Neurology and neurosciences are becoming more and more specialised, and research in the field is creating an enormous amount of data. In our daily practice we need often specialist and dedicated persons, with knowledge, and a clinical and academic approach, to summarise the data. This is why in the surveys you completed, a majority asked, among other points, for more reviews on current topics. This is why we propose, for the next issues of SANP, an orientation towards educational dossiers, particularly on topics that were proposed at the last SNG Congress in Interlaken, during the 190th Annual Meeting of the Swiss Neurological Society, in collaboration with other societies, particularly the Swiss Society of Intensive Care Medicine.

The first dossier comes from some of our neurointensivist colleagues, who kindly agreed to write a report on what they presented. ICU Teachers were the first to send their manuscripts and we propose to present their reflections, which are also important for neurologists. Bernard Frey presents some arguments on how problems should be handled in the difficult case of Hypothermia in paediatric traumatic brain injury: cons. His paper does not question the importance of hypothermia in the intensive management after asphyxia or cardiac arrest where it has very interesting results, but aims to make doctors cautious on some points potentially related to issues when hypothermia is proposed after TBI, at least in children. The second paper is a minireview on Glucose control in the ICU, by Karin Amrein and Tadeja Urbanic Purkart; this is a very important topic also in neurology – particularly after stroke – and the authors remind us that glucose should be ideally kept under 150 mg/dl in the ICU, although the margin is less strict in patients with preexisting diabetes. A third ICU paper will appear in the next issue. Finally a case report Malformation d'Arnold-Chiari et apnée centrale du sommeil by Guinhouya et al. reminds one that interesting case reports are welcome in our journal.

Enjoy the reading.