesis, while glial stem cells are the main source of neurons in postembryonic stages of development. In contrast to mammals, neuroepithelial-like stem cells are present in the brain of teleosts throughout a life. Studies on juvenile salmon fish showed that in the cerebellum of masu salmon and mesencephalic tegum chum salmon, most aNSCs have a neuroepithelial phenotype. In our work, we studied the features of proliferation and migration of neuronal precursors in the pallial proliferative zone of juvenile masu salmon. Studies were conducted by immunohistochemistry on free-floating sections of the brain and Western immunoblotting. The study objective was a comparative analysis of the aNSC markers distribution, such as vimentin and GFAP, as well as the proliferation marker BrdU and migratory neuronal precursors, doublecortin, in the pallial zone of the intact *Oncorhynchus masou* juvenile telencephalon and after mechanical injury. In the periventricular region of telencephalic pallial zone a few non-differentiated cells containing molecular markers of neurons and glia was found. After mechanical injury, the number of cells expressing GFAP and vimentin increases dramatically, neurogenic niches appear, with a heterogeneous cell composition and radial glia fibers. Immunolabeling of BrdU and doublecortin after injury showed a de novo appearance of a large number of young neurons in the periventricular zone and the presence of migrating cells in deep parenchymal layers.

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Title: Partial reconstitution of the hypothalamo-pituitary axes after craniopharyngioma removal and pituitary stalk sectioning

Yoshikazu Ogawa | Kohnan Hospital, Japan

Abstracts:

Background: Pituitary stalk sectioning is only essential in the cases of craniopharyngioma originating from the stalk or metastatic tumor to the stalk. Some patients can discontinue postoperative anti-diuretic hormone (ADH) supplementation with special conditions.

Methods: Sixty-three patients with craniopharyngiomas who were treated by surgery with pituitary stalk sectioning were included in this study. Great care was taken to preserve the fine arteries running along the lateral walls of the third ventricle. Removal rates, changes of endocrinological status, and magnetic resonance imaging (MRI) findings were investigated.

Results: Total removal was achieved in 52 of 54 patients in initial surgery (96.3%), and in 5 of 9 patients in re-treatment (55.6%). ADH supplementation was required in all patients from the day of surgery, but was discontinued in 29 of 54 patients among initial surgery group (53.7%), and in 2 of 9 patients among re-treatment group (22.2%). Preservation of thyroid hormone secretion was observed in 24 of the 31 patients who could discontinue ADH (77.4%), but only in 12 of the 32 patients who could not discontinue ADH (37.5%). Recovery from diabetes insipidus (DI) was significantly associated with preservation of thyroid function ($p < 0.01$). Postoperative MRI showed that the part of the hypothalamus was enhanced in patients with recovery from DI.

Conclusions: Total removal was achieved in 91% of all cases. Half of the patients could discontinue ADH supplementation, which was associated with preservation of thyroid function. The findings of hypothalamic enhancement on postoperative MRI may be associated with recovery from DI.

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Title: Tele-rehabilitation for Language and Cognition

Prabitha Urwyler | University of Bern, Switzerland

Abstracts:

Here two projects ICT-based tools for tele-rehabilitation of cognitive decline and speech will be presented. Engagement in cognitively stimulating leisure activities can help mediate cognitive impairment due to aging and brain injury. Age-related neurocognitive cognitive changes are highly variable and range from normal neurocognitive changes to minor and major neurocognitive disorders. Existing cognitive assessment tools are often unsuitable for repeated use or lack sensitivity to detect subtle neurocognitive changes across time. Recent studies suggest the added value of using video games with enjoyable cognitive activities as an easy-to-use and repeatable tool to assess cognitive abilities. There is currently a need for engaging, user-friendly tasks and repeatable tasks for assessment of relevant cognitive functions. To this end, two difficulty-graded, puzzle games were developed and evaluated to assess neurocognitive functions sensitive to age-related changes. Our results indicate that off-the-shelf puzzle games can be modified in accordance with existing psychological tasks and have potential value as an enjoyable and user-friendly tool to assess age-related neurocognitive changes.

