
COMMENT. A recent American Academy of Neurology AIDS Task Force consensus report on nomenclature suggested that the term "HIV associated progressive encephalopathy of childhood" be adopted to replace AIDS encephalopathy and other terms used to describe the CNS abnormalities directly related to HIV-1 infection. (*Neurology* 1991;41:778-785). Belman AL reviews the recent advances in AIDS and the nervous system in *Progress in Pediatric Neurology II* (Millichap JG, Ed. PNB Publishers, 1994, pp397-400).

**HEADACHE AND VASCULAR DISORDERS**

**CEREBRAL VEIN THROMBOSIS AND SYSTEMIC LUPUS**

Three girls, ages 11, 14, and 17, with systemic lupus erythematosus, who had headache and were diagnosed with cerebral vein thrombosis are reported from the Hospital for Sick Children, University of Toronto, and the Children's Hospital, McMaster University, Hamilton, Canada. Diagnosis was established by CT and MRI without need of angiography. Cerebral infarct occurred in one patient when diagnosis was delayed. All patients received low-dose oral anticoagulation and treatment for lupus and none had further thrombotic events during 10-18 month follow-up. (Uziel Y et al. Cerebral vein thrombosis in childhood systemic lupus erythematosus. *J Pediatr* May 1995;126:722-727). (Reprints: ED Silverman MD, Division of Rheumatology, The Hospital for Sick Children, 555 University Ave, Toronto, Ontario, Canada M5G 1X8).

COMMENT. Headache is the chief presenting symptom of cerebral venous thrombosis. These are of the tension or vascular type in 25%, but migraine headache and those associated with increased intracranial pressure also occur. Associated seizures, papilledema, and hemiparesis are also suggestive. A severe, persistent, throbbing headache, unresponsive to analgesics, points to a possible cerebral vein thrombosis, and is an indication for CT examination.

**MIGRAINE AND ISCHEMIC STROKE**

The relation between migraine and ischemic stroke in 72 young women aged under 45 and 173 controls was investigated at five hospital in Paris and suburbs. A questionnaire based on the International Headache Society's criteria for headache and migraine was used in telephone interviews. Migraine and ischemic stroke were strongly associated. Migraine was diagnosed in 60% of patients with stroke compared to 30% of controls. Women with migraine had a more than threefold increased risk of ischemic stroke (19 per 100,000 per year) compared with women without migraine (6 per 100,000 per year). The risk of stroke was higher in cases with aura than in those without aura. It was increased for migrainous women who used oral contraceptives or who were heavy smokers (>20 cigarettes/day). (Tzourio C et al. Case-control study of migraine and risk of ischaemic stroke in young women. *BMJ* 1 April 1995;310:830-833). (Respond: Dr Tzourio, INSERM U 360, Recherches Epidemiol en Neurologie et Psychopathologie, Cedex 94807 Villejuif, France).