



GNG Newsletter – February 2026

We have completed another month at GNG. We shared several papers and had a few clinical discussions in our WhatsApp group.

February Academic Meeting – Autism and ADHD in Women and Girls

We hosted our academic meeting on neurodiversity in women with the help of the RADiANT groups Dr Verity Chester, and Australian Psychiatrist Dr Dianne Grocott. It was very well received. Please see the recording here:

<https://globalneuropsychiatry.org/webinars/>

GNG Connect is Live!

We're excited to launch GNG Connect, the official Global Neuropsychiatry Group App. All current members have been added and should have received an email with login details and download links (check your spam folder if needed).

Once logged in:

- Click the top left menu bars
- Go to Discussion
- Open the Main Discussion Room (everyone is already in it)
- Post and reply just like WhatsApp

You can also:

- ✓ Upload files and images
- ✓ View events in the calendar
- ✓ Update your own details, including username and password, directly in the app

Access is exclusive to GNG website members.

If you're currently engaging only via WhatsApp or email, please join us by registering as a member at: www.globalneuropsychiatry.org

We look forward to connecting with you all on GNG Connect!

Our next Academic Meetings include

Trainee Journal Club

19 March 2026 4pm -5pm Central US time

[Register Here](#)

[Get Flyer](#)

‘Long-Term Therapy With Transcranial Magnetic Stimulation in Primary Progressive Aphasia: A Randomized Clinical Trial’

Lucía Fernández-Romero, María Nieves Cabrera-Martin, et al
JAMA Netw Open -Published Online: August 11, 2025.

Download Paper: <https://tinyurl.com/yc2k6djw>

Meeting Link: <https://tinyurl.com/4u6f8j6v>

Presenter: Ganapathiram (Ram) Nambi

PGY6, Combined Neurology/Psychiatry Chief Resident Medical University of South Carolina, USA.

Chair: Alexandra Touroutoglou, MSc., Ph.D.

Associate Professor of Neurology, Harvard Medical School
Director of Imaging Operations at the Mass General Frontotemporal Disorders Unit, Massachusetts General Hospital, USA.

Expert Panel Members:

Mark S. George, MD

Distinguished University Professor of Psychiatry, Radiology and Neuroscience
Layton McCurdy Endowed Chair, Director, Brain Stimulation Division
Editor-in-Chief, Brain Stimulation: Basic, Translational and Clinical Research in Neuromodulation
Medical University of South Carolina , USA.

Nicholas Milano, MD

Associate Professor of Neurology
Director of Cognitive and Behavioral Neurology
Medical University of South Carolina , USA.

The INA / GNG Journal Club is a trainee-led forum to discuss exciting neuropsychiatric research & encourage international collaboration.

Monthly Academic Meeting on 26th March 2026– Theme is epilepsy

[Register Here](#)

[Get Flyer Here](#)

We hope to provide you all with approximately 30 hours' equivalent of CPD activity in 2026.

International Survey on Knowledge of Psychoses Associated with Epilepsy

Dear colleagues,

I am conducting a short international survey assessing physicians' knowledge and clinical experience regarding psychoses associated with epilepsy, as part of my PhD project.

The questionnaire takes approximately 4–5 minutes to complete and is fully anonymous. At the end, you can download a brief summary about the topic

Your participation would be greatly appreciated and will help improve understanding and education at the interface between neurology and psychiatry.

Survey link: <https://enquetes.univ-lorraine.fr/index.php/244435?lang=en>

Thank you very much for your time and support.

Best regards,
Dr. Alexis Tarrada

Resources for Patients

We are keen to collect resources for patients. If anyone could help, that would be great.

<https://globalneuropsychiatry.org/patient-resources/>

We have updated our website. Have a look at that.

<https://globalneuropsychiatry.org/>

Podcast - Song of the Cerebellum

Here is a link to the podcast, shared by David L Perez

<https://radiolab.org/podcast/song-of-the-cerebellum>

You tube Channels

Here is a link to Vasilisa Zhukova Youtube channel episode – the fabric of memory

<https://youtu.be/Mfwu2Unm2ag>

GNG and Vasilisa have launched another YouTube channel. Our first guest was Prof Sachdev

https://youtu.be/7sT9_OXTsHY

Interesting Reads!

Very interesting read on **Sertraline induced MADD** - Acquired multiple acyl-CoA dehydrogenase deficiency is a reversible metabolic neuromuscular disorder, often associated with sertraline use, and needs to be recognised early to allow rapid recovery with riboflavin therapy.

<https://pn.bmj.com/content/practneuro/early/2026/02/09/pn-2025-005016.full.pdf>

Prof Stone posted: This is not a rare problem and is probably under-recognised. Colleagues collected nearly 20 cases just in the west of Scotland. Many were bedbound or in wheelchairs at their worst.

