blockers, calcium channel blockers, or methysergide). The efficacy of pyridoxine and diuretics has not been established in double-blind studies. Ergotamine tartrate at bedtime or twice a day is an effective prophylactic agent. Headache associated with oral contraceptive use or menopausal hormonal replacement therapy may be related in part to periodic discontinuation of estrogens. Oral contraceptives can induce, change, or alleviate headache. They can trigger the first migraine attack, most often in women with a family history of migraine. Stopping the contraceptive may not bring immediate headache relief and there may be a delay of one-half to one year or no improvement (Silverstein S D, Merriam G R Estrogens, progestins, and headache, Neurology June 1991; 41:786-793).

**COMMENT.** The influence of the menstrual cycle on migraine in older children and adolescents requires further evaluation and attention. The first migraine attack may be triggered by oral contraceptives and this possible cause should be considered in adolescent girls with migraine.

**MOVEMENT DISORDERS**

**FLUOXETINE IN TOURETTE SYNDROME**

An open label trial of fluoxetine (20-40 mg/d) was conducted in 32 Tourette syndrome patients with obsessive-compulsive disorder at the Department of Neurology, University of Rochester School of Medicine, NY. A subjective improvement in obsessions and compulsions occurred in 81% of 26 patients (13 children and 13 adults) who were treated for 3-8 months and a significant reduction in scores on the Leyton Obsessional Inventory occurred for both the adult and child groups. No serious adverse reactions were reported in either group. Side-effects included dyspepsia and nausea (4), skin rash (2), drowsiness (1) and mild hypomanic behavior (1) (Como P G, Kurlan R An open-label trial of fluoxetine for obsessive-compulsive disorder in Gilles de la Tourette's syndrome. Neurology June 1991; 41:872-874).

**COMMENT.** Fluoxetine is a new antidepressant that inhibits serotonin reuptake and is effective for psychiatric patients with obsessive-compulsive disorder. It appears to produce fewer and less toxic side-effects than clomipramine. The improvement in obsessive-compulsive disorder was most dramatic for the child sample of patients and may be a useful addition to the treatment of obsessive-compulsive disorder in Tourette syndrome.