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———**NER Foundation Award for
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AJNR Am J Neuroradiol 2005, 26 (9) 2427
<http://www.ajnr.org/content/26/9/2427>

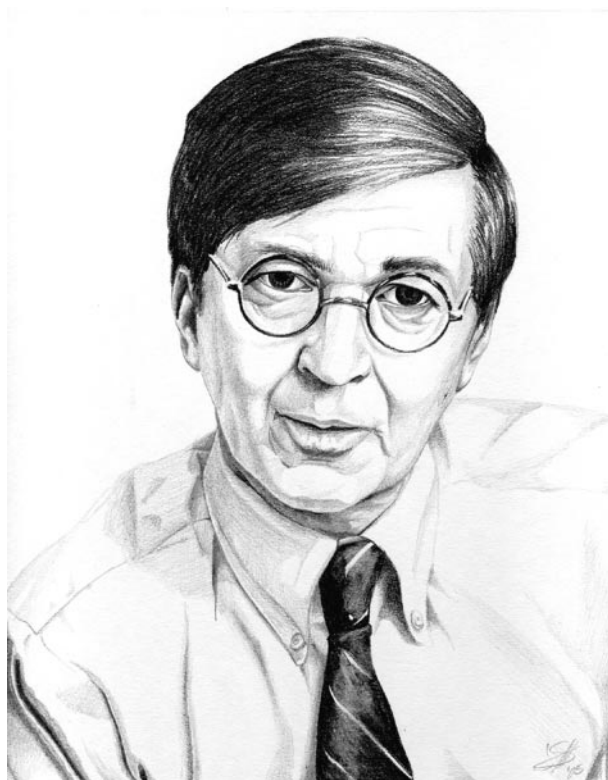
This information is current as
of April 17, 2024.

—NER Foundation Award for Outstanding Contributions in Research

Dr. Dixon M. Moody is recognized worldwide for his contributions in radiologic-pathology correlation of brain microvascular anatomy and disease. A Charles A. Dana Foundation award recipient, he also has a long track record of National Institutes of Health (NIH) funding with the principal grant, originally (1984) a Jacob K. Javits Neuroscience Investigator Award, funded through 2008—the 24th year of this project.

Dr. Moody recently finished a 6-year term on the Diagnostic Radiology Study Section of the NIH. He served a 4-year term on the National Advisory Council of the National Institute of Neurological Diseases and Stroke (NINDS) of the NIH, which provides recommendations for the conduct and support of epidemiologic and fundamental research on neurologic diseases.

In studies designed by Dr. Moody and funded by his grants, he and members of his team have been instrumental in furthering our understanding of the cause (lipid microemboli during cardiopulmonary bypass) of brain complications related to heart surgery and of strategies for its prevention. He published a comprehensive study of the normal human cerebral microvascular pattern. Contrary to prevailing opinion at the time, Moody demonstrated that germinal matrix hemorrhage in premature neonates results from rupture of veins rather than arterioles/capillaries; Charcôt-Bouchard microaneurysms are very rare and are not the etiology of most spontaneous brain hemorrhages; precapillary arteriolar-venular anastomoses (thoroughfare channels), a germinal matrix vascular rete, or intraparenchymal arteriole-to-arteriole shunts are not normally present in humans from the limits of viability in pre-term neonates to adults; the pathologic substrate for the radiologic finding of



DIXON M. MOODY, MD, FACR

leukoaraiosis is apoptosis-induced oligodendrocyte cell death associated with capillary dropout and occasionally stenosis of the deep cerebral veins (periventricular venous collagenosis); and string vessels, probably degenerating capillary/arterioles, are found in significantly increased numbers in subjects with Alzheimer disease—reinforcing the theory that a vascular component may contribute to this degenerative disease.