During my post-graduation years, the breaking of NAA causes a disturbance in the brain.

In memory of Rosalind Rosen, a family member of the Canavan Disease Foundation.

Rosalind Rosen was among a group of family and friends who founded the Canavan Foundation. Among her various achievements was serving as a board member—Roz could always be counted on to do what was best for the Canavan patients.

Rosalind was a woman of honor, integrity, commitment, and grace. Her values were the foundation of her life and by all that she did she has the opportunity to teach us and learn from us. Fortunately, with the aid of her life and her efforts to strengthen the Canavan Foundation will long endure.

The Canavan Foundation takes pleasure in announcing that Chikkathur N. Madhavarao, Ph.D. has been named the first Poss Rosen Clinical Research Training Fellow in honor of Rosalind Rosen, a family member of the Canavan Disease Foundation. The Canavan Foundation is a non-profit organization founded in 1992 by families and friends of children with Canavan disease, a rare and fatal inherited brain disorder. Their mission is to work together to increase public awareness and make possible public education materials and prevention. Please help us to spread the word about Canavan disease.

CF: Congratulations on your receipt of the 2006 Research Fellowship.

Dr. Madhavarao: Thank you. It is a great honor for me to receive this fellowship and I am very thankful for your support.

CF: Your research is focused on the amino acid N-acetylaspartic acid (NAA).

Dr. Madhavarao: Yes, NAA is a neurotransmitter that is found in the brain. It is a key component of the myelin sheath, which protects nerve fibers and allows them to communicate with each other. The deficiency of NAA leads to the development of Canavan disease, a rare and fatal inherited brain disorder.

The Canavan Foundation awards grants to support research toward the cause, cure, and prevention. Please help us to spread the word about Canavan disease.

How you can help:

1. Increase Public Awareness
2. How you can help
3. How did this spark your interest in Canavan disease?
4. What changes would you like to see in the medical field?
5. How did this change your thinking about Canavan disease?
6. How did this change your thinking about research?
7. How did this change your thinking about your career?
8. How do you think research will change in the future?
9. What do you hope to accomplish with this fellowship?
10. What changes do you hope to make in the medical field?
11. What do you hope to accomplish with this fellowship?
12. What changes do you hope to make in the medical field?

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In 2006, Dr. McNaught reviewed a Clinical Research Fellowship supported by the Canadian Foundation and the American Academy of Neurology. Despite the mortality of Dr. Del Wiltse, Dr. McNaught served as part of an e-mail and the results of his work

This Research Fellowship provided opportunities to examine key pharmacological and cellular mechanisms involved in myelination, demyelination, and remyelination

As a result of the pilot project, the

The Canadian Foundation and the American Academy of Neurology have awarded the Burstone Center for Medical Research, Inc.


come from the fact that MS patients who require a change in therapy may be at risk of developing rebound myelination and remyelination processes. A clinical trial that involves imaging of MS patients is currently ongoing at the University of British Columbia to determine if brain imaging, more specifically functional magnetic resonance imaging, will show evidence of remyelination in patients who receive a change in therapy. The rationale for this study is to evaluate the potential for the development of remyelination after a change in therapy.

These findings are also relevant to the development of new therapies for multiple sclerosis, which is characterized by a breakdown of the blood-brain barrier and the deposition of immune cells within the central nervous system. The goal of these therapies is to reduce inflammation and restore the integrity of the blood-brain barrier. This study has shown that reducing inflammation can lead to a decrease in the number of inflammatory cells in the brain and an improvement in neurological function.

The results of this study are consistent with previous findings that have shown a reduction in inflammation and an increase in remyelination after treatment with fingolimod, a drug that is currently approved for the treatment of multiple sclerosis. These findings suggest that the use of fingolimod may be a promising therapeutic strategy for the treatment of multiple sclerosis.

In conclusion, the findings of this study indicate that the development of MS therapies that target inflammation and remyelination may be a promising strategy for the treatment of multiple sclerosis. Further research is needed to evaluate the long-term effects of these therapies and to determine the optimal timing and duration of treatment.


dating the activation of aspartate and glutamate receptors in the brain

The presence of these receptors has been shown to be critical for the development and maintenance of normal brain structure and function. The activation of these receptors has also been shown to be important for the development of neurological diseases such as schizophrenia and multiple sclerosis.

The results of this study suggest that the presence of these receptors may be a potential target for the development of new therapies for neurological diseases. Further research is needed to determine the role of these receptors in the development and maintenance of normal brain function and to develop novel therapeutic strategies for the treatment of neurological diseases.