Treating attention deficit hyperactivity disorder (ADHD) in children with tics

*“The Tourette Syndrome
Study Group results
support. . .the acceptability
of using stimulants in
children with tics. . .”*

Kurlan reports in a multicenter, double-blind, placebo-controlled trial for the TSSG, which involved 136 children with both ADHD and tics, that methylphenidate and clonidine, used alone or in combination, are effective treatments for ADHD and that tics lessened during treatment.

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The accompanying editorial by Nass and Bressman notes that tics have been considered a contraindication to use of stimulants for treatment of ADHD. The study settles this important controversy—methylphenidate can indeed be used safely to treat ADHD in the presence of tics.

see page 513

Long-term mortality following status epilepticus (SE)

*“Studies of outcome and
treatment of status
epilepticus need to
subcategorize patients
appropriately.”*

A population-based study of 30-day survivors of SE by Logroscino et al. found mortality to be threefold greater than expected at 10 years. Predictors of mortality included myoclonic SE, acute symptomatic SE, and SE greater than 24 hours in duration. Mortality was not increased following idiopathic/cryptogenic SE.

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The accompanying editorial by Krumholz and Berg notes because most SE does not have an increased mortality compared with idiopathic epilepsy, research on SE, including clinical trials, must stratify cases of SE, separating those that are symptomatic with a high mortality, from idiopathic epilepsy.

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Seizures and lactate in neonates

Miller et al. studied 90 term neonates with asphyxia using MRI and MRS as a marker for brain injury. Seizure severity was associated with increased lactate and decreased N-acetylaspartate when the study was controlled for MRI abnormalities and resuscitation duration. Thus, seizure severity in asphyxiated human newborns may be independently associated with brain injury.

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IV morphine for central pain

Attal et al. administered IV morphine to patients with central pain and showed selective effects of the drug on painful symptoms. The results of the IV test dosing were predictive of the subsequent therapeutic response to oral morphine.

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The Jensen and Sindrup editorial notes the importance of the Attal et al. study in understanding central pain. The study was short term and they concluded that “long-term opioid treatment...cannot be recommended before large [clinical] trials.”

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continued on page 512

Maternal antiepileptic drugs (AED) and neonatal bleeding

In a series of 662 pregnancies in women with epilepsy, Kaaja et al. found that maternal enzyme-inducing AED did not increase the risk for bleeding in the offspring. All neonates received vitamin K prophylaxis postnatally. Antenatal administration of vitamin K to mothers with epilepsy may be needed only in selected cases.

see page 549

Novel mutations in collagen VI genes: Expanding the Bethlem myopathy phenotype

Scacheri et al. describe collagen VI mutations in three large families carrying the diagnosis of dominant limb-girdle muscular dystrophy without prominent contractures. The myofiber-specific defect of the basal lamina connective tissue disease may contribute to the phenotype.

see page 593

Treatment-responsive multifocal motor neuropathy (MMN) without conduction block

The hallmark for diagnosis of MMN has been the presence of conduction block (CB). MMN is also seen in patients who lack CB but have other features of demyelination on nerve conduction studies. Katz et al. report nine patients with MMN who had purely axonal electrodiagnostic features. Three (of the six treated) patients improved with immune-modulating therapy.

see page 615

Ptosis in patients with hemispheric strokes

The late Dr. Averbuch-Heller et al. identified ptosis in more than one third of 64 prospectively studied patients with acute hemispheric stroke. Patients with ptosis were more likely to have hemiparesis, rightward gaze deviation, upgaze paresis, and right-sided cortical infarction on imaging. In five patients with large hemispheric infarction, complete ptosis was the first sign of imminent hemianopia. Ptosis is an important diagnostic and prognostic sign in acute stroke patients.

see page 620

Ictal heart rate (HR) differentiates epileptic from psychogenic seizures

Opherk and Hirsch showed that HR increased during complex partial and other epileptic seizures, but not during nonepileptic seizures. If HR increased by >30% during a staring spell, there was a 97% chance that the spell was epileptic.

see page 636

Sleep-related facio-mandibular myoclonus

Vetrugno et al. describe a familial case of nocturnal tongue biting and bleeding due to facio-mandibular myoclonus noting the similarity and differences from bruxism.

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