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EDITORIAL

Advancing accessibility to care

Avanzando hacia una atención más accessible

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The current issue of the *Revista Mexicana de Neurociencia* presents works that collectively underscore the transformative potential of neuromodulation, neuroimaging, and targeted therapies in treating complex neurological and psychiatric conditions. These manuscripts not only advance our understanding of brain circuitry but also highlight critical barriers and opportunities for improving patient care in Mexico and beyond.

A pivotal theme in this issue is accessibility. Here, Trejo-Cruz et al. show that high-frequency intermittent Theta-Burst stimulation (iTBS) given 3 times per day for 4 weeks significantly reduced suicidal thoughts in people with depressive disorder who only received one session per day for the same period. This accelerated approach offers promise for rapid crisis intervention, particularly where in-hospital management or other interventions may not be readily available.

For Parkinson´s disease, Martínez-Ramírez et al. identify cost, centralization, and knowledge gaps as major hurdles to deep-brain stimulation (DBS) adoption in Mexico. Interestingly, 71% of physicians surveyed lacked specialized training, signaling an urgent need for education and policy reforms to democratize access to this life-changing treatment.

The DBS survey reveals economic, infrastructural, and educational barriers limiting advanced Parkinson's care in Mexico, while the iTBS trial demonstrates how protocol optimization (e.g., accelerated sessions) can enhance feasibility in resource-constrained settings.

Moving forward, these studies collectively advocate for policy-driven solutions to address cost and infrastructural barriers, such as decentralizing specialized services and funding training programs. As we harness these advances, collaboration across disciplines – neurosurgery, psychiatry, psychology, and policymaking – will be essential to translate laboratory insights into real-world healing.

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