

*Despite the undisputed positive impact of new drug treatment in multiple sclerosis, the so-called disease-modifying substances, symptomatic therapy and neurorehabilitation have a well-established role. S. Beer and J. Kesselring (Neurorehabilitation in multiple sclerosis) review the role of rehabilitation measures. Neurorehabilitation has been shown to ease the burden of some of the disabling symptoms, even though rehabilitation has no direct influence on disease progression. Studies have shown that neurorehabilitation can improve personal activities and ability to participate in social activities, thereby ameliorating quality of life. Treatment should be adapted depending on the individual patient's needs and treatment goal.*

*The Swiss Archives of Neurology and Psychiatry have on the occasion of the 100th anniversary of the founding of the Swiss Neurological Society in 2008 published a series of articles on the history of neurology in Switzerland. C. L. Bassetti and P. O. Valko propose a "History of the Swiss Neurological Society (SNS) in the context of the national and international development of neurology". In this short history they highlight some of the particular exciting and important events in the development of the society. The gallery of the portraits of all past*

*(and present) presidents of the SNS may interest many readers. We hope that the SNS will in the future serve the need of Swiss neurologists as successfully as it did in the past.*

*Modern medicine can no more exist without guidelines. We are grateful to H. P. Ludin and his committee for updating the guidelines for the treatment of Parkinson's disease (in this issue in French). The updated guidelines for the management of Parkinson's disease are more comprehensive and will help physicians to choose the most appropriate medication in the treatment of the various symptoms of Parkinson's disease.*

*Transient global amnesia (TGA) has been a well-described phenomenon for more than 40 years. The precise pathophysiology of TGA is not clear, though a vascular mechanism has received support from the finding of acute DWI changes. D. Eschle and H.-G. Wieser review data suggesting that TGA could be an epileptic phenomenon and suggest that magnetoencephalography, a technique that has to date never been used during TGA, might offer more insight into the pathophysiology of TGA.*

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