

Headache is the predictor of lacunar strokes: the data from the stroke registry sits-Kyrgyzstan

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Aim: To characterize headache in patients with lacunar strokes, and to find a correlation between headache type, intensity and stroke outcome. Methods: We studied a sample of 68 patients with acute lacunar infarction enrolled in SITS stroke registry, with confirmed lacunar lesion on DWI scans of MR. Fazekas scale was used for leukoareosis evaluation and NIHSS - for the stroke severity at the onset. All patients were interviewed on the presence of headache before and in the onset of stroke, its severity was estimated according to Visual Analogue Scale (VAS). In 10 days after stroke NIHSS and VAS were repeatedly measured and statistical correlation between them was described. Results.— Headache was present in 90 % of observed patients at onset, strongly connected with arterial hypertension ($p=0.0001$). Systolic blood pressure higher than 156 mm was associated with increasing headache in sample ($p=0.01$). Headache was diffused and “pressure type” in 78% of all headache patients. Mean baseline NIHSS score in patients with headache was $8 (\pm 1.8)$ what is minor stroke, and mean VAS was $6 (\pm 2)$. There was no significant correlation between intensity of baseline headache and baseline NIHSS, and lacunar infarct localization and headache intensity, but strong association of dull headache and infarcts with leukoareosis in 3rd stage. In 64% headache significantly decreased to 10th day of stroke (VAS 3 ± 0.9). Conclusions: In patients with lacunar infarction, headache is moderate, diffuse and “pressure type”, not correlates with infarction site and NIHSS scale. 3rd stage of leukoareosis we found strongly associated with headache ($p=0.001$).