COMMENT. Reports of Reye's syndrome declined in the surveillance period between 1982 and 1990, with a greater reduction in the number of classical Reye's syndrome cases than non-classical Reye-like cases after aspirin was withheld in 1986. Cases of classical Reye's syndrome were older and were more likely to have received aspirin. The authors conclude that their findings support a subset of Reye's syndrome but not all cases etiologically associated with aspirin. An inherited metabolic disorder is more likely in the Reye-like, non classical cases.

## ANTICONVULSANT DRUGS

### GABAPENTIN IN REFRACTORY PARTIAL SEIZURES

The efficacy of gabapentin as an additional medication in 32 children with refractory partial seizures was studied at the Children's Hospital, Boston, MA. A greater than 50% decrease in seizure frequency was obtained in 34% and a 25% to 50% decrease occurred in 12%. Approximately half the patients were benefited. Doses ranged from 10 to 50 mg/kg/day, and the mean gabapentin serum concentration correlating with seizure control was 3.7 mcg/ml. Hyperactivity, irritability, and agitation, in 15 (46%) children with mental retardation and attention deficits, were the major side effects. Mild behavior changes not requiring drug withdrawal, including impulsivity, irritability, and hyperactivity, were reported in 11 additional children. Personality was improved in 3 children. (Khurana DS, Mikati MA et al. Efficacy of gabapentin therapy in children with refractory partial seizures. J Pediatr June 1996;128:829-33). (Reprints: Mohamad A Mikati MD, Department of Pediatrics, American University Hospital, c/o American University of Beirut New York Office, 850 Third Ave, 18th Floor, New York, NY 10022).

COMMENT. Gabapentin may be an effective adjunctive medication in children with refractory partial seizures. Behavioral side effects were reversible when the drug was discontinued and were most prominent in the mentally retarded.

### MATERNAL AED TREATMENT AND NEONATAL BEHAVIOR

The relationship between antiepileptic drug (AED) treatment during pregnancy, neurobehavior of the neonate, and the neurological outcome in later life of 40 children exposed in utero to a single AED (phenobarbital, phenytoin, valproic acid) was studied at Children's Hospital, Virchow Klinikum of the Humboldt University Berlin; Institute of Toxicology and Embryopharmacology, Free University Berlin; and Department of Neuropediatrics, Children's Hospital, University of Heidelberg, Germany. Tonic clonic seizures during pregnancy occurred in 5 (27%) of the phenobarbital-treated women, in 5 (38%) treated with phenytoin, and in 3 (33%) of valproic-acid-treated women. AED exposed neonates had greater neurobehavioral disorders than the controls. Apathy was most pronounced in phenobarbital-exposed neonates, whereas hyperexcitability was more severe after maternal valproic acid (VPA) exposure. Phenytoin-exposed neonates, having the least neurobehavioral side effects, had low serum concentrations, whereas the concentrations of VPA in cord blood were relatively high. VPA concentrations at birth correlated with the degree of neonatal hyperexcitability and neurological dysfunction found at 6 year follow-up. (Koch S et al. Antiepileptic drug treatment in pregnancy: drug side effects in the neonate and