Aphasia is the impairment of language functions that occurs following brain damage. Affected patients undergo face-to-face speech and language therapy (SLT). Research findings particularly highlight positive effects of higher training frequency on functional outcome. A tele-rehabilitation application (Bern Aphasia App) was developed within a multidisciplinary team of speech and language therapists, neurologists, psychologists, and computer engineers. With this application, patients can train independently while the therapists have access to the patients' performance allowing them to tailor the tasks to the difficulty level. The aim of this project is to investigate the effects of high-frequency, short-duration, tablet-based SLT in chronic stroke outpatients in a clinical trial.

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Title: Effectiveness of meditation programs in empirically reducing stress and amplifying cognitive function and boosting individual health status: A review

Reshu Gupta | RUHS College of Medical Sciences, India

Abstracts:

Meditation had long been believed to possess a multitude of putative beneficial effects which it could bestow upon its practitioner, but it was not until the 1960's that scientific exploration into the process began. Rigorous increase in randomized controlled trials on mindful interventions has been observed in past two decades. It has been shown, with increasing evidence, to harbor a myriad of positive effects, a few including, but not limited to, stress reduction, cognition enhancement, an increase in memory, boosted intelligence, etc. Such profound positive influences have led to it being rather commonly deployed to promote general health and treat stress and stress related conditions. Meditative modalities are broadly classified as those stressing on mindfulness, concentration or automated self-transcendence. Certain popular modalities such as transcendental meditation follow the use of a mantra such that one transcends to a state where focused attention is absent. In contrast, others such as mindfulness-based stress reduction are based on present focused awareness or mindfulness. While it is not clear if these differences influence the result of practice, all classes are broadly considered 'meditation' and studied as such.

The session shall evaluate the increasing evidence of mindfulness intervention by reviewing and discussing the effects of mindfulness interventions on boosting memory, recall, learning and reducing stress levels along with the psychological and neurobiological mechanisms of such interventions. This shall provide a robust understanding of the process involved in benefits of practicing mindfulness.

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Title: Co-morbidities in cerebral palsy and social participation

Paola Diaz | Virgen Macarena University Hospital, Spain

Abstract:

Background: Through social and community participation, children and youth with cerebral palsy (CP) form friendships, gain knowledge, learn skills, express creativity, and determine meaning and purpose in life. But they experience a variety of functional limitations that impact on their participation in day-to-day activities.

Aim: This study aimed to determine the trajectories of social participation, by level of motor function and their relation to co-morbidities as intellectual disability, epilepsy, communication, deglutition and feeding, in a Spaniard population of individuals with cerebral palsy (CP).

Method: Prospective cross-section analytic design survey. We collected CP individuals from our Children Rehabilitation Unit (Seville-Spain) over 3 months. Variables analyzed:

1. Demographic (gender, age),
2. Motor function (gross motor function classification system (GMFCS) and manual ability classification system (MACS)),
3. Social participation (child and adolescent scale of participation (CASP)),
4. Cerebral palsy association membership,
5. Intellectual disability,
6. Epilepsy,

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7. Communication (communication function classification system (CFCS)),
8. Sialorrhoea (severity and frequency scale),
9. Feeding (eating and drinking ability classification system (EDACS)).

Results: 39 CP children, between 1-23 years old (mean: 9 years). The most common CP type was quadriplegia (56,4%). Motor function:

1. GMFCS level I-II 46,2%, III 5,1% and IV-V 48,8%.
2. MACS level I 40%, II 7,7%, III 10,3%, IV-V 41%.

Severe communication disfunction: 25,7%.

Mental disability and epilepsy: 56,4% and 53,8% respectively. Association membership: 51,3%.

Participation scale: severe limitation in more 20% CP patients.

- o Older patients achieved less social participation.
- o Worse motor levels were associated to lower participation with $p=0,00$ (Rho Spearman).

