

proven satisfactory and free from serious side effects. (Millichap JG. Nutrition, Diet, and Your Child's Behavior. Springfield, IL; Charles C Thomas, 1986; Millichap et al. **Epilepsia** 1964;5:239-255; **Am J Dis Child** 1964;107:593-604; **JAMA** 1966;198:210).

A flurry of papers on the ketogenic diet has appeared in recent months. A retrospective study has shown that the KD can be successfully initiated on an outpatient basis without starvation, fluid or caloric restriction (Vaisleib II et al. **Pediatr Neurol** 2004;31:198-202). The worldwide use of the KD has been established by communicating with 73 academic centers in 41 countries using the Internet. The average number of patients enrolled was 72 per country, with 5 new patients annually. Common difficulties included failure to avoid rice intake, intolerance symptoms with the higher K:AK 4:1 ratio, using the Hopkins protocol. A website is now available (Kossoff EH, McGrogan JR. **Epilepsia** 2005;46:280-289).

In a Korean multicenter study involving 199 patients (87 using the IFKD Hopkins protocol and 112 the NFKD), 66 (34%) successfully completed or maintained the diet. By modifying the protocol to omit the fasting period, especially in young children, acute dehydration was prevented, with no difference in the time to ketosis or in the efficacy of the diet. Five patients died related to lipoid aspiration pneumonia, serious infectious disease, and nutritional problems (Kang HC et al. **Epilepsia** 2005;46:272-279). The ketogenic diet was successful using gastrostomy tube feeding to ensure compliance, in the treatment of 12 children with static encephalopathy and intractable seizures (Hosain SA et al. **Pediatr Neurol** 2005;32:81-83).

LEARNING DISABILITIES

NEURAL BASIS FOR DYSLEXIA AND PICTURE NAMING DEFICITS

Eight dyslexic subjects, aged 20 +/-0.9 years, university students who were impaired on measures of reading, spelling and naming speed, matched for age and general ability with 10 control subjects, were scanned using PET while reading words and naming pictures, in a study at the Institute of Psychiatry, University College, and the Institute of Neurology, London, UK. Dyslexic subjects showed reduced activation in a left occipitotemporal area during both word reading and picture naming. The findings point to a common neurological basis for deficits in word reading and picture naming in developmental dyslexia. (McCorry EJ, Mechelli A, Frith U, Price CJ. More than words: a common neural basis for reading and naming deficits in developmental dyslexia? **Brain** February 2005;128:261-267). (Respond: Eamon J McCorry, Insatitute of Psychiatry, Department of Psychology, De Crespigny Park, London SE5 8AF, UK).

COMMENT. Previous studies have demonstrated abnormal activation of the left occipitotemporal area during word processing in dyslexia (Salmelin R et al. **Ann Neurol** 1996;40:157-162; Shaywitz BA et al. **Biol Psychiatry** 2002;52:101-110). Children learn to name pictures of objects before they can read. The above UK study shows that an area of the brain involved in word reading is also activated in picture naming. The authors propose that the diagnosis and treatment of a delay in picture naming skills in preschool children may influence the later acquisition of reading performance.