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THE GEORGE WASHINGTON UNIVERSITY

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The Clinical Neurosciences Newsletter



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OUR NEWS



Dr. Alexandra Eid was appointed as a member of the “Fellow/Junior Investigators Professional Development Committee”, and the “Resident Course Committee” for the American Epilepsy Society for a 3-year Term Starting January 1, 2026.



Dr. Madison Berl. joins the AES board of directors for a 3 year term.



Dr. Nathan Cohen received a NINDS K23 award for “determining Signatures of Pharmacoresistance in Focal Cortical Dysplasia”.



Dr. Marc DiSabella received the Child Neurology Training Directors Award.



GWU/CNH epilepsy teams are presenting 13 abstracts at AES annual meeting in Atlanta, December 2025, including a platform presentation (Dr Xie), Investigator Workshop talk by Dr. Leigh Sepeta, and a talk at the pediatric State of the Art symposium by Dr. Syed Anwar (computational engineer)



Dr. Mohamad Koubeissi presented a talk titled “Novel Targets for Neuromodulation in Epilepsy” at the Neurology Grand Rounds. University of Illinois in Chicago, November 13, 2025.



The Neurology and Epilepsy Team at CNH presented several talks at the Sidra Neuroscience Conference in Doha, Qatar in November 2025.



Interview with

Dr. Ruslan Nam



Interview with

Dr. Ruslan Nam

Briefly tell us about yourself and the work you're doing at GW during this one-year program.

I am the Epilepsy clinical Fellow and over this year, most of what I've been doing is learning EEG more in depth. I've been reading a lot of inpatient and EMU EEGs, helping make plans for the EMU patients, and presenting cases at the surgical conferences.

Starting next month, I'll probably be working on a QI project as well, so that will be another main focus for the rest of the year.

Can you tell us a little bit about your background and what drew you to epilepsy in particular?

I liked neurology already when I was in undergrad, and then in medical school I was debating between internal medicine and neurology. I found the subject matter of neurology much more fascinating. I also liked the consultant aspect of neurology.

By the end of fourth year, I was interested in epilepsy, but I honestly didn't know enough about it yet. Later, around my second year of residency, I really started to fall in love with epilepsy as I got more exposure.

One of the main things that drew me to neurology in general was localization—figuring out where lesions are. In epilepsy, that becomes very dynamic. When you have the semiology of a seizure, whether from the patient's story or what you see in the monitoring unit, there's this dynamic localization as symptoms evolve over time, and you think about which brain regions and networks are involved at each stage.

I found that really unique to epilepsy. In other fields like stroke, localization is a bit more static, once you find where the lesion is, you often have your answer. Epilepsy felt much more fluid and interesting to me.

What does a typical day look like for you as an epilepsy fellow?

I usually wake up around 6 a.m. and then head into the unit. Between about 8 and 9 a.m., we review the EEGs together with the epileptologist. After that, we round on all the patients, particularly the EMU patients. During the day, if there are epilepsy-specific consults, I'll usually be the one to see them, and then I notify and staff the cases with the attending as needed. It depends on which attending is on, but we typically finish reading by around noon.

I usually complete my reports in the early afternoon and then head home. I try to take a short break, maybe watch something on TV for half an hour, and then, depending on how busy the day was, I'll get back to reading so I can sign off EEGs by around 5 p.m.

This particular month and weekend have been a bit lighter, so I've had more free time. Sometimes that just means more reading, which isn't exactly the most exciting thing, but that's fellowship life.

What has been the most challenging part of epilepsy fellowship so far?

The first few months, which were all inpatient, were definitely the hardest. You're learning a lot and trying to bridge the gap between being a novice and becoming more of an expert, and that balance is tough.

Most of those weeks, probably for about eight weeks and then several more after that, I was working over 100 hours a week. That's essentially nonstop, and I'm not even counting commuting on the metro and other things.

Even though I love the subject matter, it was very difficult coming straight from residency, four already tough years of neurology training, and then suddenly having basically no life for two months. That adjustment was challenging.



Interview with Dr. Ruslan Nam

What are your goals after fellowship, and which skills from fellowship do you think will be most important for your future career?

I'm leaning toward going into clinical practice. Ideally, I'd like a setup where I'm part-time neurohospitalist and part-time reading EEGs from home, possibly with involvement in a smaller community EMU.

