

dependent on the dose. Low doses are anticonvulsant while higher doses decrease seizure thresholds. In children receiving clonidine for ADHD, the lowest effective dose should be employed. In those with a history of seizures and/or epileptiform EEG, clonidine should be introduced with caution and in conjunction with an antiepileptic medication.

## **ANTIEPILEPTIC DRUGS**

### **VIGABATRIN-INDUCED SEIZURES IN ANGELMAN SYNDROME**

Four children with Angelman syndrome (AS) showed worsening of seizures after introduction of vigabatrin (VGB), at the University Children's Hospital, Zurich, Switzerland. Doses were 50-100 mg/kg/day in 3 and 150 mg/kg/day in 1. Improved seizure control followed reduction in dose of VGB to 35 mg/kg/day in one child. Myoclonic, atatic, tonic-clonic, and absence seizures were exacerbated. (Kuenzle Ch, Steinlin M, Wohlrab G, Boltshauser E, Schmitt B. Adverse effects of vigabatrin in Angelman syndrome. Epilepsia Nov 1998;39:1213-1215). (Reprints: Dr Ch Kuenzle, University Children's Hospital, Steinwiesstr 75, CH-8032 Zurich, Switzerland).

COMMENT. This report suggests that vigabatrin is contraindicated in children with Angelman syndrome and epilepsy, irrespective of the seizure type. Previous reports have found myoclonic seizures and atypical absences aggravated, but in the largest series, only 10% of epilepsies were exacerbated by VGB. Reasons for the unusual adverse effects of VGB in Angelman syndrome are undetermined.

### **RECTAL DIAZEPAM FOR REPETITIVE SEIZURES**

The effectiveness and safety of a single-dose Diastat (diazepam rectal gel) for treating clusters of acute repetitive seizures in a nonmedical setting by caregivers was evaluated by a multicenter, double-blind study at Oregon Health Sciences University and 28 other centers. Median seizure frequency in children aged 2 years or older was significantly reduced by Diastat compared to placebo, and a greater number of Diastat patients were seizure free post-treatment (55% cf 34%). Somnolence was the most common adverse effect. Only 3 of 56 receiving Diastat required additional emergency treatment compared to 7 of 58 in the placebo group. (Cereghino JJ, Mitchell WG, Murphy J, et al, and the North American Diastat Study Group. Treating repetitive seizures with a rectal diazepam formulation. A randomized study. Neurology Nov 1998;51:1274-1282). (Reprints: Dr JJ Cereghino, Oregon Health Sciences University, 3181 SW Sam Jackson Park Road, CDW3, Portland, OR 97201).

COMMENT. A single rectal dose of Diastat administered by a non-professional caregiver in a home environment is an effective and safe method of reducing seizure recurrence in children with clusters of acute repetitive seizures. The need for emergency medical treatment is often avoided, and family life is less disruptive. Respiratory depression, a safety concern after IV diazepam, was not observed after rectal Diastat.

### **GABAPENTIN MONOTHERAPY FOR PARTIAL SEIZURES**

A randomized double-blind trial of gabapentin monotherapy in patients with newly diagnosed partial epilepsy was conducted by an international study group. Gabapentin in 74 patients in each of 3 dosage groups (300, 900, or 1800 mg/day) was compared to open-label carbamazepine in 74 patients (600 mg/day)