Mental retardation, communication disorders, epilepsy, feeding problems, and intensity/severity sialorrhoea proved to be independent characteristics associated with lower social participation (Rho Spearman/ U Mann Whitney) with a statistical significance ($p=0,00$)

Conclusions: Better physical function is associated with a lesser impact of disability; however, the relationship between function, co-morbidities and participation is complex. Measures of participation restriction may assist with goal setting appropriate to the specific needs of the child and family.

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Title: Deficiencies in social cognition and its intergenerational transmission derived from perinatal protein malnutrition in a murine model

Estefanía Aylén Fesser | Buenos Aires University, Argentina

Abstract:

Early life adversities such as maternal malnutrition, has been shown to increase the risk of the onset of psychopathologies through the entire life. The aim of the work is to evaluate the impact of perinatal malnutrition on social cognition.

We used CF1 dams fed with normal (NP, casein 20%) or low protein diet (LP, casein 8%) during pregnancy and lactation, and the offspring were analyzed at P56. We found that contextual recognition memory, social interaction and social memory were impaired in LP mice. Furthermore, LP mice exhibited an increased dominance hierarchy. To investigate the contribution of E/I imbalance in the prefrontal cortex (mPFC) to these behaviors, we evaluate the expression of genes involved in Gabaergic and Glutamatergic transmission and their regulators. LP mice presented a deregulated expression of Gria1, Vglut1, Npas4, Egr1 and Arc than their NP counterparts.

Demethylase Kdm6b, methyltransferases Ezh1 and Ezh2 turned out to be interesting candidates for this study given that methylation/demethylation of H3K27 are involved in neurodevelopment and cognitive abilities. Kdm6b and Ezh1 expression were significantly decreased in the mPFC of LP females while Ezh2 was increased in LP males. Immunoblots revealed global changes in repressive histone marks H3K9me3 and H3K27me3 and activator mark H3K4me3. Expression of HDAC2, 5, 7, 10 and 11 were decreased in LP females.

Finally, deficiencies of contextual and social recognition memory were observed in adult F2 individuals whose mother or both parents were LP. Moreover, mPFC of F2 males exhibited a deregulated expression of Gria1, Egr1 and Arc. F2 females presented a deregulated expression of Vglut1, Jmjd3, Ezh1, Hdac2, Hdac7 and Hdac11 suggesting an intergeneration transmission.

We propose that alteration of epigenetic mechanisms during brain development caused by protein malnutrition could lead to altered E/I balance and subsequent deficits in the social domain that could be transmitted to following offspring.

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Title: Stem cells: The new therapeutical tool in brain injuries

Reza Nejat | Bazarganan Hospital

Abstract:

Brain injury is one of the leading causes of death and disabling conditions all around the globe. Once it was thought that neural loss in different types of injury may not be compensated for as the differentiated neurons did not show any tendency to proliferate like the cells in many other organs in case the brain and the spinal cord encounter any damaging impact. Recently, it has been demonstrated that pluripotent neural stem cells and multipotent neural progenitor cells residing in subventricular zone (SVZ), the hippocampus, the cerebellum, the cerebral cortex, olfactory bulb (OB) and the spinal cord keep their capability to replenish and regenerate the lost neural tissue.

Since 1950s adult stem cells and since 1988 embryonic stem cells have drawn the attention of many clinical investigations for their therapeutic potentials. Not only does repairing the traumatized tissue of the brain need the proliferative the ability of the parenchymal cells but the newly replaced cells should achieve the functionality of the lost tissue. A growing number of studies have shown in cortical injuries that neuroblasts originating from SVZ stem/progenitor cells find their migratory way to the penumbra area of the injured brain tissue and differentiate into neurons and glial cells to replace the lost neurons. In addition, in the preclinical investigation of experimental brain insults and in some clinical studies, bone-marrow-derived mesenchymal stem cells (MSC) have shown their high capability in regenerating and replacing the lost neurons and forming and integrating synapses, restoring the blood-brain barrier integrity and decreasing edema, resolving and modulating neuroinflammation, as well as activating the microglia and reducing brain parenchymal deposition of amyloid- β . It is wise to notify that stem cells residing in different locations of the brain differentiate under the influence of signaling factors released in their environment. Vice versa, stem cells may exert their repairing effect through releasing some paracrine signaling factors like TSG-6 or TIMP to distant damaged neural tissues.

