Neurology June 2009;72;e114). (Response and reprints: Dr John Koury, 900 Walnut St, Ste 200, Philadelphia, PA 19107. E-mail: jskhoury@gmail.com).

COMMENT. Dancing as a form of epilepsy is a complex automatism, such as running (epilepsia cursiva) or bicycling movements. Lennox WG, in his book on epilepsy (1960;page 260) refers to episodes of running, spinning round and around, in seizures following head injury.

CHANGING TRENDS IN ANTIEPILEPTIC DRUG USAGE IN GIRLS

Concerns about potential effects on offspring have prompted a gradual change in antiepileptic drug usage in girls of child-bearing age in the last decade, according to a study at the School of Pharmacy and Institute of Child Health, University of London, UK. More females aged 12-18 years are prescribed lamotrigine (LTG) than carbamazepine or sodium valproate, and the 10-fold increase in LTG in females is significantly greater than the 5-fold rise for males. (Ackers R, Besag FMC, Wade A, Murray ML, Wong ICK. **Arch Dis Child** 2009;94:443-447) (Respond: Ian Wong. E-mail: ian.wong@pharmacy.ac.uk).

MOVEMENT DISORDERS

CLINICAL AND GENETIC ANALYSIS OF MYOCLONUS-DYSTONIA

Eighty-six myoclonus-dystonia (M-D) index patients from the Dutch national referral center underwent clinical and genetic evaluation in a study at University of Amsterdam, and other centers in the Netherlands and Belgium. Age of onset was 1 – 18 years in 48 (56%) and during adulthood in the remainder. Based on clinical examination, 24 cases were classified as definite M-D, 23 were probable, and 39 possible cases. According to previously published criteria, definite M-D had early onset and a positive family history. In the definite group, 50% carried an SGCE mutation; in the probable group, 4%; and in the possible cases, none had the mutation. (Ritz K, Gerrits MCF, Foncke EMJ, et al. Myoclonus-dystonia: clinical and genetic evaluation of a large cohort. **J Neurol Neurosurg Psychiatry** June 2009;80:653-658). (Respond: Dr MAJ Tijssen, Department of Neurology, Academic Medical Centre, University of Amsterdam, PO Box 22660, 1100 DD Amsterdam, The Netherlands. E-mail: m.a.tijssen@amc.uva.nl).

COMMENT. Myoclonus-dystonia is a genetically heterogeneous movement disorder with autosomal dominant inheritance. The clinical manifestations are myoclonus and dystonia predominantly in the upper body, and in adults may respond to alcohol. A mild dystonia often presents as cervical dystonia or writer's cramp; the myoclonus is rhythmic or arrhythmic, bilateral, asymmetric, involving mainly the proximal arms and axial muscles. The major gene locus maps to the epsilon-sarcoglycan gene (SGCE, DYT11) on chromosome 7q21-22. Various SGCE mutations are reported in several families and sporadic cases. In 50% cases of M-D, no mutation is identified.