ON-LINE APPENDIX: JOURNALS WITH INCLUDED ARTICLES

Radiology Journals

1. *AJNR Am J Neuroradiol*
2. *Clin Imaging*
3. *Eur J Paediatr Neurol*
4. *Hell J Nucl Med*
5. *Indian J Radiol Imaging*
6. *Interv Neuroradiol*
7. *J Comput Assist Tomogr*
8. *J Neuroimaging*
9. *J Neuroradiol*
10. *J Vasc Interv Radiol*
11. *Pediatr Radiol*
12. *Radiology*

Clinical Journals

1. *Acta Clin Croat*
2. *Acta Neurochir (Wien)*
3. *Acta Neurol Belg*
4. *Acta Neurol Taiwan*
5. *Acta Otolaryngol*
6. *Alzheimers Dement*
7. *Ann Indian Acad Neurol*
8. *Ann Neurol*
9. *Ann Rheum Dis*
10. *Arch Dis Child*
11. *Arch Neurol*
12. *Arch Ophthalmol*
13. *Arq Neuropsiquiatr*
14. *Arthritis Care Res*
15. *Arthritis Rheum*
16. *Biomed Imaging Interv J*
17. *BMC Neurol*
18. *BMJ Case Rep*
19. *Brain Dev*
20. *Can J Neurol Sci*
21. *Cases J*
22. *Cephalalgia*
23. *Cerebrovasc Dis*
24. *Clin Neurol Neurosurg*
25. *Clinics (Sao Paulo)*
26. *Dev Med Child Neurol*
27. *Eur J Neurol*
28. *Eur J Paediatr Neurol*
29. *Headache*
30. *Intern Med*
31. *J Child Neurol*
32. *J Clin Neurosci*
33. *J Clin Rheumatol*
34. *J Coll Physicians Surg Pak*
35. *J Headache Pain*
36. *J Korean Med Sci*
37. *J Med Assoc Thai*
38. *J Med Case Rep*
39. *J Neuroinflammation*
40. *J Neurointerv Surg*
41. *J Neurol*
42. *J Neurol Neurosurg Psychiatry*
43. *J Neurol Sci*
44. *J Neuroophthalmol*
45. *J Neurosurg*
46. *J Rheumatol*
47. *J Stroke Cerebrovasc Dis*
48. *J Vasc Interv Neurol*
49. *Joint Bone Spine*
50. *Jpn J Infect Dis*
51. *Jpn J Opthalmol*
52. *Korean J Pediatr*
53. *Middle East Afr J Ophthalmol*
54. *Mult Scler*
55. *N Engl J Med*
56. *Nat Clin Pract Neurol*
57. *Nat Rev Neurol*
58. *Neurol India*
59. *Neurol Int*
60. *Neurol Med Chir*
61. *Neurol Sci*
62. *Neurologia*
63. *Neurologist*
64. *Neurology*
65. *Neurotoxicology*
66. *Open Rheumatol J*
67. *Otolaryngol Head Neck Surg*
68. *Pediatr Cardiol*
69. *Pediatr Dermatol*
70. *Pediatr Neonatol*
71. *Pediatr Neurol*
72. *Pediatr Rheumatol On-line*
73. *Pract Neurol*
74. *Retina*
75. *Rev Med Chil*
76. *Rheumatology (Oxford)*
77. *Seizure*
78. *Stroke*
79. *Surv Ophthalmol*
80. *Turk Neurosurg*