In this review, the ability of stem cells in regenerating and restoring of the functionality of the lost neural tissues is discussed.

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Title: Cerebellar involvement in fear learning

Jimena L. Frontera | Institut de Biologie de l'Ecole Normale Supérieure, France

Abstract:

Fear conditioning is a form of learning that serves as model to study the neurobiological basis of disorders of fear and anxiety. The role of brain structures such as the amygdala and the prefrontal cortex in these phenomena is well established, but recent data indicate an involvement of the cerebellum in emotional disorders. Using a combination of neuroanatomy, behavior, chemogenetic approaches, and electrophysiology, we have been studying the involvement of the cerebellum in fear conditioning and extinction. Through neuroanatomical tracing we found fibers from fastigial nucleus of the cerebellum projecting to the ventrolateral periaqueductal grey (vIPAG), which is known to be important for fear responses. Moreover, we have determined that the FN projections to vIPAG corresponds to glutamatergic neurons and that they synapse onto glutamatergic and GABAergic neurons in the vIPAG. Therefore, we investigated the effects of transient inhibition or activation of neuronal activity of cerebellar projections to vIPAG, during fear conditioning and extinction in mice. Through chemogenetic and optogenetic manipulations, we found a robust modulation on the strength of the fear memories during the fear learning, and to the extinction learning by fastigial-vIPAG pathway. Taken together, these results indicate that the cerebellum exert a powerful effect on emotional behaviors.

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Title: Sex differences in Sport-related Concussion in Japan

Haruo Nakayama | Toho University Ohashi Medical Center, Japan

Abstract:

Objective: To evaluate the Sex differences in Sport-related Concussion in Japan.

Methods: The study design was retrospective study. Facility is Toho University Ohashi Medical Center Neurosurgery Sports-related head injury clinic. The search period is April 2017 to February 2018. Inclusion criteria were as follows: 1) Sports-related head injury cases, 2) Physician-diagnosed Sports-related concussion, 3) Underwent evaluation by the same neurosurgeon, 4) More than 28 days continued follow-up. The following items were compared male and female. The examination items were as follows: 1) Age/sex, 2) competition item, 3) prior concussion, 4) Migraine history, 5) persistent post concussive symptoms. Statistical analysis used t test.

Results: The 140 selected cases were 114 male (Group M: GM) and 26 female (Group F: GF). The mean Age of both GM and GF was 20 years. The most majority competition item of GM was Rugby football. On the other hand, GF was lacrosse. 42 cases of GM and 9 cases of GF suffered prior concussion ($p > 0.05$, no significant). 19 cases of GM and 6 cases of GF had migraine history ($p > 0.05$, no significant). 37 cases of GM and 16 cases of GF had PPCS ($p < 0.05$).

Conclusions: Our result suggests that female players explain the significant difference in the prevalence of PPCS in Japan.

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Title: Oxidative stress is caused by haptoglobin polymorphism

Victor Manolov | Medical University – Sofia, Bulgaria

Abstract:

Objectives: Human gene of haptoglobin is presented by two alleles. Haptoglobin types are 1-1, 1-2 and 2-2. Different studies shows role of type 2-2 in cardio-vascular disease occurrence during diabetes.

Scope: Haptoglobin type 1 is known to suppress hemoglobin based oxygenation of HDL and LDL, acting like antioxidant. We aimed that Bulgarian population is haptoglobin 2-2 type, which causes frequent morbidity by systematic diseases, such as atherosclerosis, diabetes, diabetic nephropathies, gestational diabetes, anemia, etc.

