

Infantile Tremor Syndrome: Still A Mystery!

With reference to the recent publication in *Indian Pediatrics* [1], infantile tremor syndrome may indeed be 'down' perhaps in terms of incidence, but certainly not 'out' in terms of etiology. Authors found low serum vitamin B₁₂ only in 8 of 16 infants and they are justifiably cautious in stating that vitamin B₁₂ deficiency is "causally associated". There was initial worsening of tremors even in six of their patients in spite of vitamin B₁₂ therapy.

The quest for the cause of this syndrome of tremors, pigmentation, anemia and regression of milestones, seen in breastfed infants of vegetarian mothers is by no means over. We had earlier called it Infantile 'meningoencephalitic' syndrome [2]. Vitamin B₁₂ deficiency may be an important associated factor in the biochemical process resulting in the syndrome [3], but is unlikely to be its cause by itself. In one of our studies [4], we have shown associated increase in the number of bands and heavy concentration of some amino acids and their metabolic products on serum and urine chromatography, when we compared it to age-matched norms. Interestingly, methylmalonic aciduria and homocystinuria have been demonstrated in Vitamin B₁₂-deficient patients [5].

A word of caution is needed about the belief that it is an entirely self-limited, transient entity, completely responsive to therapy. A follow-up study of 2 to 10 years carried out by us [6] showed that as many as 18 out of 23 infants recorded low scores on IQ tests during follow-up;

twelve scored an IQ below 70, with poor scholastic performance reported by parents. Speech defects were present in a third of all; dyslalia was present in the majority (6 out of 7), and one had stammering. All infants had shown initial recovery in the disappearance of tremors, anemia and pigmentation irrespective of any specific therapy other than improved diet and general nutritional support at the onset of the disease. We are not aware of any other similar long-term studies.

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