

**In Response To:**

Lee D, Ahn TB. Glycemic choreoballism. Tremor Other Hyperkinet Mov. 2016; 6. doi: 10.7916/D8QJ7HNF

**Original Article:**

Cosentino C, Torres L, Nuñez Y, et al. Hemichorea/hemiballism associated with hyperglycemia: report of twenty cases. Tremor Other Hyperkinet Mov. 2016; 6. doi: 10.7916/D8DN454P

Letters

**Reply #1 to: Glycemic Choreoballism**

**Carlos Cosentino<sup>1\*</sup>, Luis Torres<sup>1</sup>, Yesenia Nuñez<sup>1</sup>, Rafael Suarez<sup>1</sup>, Miriam Velez<sup>1</sup> & Martha Flores<sup>1</sup>**

<sup>1</sup>Departamento de Enfermedades Neurodegenerativas, Instituto Nacional de Ciencias Neurológicas, Lima, Perú

**Keywords:** Chorea, Ballism, Hyperglycemia

**Citation:** Cosentino C, Torres L, Nunez Y, et al. Reply #1 to: Glycemic choreoballism. Tremor Other Hyperkinet Mov. 2016; 6. doi: 10.7916/D8KW5GBF

\*To whom correspondence should be addressed. E-mail: cosentinoe@gmail.com

**Editor:** Elan D. Louis, Yale University, USA

**Received:** October 12, 2016 **Accepted:** October 29, 2016 **Published:** December 8, 2016

**Copyright:** © 2016 Cosentino et al. This is an open-access article distributed under the terms of the Creative Commons Attribution–Noncommercial–No Derivatives License, which permits the user to copy, distribute, and transmit the work provided that the original authors and source are credited; that no commercial use is made of the work; and that the work is not altered or transformed.

**Funding:** None.

**Financial Disclosures:** None.

**Conflict of interest:** The authors report no conflict of interest.

**Ethics Statement:** Not applicable for this category of article.

We thank Drs. Lee and Ahn for their comments on our article.<sup>1</sup> We agree that operational diagnostic criteria are needed to better identify and treat chorea/ballism associated with hyperglycemia. Even if we propose a triad that consists of involuntary movements (chorea and/or ballism), contralateral striatal abnormalities on neuroimaging, and hyperglycemia, it is acceptable to replace hyperglycemia for diabetes mellitus, as some patients may present with euglycemia especially if they present many days after involuntary movement onset. Nevertheless, the fact is that diabetes was newly diagnosed after

admission in almost half of the cases in our study. Accurate diagnosis of chorea/ballism associated with hyperglycemia is still a challenge, as is determining the appropriate treatment for this condition.

**References**

1. Cosentino C, Torres L, Nuñez Y, et al. Hemichorea/hemiballism associated with hyperglycemia: report of twenty cases. *Tremor Other Hyperkinet Mov* 2016;6. doi: 10.7916/D8DN454P.