Results: Increased serum hepcidin concentrations were established in patients with atherosclerotic a. carotis changes ($99.1 \pm 10.8 \mu\text{g/L}$) compared to healthy controls ($20.2 \pm 2.9 \mu\text{g/L}$), $P < 0.001$. In haptoglobin type 2-2, was found strong positive correlation between hepcidin levels and changed IMT and ABI ($r = 0.911$, $r = 0.935$, resp.; $P < 0.05$). Three volunteers were with haptoglobin type 2-1; no changes of serum hepcidin concentration and IMT, ABI was found in this phenotype.

Methods: 37 volunteers were included, age 33.9 ± 4.1 . IMT, ABI, CBC, iron homeostasis, hsCRP and haptoglobin type were evaluated.

Conclusion: The main reason for acute coronary thrombosis is atherosclerotic plaque rupture. Extra-vascular hemoglobin plays role as start mechanism for inflammation in the plaques. Important contra-active mechanism is played by haptoglobin. Thus, it prevents kidney injury from free hemoglobin. Released iron from destructed erythrocytes forms reactive oxygen radicals through Fenton's reaction. Hepcidin regulates iron homeostasis by its interaction with intracellular iron exporter ferroportin.

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Title: Improved balance in healthy elderly after attentional training targeting controlled processes

Liliane Borel | Aix-Marseille University, France

Abstract:

The effects of aging on postural control do not result solely from the alteration of sensory and motor functions regulating balance. Cognitive aging, including the decline in attentional control, is an important factor that has been revealed by the dual-task paradigm. In this paradigm, attentional resources should be shared to achieve correct postural and cognitive tasks. The aim of this study was to analyze the relationship between postural and cognitive functions with a new perspective: we tested the hypothesis that a specific training which targeted consciously controlled processes and their attentional control would improve postural performance in dual-task situations due to a better management of the two simultaneous tasks.

To this aim, subjects were trained with a personalized cognitive training program based on cognitive-cognitive dual-tasks. We evaluated the benefits of training on pre- and post-training postural and cognitive dual tasks in a group of 8 subjects (77 ± 5 years) and compared the performance with those of a group of 9 untrained subjects (74 ± 4 years). Our pre- and post-training dual-task paradigm is based on postural (dynamic conditions) and cognitive tasks (visual-spatial memory).

The results show an improvement in postural performance of trained subjects. On the contrary, there is no change in cognitive performance. Therefore, the improvement of postural performance could come from improved management of attentional sharing, with more effect on postural than on cognitive task. We hypothesize that our attention training that emphasized highly controlled processes and yielded benefits for the practiced tasks promoted training transfer to postural balance functions by positively affecting sensory information processes necessary to maintain balance.

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Title: Numb chin syndrome - The first finding in metastatic malignancy

Nihat Mustafayev | Bezmialem Vakif University, Turkey

Abstract:

Objective: Numb chin syndrome (NCS) is a sensory neuropathy of the mental nerve, which is accompanied by hypoesthesia and paresthesia of the jaw and lower lip. Although being well known in neurology practice, most of the physicians who have not experienced this phenomenon are unaware of this phenomenon since it is rare and can be confused with somatic complaints. This case report aims to point out that NCS may be the first sign and symptom of metastatic cancers in patients who are not diagnosed.

Case: We report a 52-year-old man who presented to our outpatient clinic with numbness on his right jaw for 1 month. He had a history of renal transplantation and used immunosuppressive therapy. He was diagnosed as metastatic lung cancer when he was investigating the etiology and died within a month.

Discussion: Patients presenting with numb chin syndrome are diagnosed late because of being rare. 75% of the patients presenting with this complaint are due to malignant metastasis and maybe the first sign of malignancy in a significant rate of them, as presented here. Many malignant and metastatic neoplasms may cause this neuropathy. In most cases, life expectancy is short and is considered as a sign of poor prognosis.

Conclusion: Numb chin syndrome is a lesser known symptom of mental nerve neuropathy. In case dental and jaw-related pathologies cannot be detected, it should be kept in mind that this may be the first sign of malignancy and all detailed investigations should be planned for this purpose.