Think of it in people with limb weakness on sertraline, especially if overweight or nutritionally compromised. MEASURE the CK.

It seems to be sertraline specific, and it's reversible if you find it mainly by stopping the drug. Suspect that, over time, it will discourage Sertraline use.

Clinical Validation of the Behavioural Evaluation Scale of Frontotemporal Dementia: A Pilot Study

<https://psychiatryonline.org/doi/10.1176/appi.neuropsych.20250120>

The BES-FTD, a scoring instrument developed for the Latin American context, demonstrated higher diagnostic accuracy than the CBI-R for distinguishing between bvFTD and AD. The BES-FTD had higher specificity (93.7%) than the CBI-R (81.2%).

Catatonia-Related Clinical Challenges in Neurological and Neurodevelopmental Conditions

<https://psychiatryonline.org/doi/10.1176/appi.neuropsych.20250044>

Catatonia is a complex neuropsychiatric syndrome that often overlaps with neurological conditions, making diagnosis and management difficult. It is seen in disorders such as epilepsy, anti-NMDAR encephalitis, autism spectrum disorder, traumatic brain injury, dementia, and delirium. While benzodiazepines are commonly used for treatment, their effectiveness varies, and alternative therapies may be necessary. Careful assessment is critical due to overlapping symptoms and potential risks, and multidisciplinary collaboration is essential for effective management and improved outcomes.

Neuropsychiatric Features in Patients With Idiopathic Normal Pressure Hydrocephalus

<https://www.neurology.org/doi/10.1212/CPJ.0000000000200586>

A systematic review and meta-analysis found high prevalence of apathy (69.2%) and depression (30.1%) in idiopathic normal pressure hydrocephalus (iNPH). Treatment may reduce depression, but further research is needed to understand other neuropsychiatric features and their response to treatment.

2024 Diagnostic Criteria for Multiple Sclerosis—A Unified Approach

<https://jamanetwork.com/journals/jamaneurology/fullarticle/2841154>

The 2024 McDonald criteria for multiple sclerosis (MS) unify the disease under a single framework, emphasising biological markers for diagnosis. Notable changes include the optic nerve as a fifth anatomical location, the ability to diagnose MS without dissemination in time (DIT), and the inclusion of asymptomatic individuals and those with non-specific symptoms. The criteria also incorporate new imaging and CSF biomarkers, such as the central vein sign (CVS) and paramagnetic rim lesions (PRL), to enhance diagnostic accuracy.

Muscular Strength and Mortality in Women Aged 63 to 99 Years

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2845052?widget=personalizedcontent&previousarticle=2773785>

A study of 5472 women aged 63 to 99 found that greater muscular strength, measured by hand grip strength and chair stand time, was associated with lower mortality. This association remained significant even after controlling for physical activity, sedentary behaviour, walking speed, and systemic inflammation. The findings suggest that assessing and promoting muscular strength are important for optimal ageing.

Coffee and Tea Intake, Dementia Risk, and Cognitive Function

<https://jamanetwork.com/journals/jama/fullarticle/2844764>

A study of over 131,000 participants found that higher caffeinated coffee and tea intake was associated with lower dementia risk and modestly better cognitive function. The most pronounced associations were observed with moderate intake levels, approximately 2-3 cups of caffeinated coffee or 1-2 cups of tea per day.

Association of sleep duration in middle and old age with incidence of dementia

<https://www.nature.com/articles/s41467-021-22354-2>

Short sleep duration (six hours or less) at age 50 and 60 is associated with a higher risk of dementia, even after accounting for various health and lifestyle factors.

Sex Differences in Amyloid Pathology by Race, Ancestry, and Apolipoprotein 4 in an Admixed Autopsy Sample*

<https://jamanetwork.com/journals/jamaneurology/fullarticle/2845467>

This study investigated how sex, race, African ancestry, and APOE ϵ 4 genotype relate to amyloid pathology in a diverse postmortem cohort. Results showed that females had higher levels of advanced Alzheimer's disease pathology than males, regardless of cognitive status, though this difference was less pronounced after adjusting for tau pathology. Black race and African ancestry were linked to lower neuritic plaque burden, independent of sex. These findings suggest that sex, race, ancestry, and APOE ϵ 4 genotype all influence amyloid pathology severity, emphasising the importance of considering these factors in biomarker development and therapeutic strategies for Alzheimer's disease.