On-line Table: Brief description of identified original research articles

	Clinical Journals[a]	
Condition	**Reference**	**Study Description[b]**
RCVS	Renou P, Tourdias T, Fluery O, et al. Atraumatic nonaneurysmal sulcal subarachnoid hemorrhages: a diagnostic work-up based on a case series. *Cerebrovasc Dis* 2012;34:147–52	Characterizes causes of sulcal subarachnoid hemorrhage identified with imaging
RCVS	Mandell DM, Matouk CC, Farb RI, et al. Vessel wall MRI to differentiate between reversible cerebral vasoconstriction syndrome and central nervous system vasculitis: preliminary results. *Stroke* 2012;43:860–62	Vessel wall enhancement found to be indicative of vasculitis rather than RCVS
RCVS	Chen SP, Fuh JL, Lirng JF, et al. Hyperintense vessels on FLAIR imaging in reversible cerebral vasoconstriction syndrome. *Cephalgia* 2012;32:271–78	Hyperintense vessels on FLAIR imaging are correlated to RCVS time course, disease severity, and ischemic complications
RCVS	Neel A, Auffrey-Calvier E, Guillon B, et al. Challenging the diagnosis of primary angiitis of the central nervous system: a single center retrospective study. *J Rheumatol* 2012;39:1026–34	Identifies clinical and imaging findings that are predictive of RCVS including convexity subarachnoid hemorrhage, MRI findings, and angiographic findings
RCVS	Anderson NE, Chung K, Willoughby E, et al. Neurological manifestations of phaeochromocytomas and secretory paragangliomas: a reappraisal. *J Neurol Neurosurg Psychiatry* 2012;84:452–57	Enumerates clinical associations of neurologic changes with pheochromocytomas with angiographic depiction of patients with RCVS
RCVS	Singhal AB, Hajj-Ali RA, Topcouglu MA, et al. Reversible cerebral vasoconstriction syndromes: analysis of 139 cases. *Arch Neurol* 2011;68:1005–12	Characterizes frequency and time course imaging findings such as vasoconstriction on angiography, infarcts, and hemorrhage
RCVS	Linn J, Fesl G, Ottomeyer C, et al. Intra-arterial application of nimodipine in reversible cerebral vasoconstriction syndrome: a diagnostic tool in select cases? *Cephalgia* 2011;31:1074–81	Compares angiographic response of intra-arterial nimodipine in RCVS and other causes of CNS arterial narrowing
RCVS	Yeh YC, Fuh JL, Chen SP, et al. Clinical features, imaging findings, and outcomes of headaches associated with sexual activity. *Cephalgia* 2010;30:1329–35	Assessed arterial narrowing on sequential MRA examinations
RCVS	Ducros A, Fiedler U, Porcher R, et al. Hemorrhagic manifestations of reversible cerebral vasoconstriction syndrome: frequency, features, and risk factors. *Stroke* 2010;41:2505–11	Characterizes intracranial hemorrhage identified at imaging
RCVS	Chen SP, Fuh JL, Wang SJ, et al. Magnetic resonance angiography in reversible cerebral vasoconstriction syndromes. *Ann Neurol* 2010;67:648–56	Characterizes time course of vasoconstriction on MRA relative to clinical presentation
RCVS	Kumar S, Goddeau RP Jr, Selim MH, et al. Atraumatic convexal subarachnoid hemorrhage: clinical presentation, imaging patterns, and etiologies. *Neurology* 2010;74:893–99	Compares patterns of convexity subarachnoid hemorrhage by etiology
RCVS	Refai D, Botros JA, Strom RG, et al. Spontaneous isolated convexity subarachnoid hemorrhage: presentation, radiological findings, differential diagnosis, and clinical course. *J Neurosurg* 2008;109:1034–41	Characterized distribution, etiologies, and the clinical course of convexity subarachnoid hemorrhage
RCVS	Arnold M, Camus-Jacquim M, Stapf C, et al. Post-partum cervicothoracic artery dissection. *Stroke* 2008;39:2377–79	RCVS rate in patients with postpartum cervicothoracic artery dissection is compared with controls
RCVS	Wang SJ, Fuh JL, Wu ZA, et al. Bath-related thunderclap headache: a study of 21 consecutive patients. *Cephalgia* 2008;28:524–30	Characterizes MRA and MRI appearances, including patients with RCVS
RCVS	Chen SP, Fuh JL, Chang FC, et al. Transcranial Doppler study for reversible cerebral vasoconstriction syndromes. *Ann Neurol* 2008;63:751–57	Assesses the relationship of vasoconstriction detected with transcranial Doppler and clinical features
Susac syndrome	Wuerfel J, Sinneker T, Ringelstein EB, et al. Lesion morphology at 7T MRI differentiates Susac syndrome from multiple sclerosis. *Mult Scler* 2012;18:1592–99	Compares imaging features of white matter lesions of multiple sclerosis and Susac syndrome at 7T MRI
Susac syndrome	Mateen FJ, Zubkov AY, Muralidharan R, et al. Susac syndrome: clinical characteristics and treatment in 29 new cases. *Eur J Neurol* 2012;19:800–11	Assesses the distribution and contrast enhancement of brain lesions
Susac syndrome	Kleffner I, Deppe M, Mohammadi S, et al. Neuroimaging in Susac syndrome: focus on DTI. *J Neurol Sci* 2010;299: 92–96	Characterizes the degree and distribution of decreased fractional anisotropy
Susac syndrome	Kleffner I, Depp M, Mohammaid S, et al. Diffusion tensor imaging demonstrates fiber impairment in Susac syndrome. *Neurology* 2008;70:1867–69	Characterizes reduction in fractional anisotropy in different brain regions, including normal-appearing white matter
ABRA	Carlson C, Estergard W, Oh J, et al. Prevalence of asymptomatic vasogenic edema in pretreatment Alzheimer's disease study cohorts from phase 3 trials of semagacestat and solanezumab. *Alzheimers Dement* 2011;7:396–401	Evaluates for vasogenic edema on MRI in patients with Alzheimer disease, including a patient with ABRA
ABRA	Salvarani C, Brown RD Jr, Calamia KT, et al. Primary central nervous system vasculitis: comparison of patients with and without cerebral amyloid angiopathy. *Rheumatology(Oxford)* 2008;47:1671–77	Compares MRI appearance in patients with vasculitis, with and without cerebral amyloid
ABRA	Malloy ES, Singhal AB, Calabrese LH et al. Tumor-like mass lesion: an under-recognized presentation of primary angiits of the central nervous system. *Ann Rheum Dis* 2008;67:1732–35	Compares rate of mass-like imaging presentation of ABRA with primary CNS vasculitis
ABRA	Salvarani C, Brown RD Jr, Calamia KT, et al. Primary central nervous system leptomeningeal enhancement: a subset with a benign outcome. *Arthritis Rheum* 2008;58:595–603	Assesses rate of leptomeningeal enhancement and clinical outcome of patients with CNS vasculitis, with and without cerebral amyloid
PRS	Chiu YE, Vora S, Kwon EK, et al. A significant proportion of children with en coup de sabre and Parry-Romberg syndrome have neuroimaging findings. *Pediatr Derm* 2012;29:738–48	Evaluates MR features and compares with dermatologic and neurologic status
TLCC	Takanashi J, Tada H, Kuroki H, et al. Delirious behavior in influenza is associated with a reversible splenial lesion. *Brain Dev* 2009;31:423–26	Studies the MRI appearance of patients with influenza and delirium

[a] No similar publications were identified in the radiology literature.

[b] Description is focused on imaging analyses.

Note:—PRS indicates Parry-Romberg syndrome; TLCC, transient lesion of the splenium of the corpus callosum.