In terms of skills, obviously you need to be able to read EEGs well and in a timely manner. If you start missing seizures, you won't keep your job for long, so that's fundamental. I think you really need that core skill to feel confident as an epileptologist.

Beyond that, it's the same skills that make you a good neurologist in general, constantly thinking about the patient first and prioritizing their health over competing interests. You also need to know seizure medications well, how to adjust them, and how to discuss options clearly with patients so you can make appropriate recommendations together.

And then there's the human side: getting along with coworkers, being reliable, and being someone people feel comfortable messaging about reports or patient questions. Being collegial really matters in this field.

What advice would you give residents who are considering an epilepsy or clinical neurophysiology fellowship?

I'd say try to get as much exposure to EEG and epilepsy as you can during residency. That helps you figure out what your true interests are.

Programs differ, some are more epilepsy-focused, others may offer more EMG or broader clinical neurophysiology, so you need to decide relatively early which type of program you want to apply to.

The best way to do that is by seeking out rotations, electives, and any opportunities to read EEGs or spend time in the EMU. That experience will help you understand whether this is really where your passion lies.

What do you like most about GW and the epilepsy program?

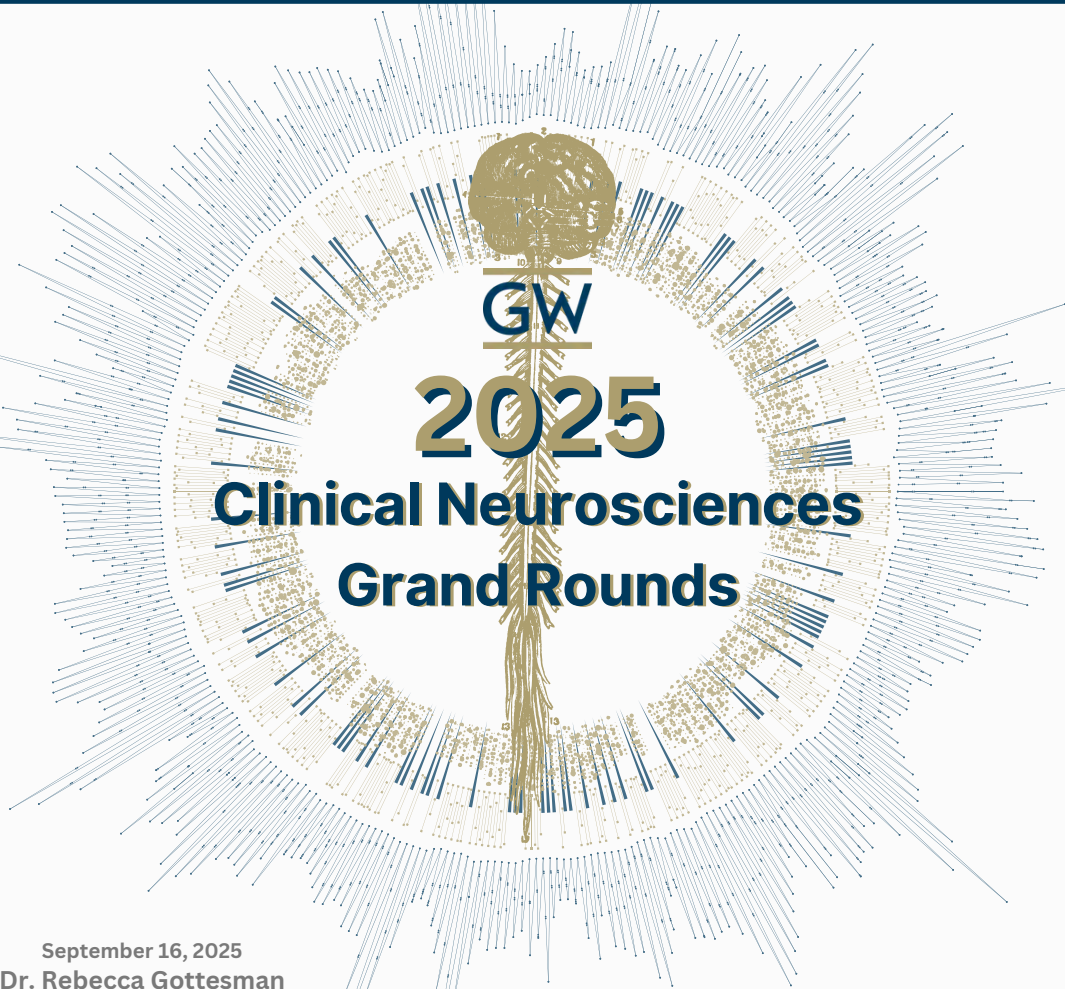
I really appreciate how invested the program leadership is in making the fellowship as strong as it can be while also looking out for our well-being. Training is hard, and there's always some hierarchy, so you're hoping that the people above you really share your priorities and care about your health as a fellow.

