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Editorial

Trainee Award Announcement



This year's coronavirus disease pandemic and the increased awareness surrounding racial injustice has challenged us to find new ways to help children and young adults with neurological illness while also improving access to care for all. Recognizing and supporting talented trainees to lead the next generation of clinical pediatric neuroscientists is essential. Please join the journal's Trainee Award Selection Committee and the journal's editors in congratulating Gracia De Jong, MD (Fig), from the Detroit Medical Center Children's Hospital of Michigan, the recipient of the 2020 *Pediatric Neurology* Trainee Publication Award for her article "Rapid sequence MRI protocol in the evaluation of pediatric brain attacks."¹

This annual award recognizes the most outstanding first author publication in the previous year by a neurology or neurosurgery resident or fellow. We began our trainee mentoring program in 2013 to encourage residents and fellows to contribute scholarly work under the guidance of experienced faculty. The criteria for excellence include clinical impact, study design, and manuscript preparation.

Dr. De Jong and colleagues sought to evaluate the clinical utility of rapid sequence magnetic resonance imaging using diffusion-weighted imaging (DWI) and fluid-attenuated inversion recovery (FLAIR) sequences in children with acute ischemic strokes and non-stroke brain attacks. They identified 59 patients for whom their Pediatric Stroke Clinical Pathway was activated, and 52 of these individuals were included in the analysis. Most patients were female (55.8%) and African American (61.5%), with a median age of 12 years. Six patients had an ischemic stroke. Seizures, migraines, and psychosomatic disorders (each with 13.5%) were the most common nonstroke diagnoses. DWI was more sensitive (100% versus 80%) and specific (73.9% versus 37.2%) compared with FLAIR in the identification of an ischemic stroke. However, FLAIR was useful in detecting inflammatory and metabolic disorders. They conclude that rapid sequence magnetic resonance imaging can be used as a screening imaging modality in children with suspected brain attacks. Mirsky et al. caution that, although the International Pediatric Stroke Study has proposed an imaging algorithm for childhood stroke using DWI for rapid diagnosis, FLAIR may be helpful in diagnosing stroke mimics.² De Jong and colleagues

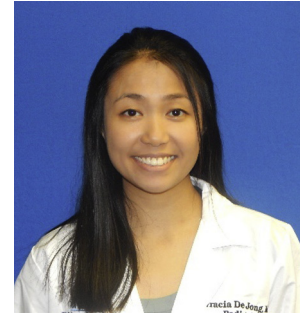


FIGURE. Gracia De Jong, MD.

acknowledge that a larger, prospective study would provide more evidence for their conclusions.

Congratulations, Dr. De Jong, and thanks to your colleagues for their excellent mentorship.

References

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