## Neurological disorders

Bibliographic reference	Ruggieri et al. (2008)		
Study type	Case control		
Study quality	<ul> <li>The Joanna Briggs Institute Prevalence Critical Appraisal Tool (http://ijhpm.com/article_2870_607.html)</li> <li>1. Was the sample representative of the target population? YES</li> <li>2. Were study participants recruited in an appropriate way? YES (consecutive sample recruited)</li> <li>3. Was the sample size adequate? YES</li> <li>4. Were the study subjects and the setting described in detail? YES</li> <li>5. Was the data analysis conducted with sufficient coverage of the identified sample? YES</li> </ul>		

	<ol> <li>Were objective, standard criteria used for the measurement of the condition? YES</li> <li>Was the condition measured reliably? YES</li> <li>Was there appropriate statistical analysis? YES</li> <li>Are all important confounding factors/subgroups/differences identified and accounted for? YES</li> <li>Were subpopulations identified using objective criteria? NA</li> </ol>				
	Overall risk of bias = LOW				
Country	Italy				
Number of patients	N=630 children with unknown neurological disorders N=300 children with known neurological disorders N=300 healthy controls				
Study population	Inclusion (unknown neurological disorders): consecutive children fully evaluated and found to have neurologic disorders between 1998 and 2004 (90 per year) - clinical features of patients with unknown neurological disorders: 270 with developmental delay, 180 with epilepsy, 100 with mental retardation, 50 with headache, 12 with chorea, 10 with ataxia and 8 with neuropathy				
		Number			
	Neurological diagnosis	included			
	Neurofibromatosis type 1 (plus failure to thrive)	54			
	Neurofibromatosis type 2 24				
	Ruberous sclerosis complex 4				
	Complex malformation syndromes (ie. Marfan syndrome, Sotos syndrome, fragile X syndrome, etc)	23			
	Brain malformation dysplasia (ie. lissencephaly, cortical heterotopias, double cortex, etc)	22			
	Paraneoplastic neurologic syndromes (including leukemia, neuroblastoma, non-Hodgkins lymphoma)	21			
	Cerebellar degeneration (including carbohydrate-deficient glycosylation syndromes, episodic ataxia type 2)	20			
	Multiple sclerosis	18			
	Known leukodystrophies (ie. Krabbe disease, Canavan disease, etc)	18			
	Ataxia-telangiectasia	17			
	Congenital myasthenia syndromes	10			
	Congenital muscular dystrophies (including Fukuyama disease, muscle-eye-brain disease)	9			
Control	Children matched for age, sex and municipality of residence who attended the Department of Paediatrics for check-up had serological testing	r a normal developr	mental		

	(1.33% [4] had single episodes of febrile seizures and 6% [18] had headache)				
Follow-up	8.7 years (from 4 to 14) in study group with gluten sensitivity				
Details of coeliac testing	IgA and IgG AGA, IgA-class EMA, IgA-class anti-tTG (ELISA method) Biopsy for all with positive serology (diagnosed based on ESPGHAN criteria)				
Results	Results from biopsy in all groups				
	Group	Positive gut biopsy			
	Gluten sensitivity (n=835)	100% (835/835)			
	Neurologic disorder with unknown cause (n=630)	1.1% (7)			
	Neurologic disorder with known cause (n=300)	0.3% (1)			
	Healthy controls (n=300)	0.7% (2)			
Source of funding	Not reported				
Conflicts of interest	Not reported				
Comments	Study also reports the rate of neurological disorders in a group of patients with gluten sensitivity but this was not presented here as it was not compared to the rate of neurolgoical disorders in a control group				

Definitions of abbreviations are given at the end of this document.