correlate moderately with increased disease duration. Head size of pediatric MS patients is lower than controls. (Kerbrat A, Aubert-Broche B, Fonov V, et al. Reduced head and brain size for age and disproportionately smaller thalami in child-onset MS. **Neurology** January 17, 2012;78(3);194-201). (Response and Reprints: Dr Collins, E-mail: louis.collins@mcgill.ca).

COMMENT. Onset of MS during childhood is associated with smaller head size, brain volume, and even smaller thalamic volume. Cognitive impairment is a notable feature of pediatric MS. (Amato M et al. **Neurology** 2007;70:1891-1897), and thalamic volume correlates with cognitive performance of children with MS. (Till C et al. **Neuropsychology** 2011;25;319-332).

HEADACHE DISORDERS

SHARED GENETIC ETIOLOGY FOR MIGRAINE AND EPILEPSY

Shared loci for migraine and epilepsy were found on chromosomes 14q12-q23 and 12q24.2-q24.3 in a linkage analysis study of a Finish family with a complex phenotype, in a report from Folkhalsan Institute and other centers in Helsinki and Oulu, Finland; University of California, Los Angeles; and Wellcome Trust Sanger Institute, Cambridge, UK. Of 60 family members, 12 (20%) had idiopathic epileptic seizures, and 8 of the 12 (67%) also had migraine. Seven (12%) had febrile seizures. (The novel migraine locus identified on chromosome 12 has previously been linked to febrile seizures [Gurnett CA et al. **Neurogenetics** 2007;8:61-63]). Ten family members (17%) had sudden somnolence lasting a few minutes to 2 hours and associated with centrotemporal EEG abnormalities. Thirty-three of the 60 family members (55%) had migraine (20 [33%] without and 13[22%] with aura), and 37 (62%) had either migraine or epilepsy. Nine (15%) family members had both migraine and epilepsy. (Polvi A, Siren A, Kallela M, et al. Shared loci for migraine and epilepsy on chromosome 14q12-q23 and 12q24.2-q24.3. **Neurology** January 17, 2012;78:202-209). (Response and Reprints: Dr Polvi. E-mail: anne.polvi@helsinki.fi).

COMMENT. Migraine and epilepsy share a common genetic etiology. Of patients with migraine, 6% have epilepsy and up to 26% of patients with epilepsy have migraine (Ottman R, Lipton RB. **Neurology** 1994;44:2105-2110 and others, cited by authors). Antiepileptic medications are effective in the prophylaxis of migraine. (Barbanti P et al. Migraine prophylaxis: what is new and what we need? **Neurol Sci** 2011;32(suppl 1):S111-S115).

EFFECT OF HEADACHE ON ACADEMIC PERFORMANCE

Researchers at University of Pernambuco, Recife, Brazil interviewed 344 randomly selected, university, social communication students to determine the 1-year prevalence of headache, types of headache, and the effects on academic performance. The mean age was 23.4 years; 57.3% were women. Headache prevalence was 87.2%