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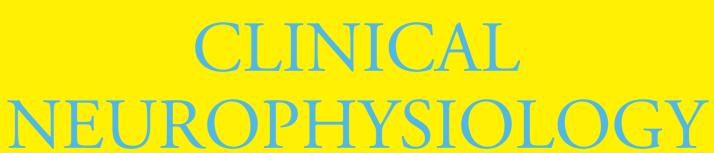
CONTENTS

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FOR JANUARY 2024 VOL. 157

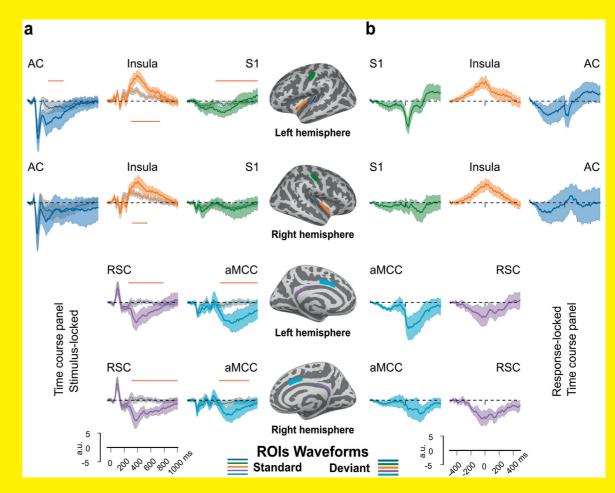
Editorials Clinical neurophysiology Message from the new Editor in Chief		Motor Neurone and Neuromuscular Diseases, Neuropathies	
Clinical neurophysiology: Message from the new Editor-in-Chief R. Chen (Canada)	142	Single motor unit estimation of the cutaneous silent period in ALS	
Cortical brain signals improve decoding of movement and tremor for clinical brain computer interfaces		B.T. Arslan, M. Görkem Özyurt, B. İşak, S. Cecen, K.S. Türker (Turkey, UK)	110
WJ. Neumann (Germany)	143	Functional Neuroimaging and Brain Mapping	
Epilepsy Hippocampal barques and their manifestation as 14&6 Hz positive spikes during sleep		Functional connectivity of sensorimotor network is enhanced in spastic diplegic cerebral palsy: A multimodal study using fMRI and MEG	
V. Kokkinos, H. Hussein, D.G. Sakelliadou, R. Mark Richardson, A.I. Bagić, A. Urban (USA)	37	J. Vallinoja, T. Nurmi, J. Jaatela, V. Wens, M. Bourguignon, H. Mäenpää, H. Piitulainen (Finland, Belgium, Spain)	4
Developmental Clinical Neurophysiology Sensory event-related potential morphology predicts age in premature infants C.S. Zandvoort, M. van der Vaart, S. Robinson, F. Usman,		Abnormal fractional amplitude of low-frequency fluctuations and regional homogeneity in major depressive disorder with non-suicidal self-injury Y. Huang, R. Yan, Y. Zhang, X. Wang, H. Sun, H. Zhou, H. Zou, Y. Xia, Z. Yao, J. Shi, Q. Lu (China)	120
G. Schmidt Mellado, R. Evans Fry, A. Worley, E. Adams, R. Slater, L. Baxter, M. de Vos, C. Hartley (UK, Belgium)	61	Therapeutic Clinical Neurophysiology	
Aging, Alzheimer's Disease, other Dementias, Psychiatric Disorders Transcranial direct current stimulation of the right		High-frequency rTMS of the left dorsolateral prefrontal cortex for post-stroke depression: A systematic review and meta-analysis	
temporoparietal junction facilitates hippocampal spatial learning in Alzheimer's disease and mild cognitive		T. Wang, X. Liu, X. Wu, Y. Fan, Y. Lv, B. Chen (China)	130
impairment S. Philippen, A. Hanert, R. Schönfeld, O. Granert, R. Yilmaz, U. Jensen-Kondering, M. Splittgerber, V. Moliadze, M. Siniatchkin, D. Berg, T. Bartsch (Germany, Turkey)	48	Normal Human Physiology Sensorimotor integration in cranial muscles tested by short- and long-latency afferent inhibition F. Ginatempo, N. Loi, J.C. Rothwell, F. Deriu (Italy, UK)	15
Psychophysiology and Psychopathology Aberrant hyperfocusing in schizophrenia indicated by elevated theta phase-gamma amplitude coupling		A role for retro-splenial cortex in the task-related P3 network D. Das, M.E. Shaw, M.S. Hämäläinen, A.R. Dykstra, L. Doll, A. Gutschalk (Germany, Australia, USA, Finland)	96
SJ. An, S. Choi, J.S. Hwang, S. Park, M. Jang, M. Kim, J.S. Kwon (Republic of Korea)	88	Letters to the Editor Operant up-conditioning of the soleus cutaneous reflex to non-	
Movement, Motor Control and Movement Disorders Altered excitation-inhibition balance in the primary sensorimotor cortex to proprioceptive hand stimulation in		noxious stimuli in a person with chronic incomplete spinal cord injury A.M. Phipps, A.K. Thompson (USA)	1
cerebral palsy M. Illman, J. Jaatela, J. Vallinoja, T. Nurmi, H. Mäenpää, H. Piitulainen (Finland)	25	Involvement of interhemispheric inhibition in ballistic movement-induced transient suppression of voluntary movement	
Age- and sex-related oculomotor manifestation of dopamine deficiency in Segawa disease Y. Terao, H. Fukuda, O. Hikosaka, A. Yugeta, Si. Matsuda,		K.S. Chen, Y.J. Kuo, YS. Dong, R. Chen (Taiwan) Non-invasive brain stimulation for palatopharyngeal myoclonus associated with hypertrophic olivary nucleus degeneration	44
F. Fisicaro, Y. Ugawa, K. Hoshino, Y. Nomura (Japan, USA, Italy)	73	S. Lee, HY. Park, GH. Park, Y. Kim, GY. Park, S. Im (Republic of Korea)	46
Parkinsonian rest tremor can be distinguished from voluntary hand movements based on subthalamic and cortical activity		or notes;	-10

