

First detailed picture of migraine attack

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Every eight adults in Sweden suffer from migraine. Using a new method, researchers at Göteborg have managed for the first time ever to provide a detailed picture of an untreated attack. This will be of great significance for the development of new forms of treatment. The findings are reported in a dissertation at the Sahlgrenska Academy.

In the first nation-wide study of migraine in Sweden, it is shown that one million individuals, more than 13 percent of the adult population, suffer from migraine. In total they experience some ten million attacks each year. The condition is characterized by an intensive pulsing headache, hypersensitivity to light and sound, and severe nausea and vomiting. Migraine is roughly twice as common among Swedish women as Swedish men. About 200,000 Swedes have migraine without being aware that their symptoms are classified as such. A majority of those affected report negative impact on the highest ranking factors in life, such as family life and the ability to perform their work and enjoy meaningful leisure time.

Only every fourth individual with migraine is seeing a doctor, which is a lower figure than for the rest of the western world. The study shows moreover that every third individual who has seen a doctor regards the information about various treatment options as poor or extremely poor.

"Many people had gone to their doctor previously but stopped. This is remarkable considering the fact that most people want to try another migraine treatment than their current one," says Mattias Linde, a medical specialist in neurology and author of the dissertation.

In his dissertation Mattias Linde has managed to use a new method to capture detailed pictures of migraine attacks. A number of patients who could stand to refrain from any treatment for 72 hours were asked to assess the intensity of the various migraine symptoms on a hundred-degree scale. In this way he was able for the first time to produce a highly exact picture of how a migraine attack develops hour by hour.

"This is a breakthrough that provides research with a new and unique picture of the great complexity and wealth of variation that characterizes this enigmatic condition. The pain tends to follow a slowly undulating rhythm between medium and insufferable intensity," says Mattias Linde.

The findings show that acute drugs often provide good but short-lived relief, whereupon the complaints return to their original pattern after a couple of hours. The conclusion is that the various symptoms are driven by a common factor in the brain, and that modern treatments for attacks fail to block off this unknown area.

The overwhelmingly dominant thinking among migraine researchers internationally, and not least in the U.S., is that a condition for effective treatment is that it must be ingested early in the course of an attack before the pain mounts. This has now been refuted by Mattias Linde, who has compared early and late injection treatment in the same patients. No statistically significant difference was shown, and a majority of the patients felt that the treatment was equally effective when administered late, during high levels of pain.

"It's reassuring now to be able to encourage patients to take their treatment, either as a nasal spray or as a suppository, even if they didn't do so at an early stage," says Mattias Linde.

Many patients experience side effects of modern treatments for attacks in the form of unpleasant and sometime painful sensations. For example,

it can be painful to come into contact with water, which often leads to a concern that patients will avoid taking their medicine. The dissertation shows that this is a benign and short-lived phenomenon resulting from a lowering of the pain threshold in the nervous system.

Source: The Swedish Research Council

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