Progressive Changes in Brain Morphology in People With Idiopathic Generalized Epilepsy

<https://www.neurology.org/doi/10.1212/WNL.0000000000214647>

This study investigated brain changes in people with poorly controlled idiopathic generalised epilepsy (IGE). Chronic IGE, especially with persistent generalised tonic-clonic seizures or photosensitivity, showed widespread cortical thinning and subcortical atrophy compared to controls. Valproate use may be associated with reduced structural changes.

Transient Global Amnesia and High-Grade Styloidogenic Jugular Vein Stenosis

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2845571>

This study investigated the association between styloidogenic jugular vein compression (SJVC) and transient global amnesia (TGA). It found that TGA patients exhibited higher rates of right-sided and bilateral SJVC stenosis compared to controls, suggesting SJVC severity as a potential imaging marker for TGA diagnosis.

The “Hallett Sign” of Functional Jerky Movement Disorder

<https://movementdisorders.onlinelibrary.wiley.com/doi/10.1002/mds.70213>

Tribute to Dr. Mark Hallett, a pioneer in movement disorders and FND.

The “Hallett sign,” a physical sign of functional movement disorder, is an anticipatory jerk observed in some individuals with hyperkinetic functional movement disorder, even without tendon reflex testing. This sign, characterised by long and variable latency, highlights the complexities of free will and volition in movement disorders.

Hope you all are finding it helpful. Please share any feedback. If you wish to share anything with us, please let us know.

Please consider joining one of our discussion groups

- Child neuropsychiatry
- Neuromodulation
- Trainee group
- Neurodevelopmental Disorder Group
- GNG Research Group

Upcoming events

<https://bnpa.org.uk/wp-content/uploads/2026/02/BNPA-2026-DRAFT-programme-5.pdf>

<https://www.fndsociety.org/biennial-meeting/2026>

<https://cinp2026.org/>

<https://ilaebritish.org.uk/events/20th-specialist-epilepsy-teaching-weekend/>



GNG-INA Neuropsychiatry Journal Club



Thursday 19th March 2026 – 4pm – 5pm Eastern US Time

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Associate Professor of Neurology
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Meeting Link



<https://tinyurl.com/4u6f8j6v>

*The GNG –INA Journal
Club is a trainee-led
forum to discuss
exciting
neuropsychiatric
research & encourage
international
collaboration!*

Paper



<https://tinyurl.com/yc2k6djw>



MORE INFORMATION:

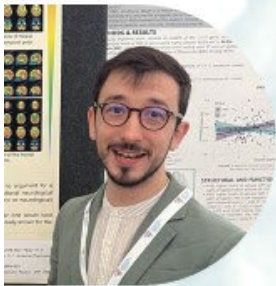
Email: contact@globalneuropsychiatry.org **Web:** <https://globalneuropsychiatry.org/>
Join the GNG here: <https://globalneuropsychiatry.org/become-member/>



Join us for the
Global Neuropsychiatry Group (GNG)
Monthly Academic Meeting

Thursday 26 March 2026
6:30am – 8:30am Eastern Time (USA)
11.30am – 1.30pm BST (Britain and Spain)
10.30pm-12.30 AEDT (Australia)

PSYCHOSIS & NEUROPSYCHIATRY OF EPILEPSY



Presenters:

Docteur Alexis Tarrada (France)

TITLE: PSYCHOSIS OF EPILEPSY

Docteur Alexis Tarrada Psychiatre, Praticien Hospitalier Contractuel. Alexis is a psychiatrist and hospital practitioner with expertise in the neuropsychiatric aspects of epilepsy. His clinical work focuses on psychiatric disorders associated with epilepsy, including psychosis related to seizure disorders.



Professor Rohit Shankar MBE, FRCPsych (United Kingdom)

TITLE: NEUROPSYCHIATRY OF EPILEPSY IN ID

Rohit Shankar is Professor in Neuropsychiatry at the Peninsula School of Medicine, University of Plymouth. He is also Associate Dean for Academic Training at the Royal College of Psychiatrists and Clinical Director for Adult Learning Disability Services at Cornwall Partnership NHS Foundation Trust. His work focuses on epilepsy and neuropsychiatric care in people with intellectual disability.



Session Chair

Dr Rhys H. Thomas, BSc, MBChB, MSc, PhD, FRCP (United Kingdom)

Dr Rhys H. Thomas is a Reader in Epilepsy at Newcastle University and an Honorary Consultant Neurologist at the Royal Victoria Infirmary. His work focuses on the causes and consequences of epilepsy, particularly genetic epilepsies and epilepsy in people with intellectual disability. He leads clinical and research programs in epilepsy and serves as President of the British branch of the International League Against Epilepsy.

Email: contact@globalneuropsychiatry.org

Web: www.globalneuropsychiatry.org

Register: <https://tinyurl.com/yc4r9759>