About the cover: Region-of-interest (ROI) based source waveforms (average across participants, n = 12; shaded area indicates 95% confidence interval). Source waveforms are based on dynamic statistical parametric maps (dSPM), calculated for the ROIs shown in the middle column with the same color code as the waveforms. The ROIs include auditory cortex (AC), anterior insular cortex (insula), primary somatosensory cortex (S1), retro-splenial cortex (RSC), and anterior midcingulate cortex (aMCC). (a) stimulus-locked source time courses, averaged relative to tone onset. Typical P3 source waveforms are observed in RSC (purple) and insula (orange). The coral color bar indicates the time interval in which the deviant and standard responses are significantly different from each other (cluster-based permutation test, see methods for details). (b) response-locked source time courses shown in similar configuration. For details see the article by Das et al. in the issue: "A role for retro-splenial cortex in the



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Clinical Neurophysiology is dedicated to fostering research and publishing scholarly reports on the pathophysiology underlying diseases of the peripheral and central nervous system of human patients. Clinical trials that use neurophysiological measures to document change or neurophysiological techniques for treatment are encouraged, as are manuscripts reporting data on integrated neuroimaging of peripheral and central nervous function including, but not limited to, functional MRI, brain mapping, MEG, EEG, PET, ultrasound, and other neuroimaging modalities. Studies on normal neurophysiology will be considered, in particular if directly related to disease or clinical applications. Studies on animals and technical reports must have clear relevance and applicability to human disease. Case reports are not generally accepted as full-length submissions but occasionally may be considered as peer-reviewed Letters, if implying substantial advancement of knowledge. Clinical Neurophysiology covers epilepsy, developmental clinical neurophysiology, psychophysiology and psychopathology, motor control and movement disorders, somatosensory disorders including pain, motor neuron diseases, neuromuscular diseases, neuropathies, sleep and disorders of consciousness, auditory and vestibular disorders, aging, Alzheimer's disease, other dementias, other psychiatric disorders, autonomic disorders, neural plasticity and recovery, intraoperative and ICU monitoring, and therapeutic clinical neurophysiology including non-invasive and invasive brain stimulation.

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