

and vitamin K for bile acid abnormality and phenobarbital, levetiracetam, and carbamazepine for the partial seizures. At age six months, the patient was discharged from the hospital and received supportive care at home.

Because Zellweger syndrome is often confused with other diseases presenting with hypotonia, the importance of CDP of the patella has been emphasized in recent years.<sup>3,4</sup> Early diagnosis in newborns is important for prolonging the time spent with their families.<sup>5</sup> This patient demonstrates that routine radiography can provide a critical diagnostic clue and lead to the early diagnosis of Zellweger syndrome.

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Hiroki Kitaoka, MD, Yoshihiko Shitara, MD, Utako Kondo, MD,  
Reiko Kushima, MD, Isaku Omori, MD  
*Department of Neonatology, Tokyo Metropolitan Bokutoh Hospital,*  
*Tokyo, Japan*  
E-mail address: [kitaoka-cib@umin.ac.jp](mailto:kitaoka-cib@umin.ac.jp) (H. Kitaoka).

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## Correspondence Reply to Kitaoka et al.



To the Editor:

I wish to reply to Kitaoka et al.<sup>1</sup> I thank the authors for citing my recent Clinical Letter in *Pediatric Neurology* entitled “Chondrodysplasia punctata: A clue to the Zellweger spectrum disorders.” In the report, I presented an interesting and perhaps unique patient in whom Zellweger syndrome was accompanied by chondrodysplasia punctata (CDP). Although it remains unclear if CDP is a cardinal sign of all Zellweger spectrum disorders, it is important to know that another patient with Zellweger syndrome manifested with CDP. This second case again illustrates that routine radiography should be carefully screened in suspected cases.

## Reference

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Nigel S. Bamford, MD  
*Departments of Pediatrics*  
*Neurology, Cellular and Molecular Physiology*  
*Yale University*  
*New Haven, Connecticut*  
E-mail address: [nigel.bamford@yale.edu](mailto:nigel.bamford@yale.edu).

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