Convulsion in children with gastroenteritis without severe electrolyte disturbance

To the Editor.

I have read with interest Ghorashi and his colleagues' paper in the recent issue of the Journal, entitled "Convulsion following gastroenteritis in children without severe electrolyte imbalance" (2010; 52: 301-305).

Although there were no significant differences between the case and control groups (p>0.05), 5 patients in the case group had marked hypocalcemia (Ca^{++} <7.2 mg/dl), which could be one cause of convulsion, but none among the controls. I wish that in this large well-designed study, serum magnesium levels had also been determined.

I also wish that the type of shigellosis was searched, since encephalopathy, which could also be a cause of convulsion, has been reported in shigellosis with flexneri infection more frequently^{1,2}. More frequent EEG abnormalities (9 vs 1) might also be some evidence of the more frequent encephalopathy in the case group.

In fact, shigella infection was detected 4 times more frequently in the study group than in controls.

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