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Palatal myoclonus affected by neck posture

Dear Sir.

We read with interest the paper entitled 'palatal myoclonus affected by neck posture' by Tomkinson et al. (January 1995). Whilst the authors correctly stipulated that the treatment of persistent palatal myoclonus is generally unsatisfactory, we draw their attention to the encouraging results obtained with the injection of clostridium botulinum toxin into the palatal muscles (Saeed and Brookes, 1993). The three patients presented in our report over two years ago continue to undergo toxin injection every four to six months and to date remain free of their distressing and intrusive tinnitus.

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Author's reply

Dear Sir.

We are grateful to Saeed and Brookes for highlighting the success they have experienced with clostridium botulinum toxin in patients with palatal myoclonus. The application of this potent neurotoxin in the treatment of this condition was first described by Le Pajolec *et al.* (1990) and it is encouraging to learn that the three patients initially described by Saeed and Brookes in 1993 have continued to benefit from this therapy.

Botulinum toxin has been applied in various forms of dystonia and movement disorders, in many cases to great benefit (Jankovic, 1994). However, only time will tell if it will live up to its initial promise in the treatment of palatal myoclonus.

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