

## Prognosis of West syndrome

A most current article on West syndrome out of Istanbul University, Turkey, concerns 'The informative value of magnetic resonance imaging and EEG in the prognosis of infantile spasms.' (Saltik S, Kocer, N, Dervent A. Epilepsia March 2002;43:246-252). A total of 86 cases, 8 cryptogenic and 78 symptomatic, were followed clinically and by video-EEG and MRI for >1 year. A significant correlation was determined between clinical and EEG findings, especially with regard to psychosocial development, and less so for motor development. MRI findings were correlated only with motor development. EEG and MRI are complementary in regard to prognostic informative value.

## TOPIRAMATE-INDUCED VALPROATE TOXICITY

Three children with severe refractory epilepsy who developed typical valproate (VPA) adverse effects after introducing topiramate (TPM) in combination are reported from the University of Mannheim, Germany. Patient 1 was admitted at 16 months with psychomotor retardation and myoclonic seizures, subsequently diagnosed as Lennox-Gastaut syndrome. Initial treatment with carbamazepine (CBZ) and VPA was ineffective and the combination was changed to VPA and TPM. Apathy, loss of appetite, and fever developed after 4 weeks, and liver enzymes and ammonia levels were elevated. Recovery followed within 6 days after withdrawing VPA and TPM. All three patients developed severe typical VPA side effects with liver dysfunction during treatment with VPA and TPM, having tolerated VPA well in different AED combinations previously. VPA serum levels were within the normal range. One child had severe thrombocytopenia, and two had hypothermia, in addition to liver toxicity. All side effects were completely reversible after withdrawing VPA. (Longin E, Teich M, Koelfen W, König S. Topiramate enhances the risk of valproate-associated side effects in children. Epilepsia March 2002;43:451-454). (Reprints: Dr E Longin, University Children's Hospital, Theodor-Kutzer-Ufer, 68167 Mannheim, Germany).

COMMENT. The authors cite a report of 2 adult patients with severe typical VPA side effects that developed after treatment with VPA and TPM (Hamer et al. 2000). Symptoms of encephalopathy and hyperammonemia resolved after treatment was withdrawn. TPM appears to increase the risk of VPA toxicity when the drugs are used in combination. Careful monitoring of liver function and CBC is important when using VPA with TPM.

## TESTS OF ATTENTION IN NEWLY DIAGNOSED IDIOPATHIC EPILEPSY

Performance on tests of Reaction Time, Color Trails, Manual Tapping and Steadiness, and Sustained Attention were compared in 51 children with epilepsy (age 7-16 years) and 48 healthy classmates, in a study at Wilhelmina Children's Hospital, Utrecht, the Netherlands. Execution times and motor speed were not significantly different in children with epilepsy and controls. Significantly more patients than controls had transient poor performance in one or other task (69% cf 40%). Patients with prior school or behavior difficulties and those whose parents could not adjust to a diagnosis of epilepsy performed worse than those without these additional problems. Epilepsy-related variables did not explain any variance in performance of attention and other tasks. (Oostrom KJ, Schouten A, Kruitwagen CLJJ et al. Attention deficits are not characteristic of schoolchildren with newly diagnosed idiopathic or cryptogenic epilepsy. Epilepsia March 2002;43:301-310). (Reprints: Dr KJ Oostrom, Department of Child Neurology, Division of