COMMENT. The favorable result of surgery in this patient contrasts with the poor outcome of most patients with Landau-Kleffner syndrome treated medically. MRI and ictal SPECT should be considered in all patients with this syndrome to rule out localized structural pathology amenable to surgery.

**MOVEMENT AND BEHAVIOR DISORDERS**

**EARY SIGNS OF TOURETTE'S SYNDROME**

The early course of tics and behavioral disturbances in 101 children with Tourette's syndrome, aged 12 years (range, 8 to 21 years), are reported from the University of Rochester School of Medicine, Rochester, NY. The age at onset was 6.4 ± 3.1 years. At initial evaluation, 45% already had ADHD and 50% had obsessive-compulsive disorder (OCD). During the observation period of 1.6 years (range, 0.5 to 7 years), tics became controlled with medication in 81%, 13% developed ADHD, 8% OCD, 28% disruptive behavior, and 25% school problems. Of those with behavioral disorders initially, about 50% were controlled over time with treatment. Tic suppressants were withdrawn from 12% of patients. (Park S, Kurlan R et al. The early course of the Tourette's syndrome clinical spectrum. Neurology Sept 1993;43:1712-1715). (Reprints: Dr Kurlan, Department of Neurology, University of Rochester School of Medicine, 601 Elmwood Avenue, Rochester, NY 14642).

COMMENT. If ADHD and OCD are absent at the onset of tics, it is unusual for these behaviors to develop later. Disruptive behavior and school problems are more likely to develop over time.

**DESMOPRESSIN ACETATE AND NOCTURNAL ENURESIS**

A literature review of 18 randomized controlled trials of desmopressin for resistant enuresis involving 689 patients is reported from the University of Manitoba, Canada. Frequency of wetting decreased in all studies, ranging from 10% to 91%, and 25% of subjects became completely dry. In the long-term, only 5.7% of responders remained dry after medication was withdrawn. Children older than 9 years do better than those treated at an earlier age. A dose-response effect was apparent, and side-effects consisting of nasal stuffiness, headache, epistaxis, and abdominal pain were infrequent. No cases of water intoxication were reported. In one comparative study, patients treated by conditioning alarms had 10% fewer wet nights and a better long-term result. (Moffatt MEK et al. Desmopressin acetate and nocturnal enuresis: How much do we know? Pediatrics Sept 1993;92:420-425). (Reprints: Dr Moffatt, Univ Manitoba, Room S100-750 Bannatyne Avenue, Winnipeg, Manitoba R3E 0W3, Canada).

COMMENT. If we need to treat, alarms seem superior to drugs.