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The Editor will welcome Short Reports or Preliminary Communications limited to about 1000 words and with no more than one figure and one table. Also welcome are Letters to the Editor.

ETHICS Ethical considerations will be taken into account in the assessment of papers (see the Medical Research Council's publications on the ethics of human experimentation, and the World Medical Association's code of ethics, known as the Declaration of Helsinki (see *British Medical Journal* 1964;**2**:177)).

ABBREVIATIONS Measurements should be expressed in SI units (see *Journal of Clinical Pathology* 1974;**27**: 590-7; *British Medical Journal* 1974;**4**:490; *International System of Units* 1972. National Bureau of Standards, Special Publication 330. United States Bureau of Printing: Washington). For recognised abbreviations see *Journal of Neurology, Neurosurgery, and Psychiatry* 1975;**38**:5; and *Units, Symbols and Abbreviations,* Third Edition 1977, edited by DN Baron, Royal Society of Medicine: London.

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Penn AS. Immunological features of myasthenia gravis. In: Aguayo AJ, Karpati G, eds. *Topics in Nerve and Muscle Research.* Amsterdam: *Excerpta Medica* 1975:123-32.

Coers C, Woolf AL. *The innervation of muscle. A biopsy study.* Oxford: Blackwell, 1951:16-24.

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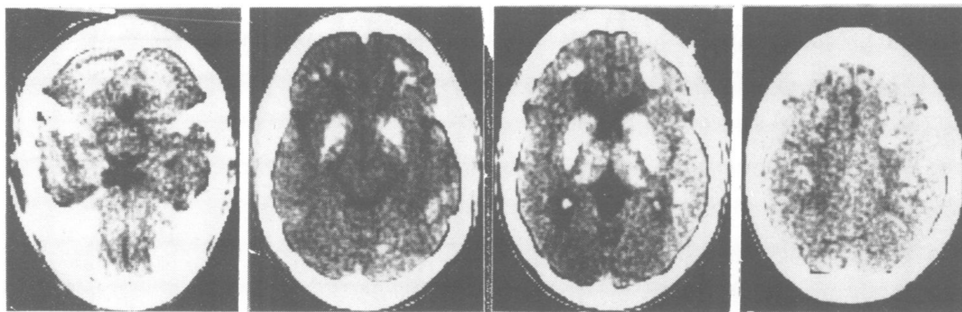

Fig. *CT scan without contrast: calcification of basal ganglia, frontal, parietal and occipital lobes and cerebellum is seen on both sides.*

[2] Albright F, Burnett PH, Smith CH, Parson W. Pseudohypoparthyroidism—an example of "Seabright-Bantam syndrome". *Endocrinology* 1942;**30**:922–32.

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[4] Kaiserman D, Liegler D, Amorosi ED. CAT scan in hypoparathyroidism. *Ann Neurol* 1977;**2**:249–50.

[5] Valentine AR, Pullicino P, Bannan E. eds. *A Practical Introduction to Cranial CT*. London: Heinemann, 1981.

Accepted 14 October 1983

Chorea in digoxin toxicity

Sir: The central nervous system manifestations of digoxin intoxication include visual disturbances, delirium and seizures, but there have been no previous reports of the occurrence of chorea with digoxin toxicity.[1 2]

A 76-year-old woman was admitted to hospital with atrial fibrillation and congestive cardiac failure. She was treated with digoxin and diuretics, eventually being discharged on digoxin 0·25 mg daily. Four weeks after the onset of digoxin therapy, she developed nausea and vomiting together with the progressive onset of choreic movements in the face, the left arm and the left leg. These movements increased and when the patient was reviewed in the clinic two weeks later her plasma digoxin level was 4·2 nmol/l (therapeutic range: 1·2–2·6 nmol/l). The patient had not recieved neuroleptic drugs and there was no past history of rheumatic fever or chorea. The packed cell volume, urea, electrolytes, liver function and thyroid function tests were within normal limits and autoantibodies were negative. A CT brain scan showed only cortical atrophy. Discontinuation of treatment with digoxin was associated with marked improvement but not abolition of the choreic movements over the following seven days.

The relationship of the treatment with digoxin to the onset of the choreic episodes and the improvement on stopping therapy raises the possibility that the chorea was unleashed by the toxic levels of digoxin. The unilateral distribution of the dyskinesias, however, suggests an underlying structural lesion in the basal ganglia and a small lacunar cerebral infarct cannot be excluded. In patients with chorea induced by oral contraceptives a history of antecedent rheumatic chorea or striatal abnormality is invariably present.[3] Both digoxin and oral contraceptives are structurally similar in the possession of a steroid nucleus and may trigger chorea by altering central dopaminergic activity within the corpus striatum.

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[1] Lely AH, Van Euler CJH. Large scale digitoxin intoxication. *Br Med J* 1970;**iii**:737–40.

[2] Aronson JK. Digitalis intoxication. *Clin Science* 1983;**64**:253–8.

[3] Nausiede PA, Koller WC, Weiner WJ, Klawans HL. Chorea induced by oral contraceptives. *Neurology (Minneap)* 1979;**29**:1605–9.

Accepted 18 November 1983

Notices

Congress of Neurological Surgeons

The Thirty-fourth annual meeting will be held in New York, 30 September to 5 October, 1984. Information may be obtained from Michael Salcman, MD, 22 South Greene Street, Baltimore, Maryland 21201, USA.

The European Society for Paediatric Neurosurgery will meet in Vienna, 10–13 October 1984. Information may be obtained from Prof. W. Th. Koos, Neurochirurgische Universitats Klinik, 9 Alsar Strasse 4-A1090 Vienna.