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Title: A metabolic shift; the missing link I CNS diseases

John Dirk Vestergaard Nieland | Aalborg University, Denmark

Abstract:

The etiology of CNS diseases such as multiple sclerosis, Parkinson's disease, amyotrophic lateral sclerosis and depression remains elusive despite decades of research resulting in treatments with only symptomatic effects. Metabolic alterations play a central role in numerous CNS diseases. In our research we provide evidence that a metabolic shift from glucose to lipid metabolism is a key mechanism in a diverse set of CNS disorders using a multidimensional systemic approach. We show that by downregulating lipid metabolism through the key molecule carnitine palmitoyl transferase 1 (CPT1) we are able to reverse or downregulate disease progression in animal models of MS, PD, depression and ALS. The effect was seen both when applying a pharmaceutical blocker or by using a *Cpt1a p479I* mutant mouse strain. Further, we show that diet, epigenetics and microbiota are key elements in this metabolic shift. Based on these data we have developed a systemic model for understanding the complex etiology behind diseases affecting the CNS and how different systems are interconnected via a metabolic balance. This model is able to explain most if not all symptoms seen in these diseases, and also visualizes the difficulty in finding specific markers genetic and physiological biomarkers of disease induction and progression.

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Title: Functional MR Imaging in preoperative planning of glial tumors

Rafael Martins Ferreira | Universidade Federal de Santa Catarina, Brazil

Abstract:

Functional Magnetic Resonance Imaging (fMRI) is a technique that takes advantage of the differences in magnetic susceptibility between oxyhemoglobin and deoxyhemoglobin. Once the goal of neurosurgery is to maximize patient safety and to minimize residual tumor, fMRI may be an alternative, non-invasive and reproducible tool for assessing potential risk of dysfunction resulting from brain resection near eloquent cortex. Tumoral mass effects can distort normal cortical anatomy losing anatomical landmarks. So fMRI studies with specific – tasks combines structural with physiological information and provides data helping in localizing cortex controlling language, motor, sensory, hearing and visual pathways , according to tumor region. In addition, many studies confirm the large individual variability in cortical localization of language and fmri data may aid in the determination of language laterality and localization of Wernicke's and Broca's areas in cases of temporo-parietal lesions. Althout fmri can show cortical signals, imaging the White matter bundle may be just as crucial. Therefore Diffusion Tensor imaging complements fMRI examinations and provides the surgeon with fiber-tracking information. In summary, fMRI data can alter a neurosurgical approach to a tumor, indicates eloquent cortex in distorted areas, guide surgical resections or even emphasize too high risk in total tumor resection in other cases. Clinical cases showing such fMRI applications and a literature review about clinical outcomes is presented.

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Title: Post stroke cognitive impairment

Mohamed Anwar El Etribi | Ain Shams University, Egypt

Abstract:

Introduction: The main stream of modern management of stroke focus on awareness of patients to call and transfer after developing facial deviation or dysarthria or paralysis (FAST) to a stroke unit for thrombolysis and rehabilitation to follow. Transient Ischemic Attacks are dealt with differently with a delayed response due to ignorance of patients and consultations directed to various specialists according to symptomatology. Most patients with vertigo will be seen first by audiology while those with visual symptoms like scotoma will be checked by ophthalmologists and Cognitive Impairment and change of behavior by psychiatrists and treated as a complication of depression. They are not referred to neuro-check as a routine. Cognitive assessment in Transient Ischemic Attacks are not done as a routine.

The aim of work in this work is studying Cognitive Impairment in patients with Transient Ischemic Attacks.

Method: Eighteen patients with Transient Ischemic Attacks are assessed neurologically and medically with a cognitive test (CNS test) and radiological assessment with MRI plus zung test to exclude depressive patients.

The result of the study indicated Cognitive Impairment in eleven patients with multi-lacunar infarction in fifteen.

Conclusion: Awareness of various presentation of Transient Ischemic Attacks by patients and physicians may increase the chances of treatment and prevention of major stroke that really damage its functions.

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