

IS MIGRAINE A CRITICAL RISK FACTOR IN STROKE? – YES

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Migraine, a primary headache, is a common, multifactorial highly disabling neurovascular disease with a high socio-economic impact. Its prevalence is 6-18%, with a sex distribution ratio between women and men of 3:1. Migraine displays comorbidity with vascular diseases (including cerebrovascular disorders such as a transient ischaemic attack (TIA), or ischaemic or haemorrhagic stroke), depression and epilepsy. There are a number of data which indicate that migraine is a critical risk factor in stroke.

The relative risk of TIA in migrainous women with aura versus controls is 1.55 (95% CI 1.3-2.34). Migrainous infarction is a distinct condition with an ischaemic brain lesion in the region associated with migraine aura. The American Migraine Prevalence and Prevention study showed an association between any migraine and ischaemic stroke (odds ratio (OR) 1.61; 95% CI 1.19-2.18) and between migraine with aura and ischaemic stroke (OR 3.14; 95% CI 2.25-4.38). The Stroke Prevention in Young Women Study demonstrated that women with migraine with aura who smoke and use oral contraceptives have a 10-fold higher odds of stroke. A patent foramen ovale is significantly more common in those with migraine with aura (38%) than in the general population (7%). Brain white matter lesions in migraine patients are associated with an increased risk (OR 3.9) in the region of the posterior circulation. The Women's Health Study revealed a hazard ratio of haemorrhagic stroke of 2.31 in women with migraine with aura.

These data clearly indicate that migraine with aura, especially in women, is a critical risk factor in cerebrovascular diseases.