creatine kinase concentration in conjunction with substantial concentrations of MB isoenzymes, elevated aspartate aminotransferase and lactate dehydrogenase in the setting of normal liver function. One-third of the patients had plasma free carnitine concentration below 20 mcmol/L, a concentration associated with depletion of carnitine in tissues. Linear growth decreased after one year of age and head circumferences, normal in the first three to four years of life, then fell to the third percentile in mid-childhood. Longevity was reduced because of renal disease and the oldest patient examined was 33 years. (Charnas LR, Gahl WA et al. Clinical and laboratory findings in the oculocerebrorenal syndrome of Lowe, with special reference to growth and renal function. N Engl J Med May 9, 1991; 324:1318-25).

COMMENT. The oculocerebrorenal syndrome of Lowe, an X-linked recessive disorder, is a rare cause of neonatal hypotonia or the limp infant syndrome. Both muscle and central abnormalities may contribute to the hypotonia and areflexia.

PREDNISONE-TREATED DUCHENNE MUSCULAR DYSTROPHY

The immunosuppressant/antiinflammatory effects of prednisone were studied in 33 patients with Duchenne muscular dystrophy (ages 5 to 15 years) at the conclusion of a six month treatment trial at the Department of Neurology, Division of Neuromuscular Disease, Ohio State University College of Medicine, Columbus, OH. Immunohistochemical analyses were carried out on muscle biopsies: 12 from the placebo group, 9 from the low-dose prednisone group (0.75 mg/kg/d), and 12 from the high-dose group (1.5 mg/kg/d). The number of T cells and the number of muscle fibers focally invaded by T cells were significantly decreased in the prednisone treated groups compared with controls. Prednisone may improve strength in Duchenne muscular dystrophy through primarily immunologic mechanisms involving T lymphocytes. (Kissel JT et all. Mononuclear cell analysis of muscle biopsies in prednisone-treated and untreated Duchenne muscular dystrophy. Neurology May 1991; 41:667-672).

COMMENT. The possibility that clinical improvement was related to prednisone-induced alterations in skeletal muscle dystrophin was disproved by a further study from Ohio State University (Burrow KL et al. Dystrophin expression and somatic reversion in prednisone-treated and untreated Duchenne dystrophy. Neurology May 1991; 41:661-666). Dystrophin content was analyzed at the conclusion of a six month trial of prednisone, using Western blots and antibody staining of tissue sections. There was no significant differences in dystrophin content between treatment and placebo groups.

INFECTIOUS DISEASES

EPIDEMIOLOGY OF ENCEPHALITIS

The incidence and epidemiology of encephalitis in children have been analyzed in a 20 year survey at the Department of Virology and the