Teaching Video *NeuroImages*: Phenytoin-induced orofacial dyskinesias

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A 55-year-old right-handed man started phenytoin after 2 seizures. Four weeks later, he complained of involuntary facial movements. Examination revealed orofacial dyskinesias: eyebrow elevation and lip pursing (video on the *Neurology*[®] Web site at www.neurology.org). No ataxia, slurred speech, or nystagmus was seen. His phenytoin level was 29.5 mg/L when examined, increased from 14.6 mg/L 15 days earlier. Phenytoin discontinued and dyskinesias resolved within 2 weeks.

Dyskinesias, rare but well-documented complications of phenytoin, occur during initial or

chronic treatment.¹ Elevation of phenytoin level is not necessary for dyskinesias to develop; dyskinesias usually resolve with drug cessation.^{1,2} Recognition of this phenytoin side effect may preempt an extensive workup.

REFERENCES

1. Lee CH, Li JY. Phenytoin intoxication and upper facial dyskinesia: an unusual presentation. *Mov Disord* 2008;23:1188–1189.
2. Harrison MB, Lyons GR, Landow ER. Phenytoin and dyskinesias: a report of two cases and review of the literature. *Mov Disord* 1993;8:19–27.

Supplemental data at
www.neurology.org

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