I truly feel that here. They're not only focused on making sure you progress and get excellent training, but also on having your back when things get hectic. For example, when I was extremely busy with work and other stresses, it was reassuring to know that Dr. Makke was someone who genuinely supports you.

Even this week, I'm on call, and one of the things we worked out was not having clinic during call weeks. If you're getting called multiple times overnight, then coming in with four or five hours of sleep, doing a full inpatient day, and then adding clinic on top of that. I really appreciate how flexible he's been in making changes like that to protect our workload and our health.

Is there any final message you'd like to share with our readers?

For those in training, there's always a balance needed between your work and your hobbies/well-being. It can be challenging to make this happen, but it is always an important aspect to keep in mind and prioritize even if it's only a half hour a day. Something that rejuvenates you is vital to keep you going.



July 1, 2025

Dr. Alberto Espay

University of Cincinnati

Title: The case for γ -secretase restoration and A β 42 replacement in familial and sporadic Alzheimer's disease

July 8, 2025

Dr. David Goldstein

NIH

Title: What is Autonomic Medicine?

July 15, 2025

Dr. Bernhard Steinoff

Kork Epilepsy Center

Title: Monocenter Kork experiences with the latest antiseizure medications: The real word

July 22, 2025

Dr. Chia-Chun Chiang

Mayo Clinic

Title: AI in Headache Medicine: Current and Future Applications

July 29, 2025

Dr. Gridihar Kalamaganam

University of Florida

Title: TBD

August 5, 2025

Dr. Aarti Sarwal

Virginia Commonwealth University

Title: TBD

August 12, 2025

Dr. Gordon Buchanan

University of Iowa

Title: TBD

August 19, 2025

Dr. Tova Gardin

Yale University

Title: TBD

August 26, 2025

Dr. Jon Stone

University of Edinburgh

Title: Functional Neurological Disorder (FND) – past present future

September 2, 2025

Dr. Ahmet Hoke

Johns Hopkins University

Title: TBD

September 9, 2025

Dr. Jaysingh Singh

Ohio State University

Title: What have we learned from Thalamic Stereo-EEG data

September 16, 2025

Dr. Rebecca Gottesman

NIH

Title: Vascular Dementia/Small Vessel Disease

September 23, 2025

Dr. Martijn Tannemaat

Leiden University Medical Center

Title: Novel non-invasive methods to diagnose and monitor myasthenia gravis

September 30, 2025

Dr. Daniel King

George Washington University

Title: TBD

October 7, 2025

Dr. Paul Nyquist

Johns Hopkins University

Title: Subarachnoid Hemorrhage

October 14, 2025

Dr. Tobias Loddememper

Boston Children's Hospital

Title: Detect, Predict and Prevent Acute Seizures – towards Digital Twins.

October 21, 2025

Dr. Carine Maurer

Stony Brook Medical Center

Title: Understanding Functional Neurological Disorder: Diagnosis, treatment, and pathophysiology.

October 28, 2025

Dr. Xin Lyu

George Washington University

Title: TBD

November 4, 2025

Dr. Matthew Edwardson

Georgetown University Hospital

Title: Imaging and Molecular Biomarkers of Stroke Recovery

November 11, 2025

Dr. Lawrence Hirsch

Yale University

Title: Tentative title - may change: Updates on ICU EEG monitoring and refractory status epilepticus, including NORSE/FIRES

November 18, 2025

Dr. Geet Paul

George Washington University

Title: TBD

November 25, 2025

Dr. Alberto Serrano-Pozo

Mass General Hospital

Title: TBD

December 2, 2025

Dr. Dana Harrar

Children's National

Title: Acute Stroke Management in Children

December 9, 2025

Dr. Elaine Wirrel

Mayo Clinic

Title: Etiology targeted therapies for DEE

December 16, 2025

Dr. Panagiotis Kassavetis

George Washington University

Title: TBD



Connect with us



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