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COMMENT. Metabolic brain network patterns differentiate subjects with TS from controls, as well as a second pattern that differentiates TS subjects with OCD from those without OCD. The brain networks involve regions associated with motor activity as well as those regions associated with behavioral changes (anterior cingulate and prefrontal cortex).

In an editorial, Dr Katie Kompoliti of Rush Med Sch, Chicago comments that this study identifies TS-related abnormal network patterns that encompass multiple interacting nuclei instead of isolated regions, a view of the whole “elephant,” not just the trunk or tail. (**Neurology** March 15, 2011;76:938-939). She remarks that the study is limited by differences in gender mix of subjects (mainly male) and controls (mainly female). Other limitations include the age of subjects (all adults whose tics are usually severe), and the absence of additional TS comorbidities such as ADHD that might influence results.

AZITHROMYCIN-ASSOCIATED CHOREOATHETOSIS

Researchers at Women and Children’s Hospital of Buffalo, NY, report an 11-year-old boy with a history of developmental delay who developed transient agitation and choreoathetoid movements of upper extremities in temporal relation to treatment of influenza A and B respiratory infections with oral azithromycin on 2 occasions. Symptoms improved with brief administration of clonazepam or lorazepam, and they resolved within 36-48 hours of discontinuation of azithromycin. The association of agitation and movement disorder with azithromycin is previously unreported. A causal relation was considered probable, based on a score of 6 on the Naranjo adverse drug reaction probability scale. (Farooq O, Memon Z, Stojanovski SD, Faden HS. Azithromycin-induced agitation and choreoathetosis. **Pediatr Neurol** 2011;44:311-313). (Respond: Dr Farooq, Women and Children’s Hospital, Division of Pediatric Neurology, 219 Bryant Street, Buffalo, NY 14222. E-mail: osmanfarooq@yahoo.com).

COMMENT. Macrolide antibiotics, especially clarithromycin, are known to cause acute psychoses when given with amoxicillin. A syndrome known as “Hoigne syndrome” or “antibiomania” consisting of delusions, paranoia, and hallucinations is reported. One patient developed catatonia during azithromycin treatment. In the present case-report of choreoathetosis with azithromycin, the association of influenza viral infection is a possible factor in etiology.

NEUROPATHIES

PEDIATRIC SCIATIC NEUROPATHIES

Prospective review of the incidence, cause, and prognosis of pediatric sciatic neuropathy (SN) in a 30-year experience of 53 patients is reported from the Department