

Thallium poisoning from maliciously contaminated food. Clin Toxicol Nov 1994;32:723-730). (Reprints: Dr William J Meggs, New York City Poison Control Center, 455 First Avenue, Room 123, New York, NY 10016).

COMMENT. Gastrointestinal symptoms followed closely by painful paresthesias of extremities are the early diagnostic manifestations of thallium poisoning. Alopecia is a late sign. The authors advocate early treatment with prussian blue. Thallium is radiopaque and radiographs of poisoned food may demonstrate metallic densities.

ATTENTION AND LEARNING DISORDERS

TREATMENT OF ADHD IN TOURETTE'S SYNDROME

A double-blind, placebo-controlled study of clonidine (.05 mg 4xd) and desipramine (25 mg 4xd) treatment of attention-deficit hyperactivity disorder (ADHD) behaviors in 34 children with TS + ADHD is reported from the Departments of Neurology and Pediatrics, Johns Hopkins University School of Medicine, Baltimore, MD. Desipramine was superior to clonidine in improving measures of ADHD, including parent-completed global linear analogue rating scale, hyperactivity subscale of the child behavior checklist (CBCL), and teacher CBCL subscales for nervous/overactive, anxious, and unpopular items. More than two thirds of families requested continuation of desipramine at the completion of the study. Neither drug made tics worse. (Singer HS, Denckla MB et al. The treatment of attention-deficit hyperactivity disorder in Tourette's syndrome: A double-blind placebo-controlled study with clonidine and desipramine. Pediatrics January 1995;95:74-81). (Reprints: Dr Harvey S Singer, Department of Neurology, Harvey 811, Johns Hopkins Hospital, 600 North Wolfe Street, Baltimore, MD 21287).

COMMENT. Desipramine is a more effective medication than clonidine for the treatment of ADHD in children with Tourette's syndrome. The authors hesitate to recommend the general use of desipramine. A review of the literature uncovered at least four sudden, unexplained deaths in children receiving desipramine. Careful monitoring, especially of the cardiovascular system, is advised.

Behavioral improvements found with tricyclic antidepressants and the positive effects of stimulant medication on cognitive tasks have prompted combined drug therapy of ADHD. Side effects occurred more frequently when a combination of desipramine and methylphenidate was employed compared to either medication used alone. (see Progress in Pediatric Neurology II, PNB Publ, 1994, pp210-211).

Bilineal transmission (from maternal and paternal sides) of Tourette's syndrome, especially in families in which the proband's symptoms were most severe, was a frequent finding (approx 1/3) in a study at the University of Rochester School of Medicine, NY, and University College London Medical School, London, UK. (Kurlan R et al. Neurology Dec 1994;44:2336-2342).

DYSLEXIA AND SMALL GENU OF CORPUS CALLOSUM

Corpus callosum morphology was studied by MRI in 16 children (mean age, 9.7 yrs) with developmental dyslexia and matched controls at the Center for Clinical and Developmental Neuropsychology, University of Georgia,

Athens, and the Department of Neurology, Medical College of Georgia, Augusta, and the Athens Magnetic Imaging. The genu of the corpus callosum was significantly smaller in the dyslexic children. Familial left-handedness, and ADD with and without hyperactivity distinguished the dyslexic children from controls. (Hynd GW et al. Dyslexia and corpus callosum morphology. Arch Neurol January 1995;52:32-38). (Respond: Dr George W Hynd, Center for Clinical and Developmental Neuropsychology, 570 Aderhold Hall, The University of Georgia, Athens, GA 30602).

COMMENT. Studies of MRI morphology of the corpus callosum in monozygotic twins at Dartmouth Medical School Program in Cognitive Neuroscience showed wide variations in size and shape of the human corpus callosum. Measurements revealed greater similarity in twin pairs than in randomly paired controls. (Ann Neurol 1989;26:100). The anatomy of the corpus callosum appears to be under genetic control as well as being influenced by nongenetic factors. How much this natural variation in size of the corpus callosum influenced the results of the above study in dyslexia is debatable. (see Progress in Pediatric Neurology I, PNB Publ, 1991, pp 168-9).

SILVER-RUSSELL SYNDROME AND COGNITIVE DISORDERS

Cognitive abilities of 20 boys and 5 girls, aged 6 to 11 years, with Silver-Russell syndrome were investigated at the Prince of Wales Hospital, Shatin, Hong Kong, the Institute of Child Health, and Middlesex Hospital, London, UK. The mean full scale IQ was 86, and 32% scored <70. Reading comprehension was 24 months below chronological age in 40%. Speech therapy was required in 48%. IQ scores were positively correlated with growth in head circumference. (Lai KYC et al. Cognitive abilities associated with the Silver-Russell syndrome. Arch Dis Child Dec 1994;71:490-496). (Respond: Professor D Skuse, Institute of Child Health, London, UK).

COMMENT. Features of Silver-Russell syndrome include low birth weight, short stature, body asymmetry, clinodactyly, and craniofacial dysmorphism - small triangular face, large forehead, small chin, shark's mouth, and low set ears. The present study adds cognitive disorders to the list of features. Intrauterine growth retardation of Silver-Russell syndrome beginning early in pregnancy results in reduction in both birth weight and length. In this "symmetrical" type of growth retardation, in utero brain development is more likely to be affected than when growth retardation begins late in pregnancy.

INFECTIOUS DISORDERS

CONGENITAL TOXOPLASMOSIS: TREATMENT AND OUTCOME

Neurologic, cognitive, and motor outcomes for 36 children with congenital toxoplasmosis treated with pyrimethamine and sulfadiazine for 1 year are reported from Michael Reese Hospital, Chicago, IL, and other Centers. Active infection, seizures, and motor abnormalities resolved in most during therapy. Of 29 infants evaluated at 1 year of age, 23 (79%) had a Mental Developmental Index of 102, and 6 had scores <50. Sibling controls had higher scores than patients, but sequential IQ testing showed no deterioration over time. Six of eight children with obstructive hydrocephalus relieved by shunts