

What is migraine?

Migraine is the commonest cause of recurrent, severe headache. It is experienced at some point by >20% of women, and >10% men. The tendency to suffer from migraine has a genetic basis, but individual attacks may be triggered by internal or external influences, or simply come by themselves for no apparent reason.

The name 'migraine' comes originally from the Greek term *hemicrania*, meaning 'half of the head'. The 'he' was dropped in Old French, creating the name *megrin*, which persisted in the scientific literature on the subject as late as the second half of the 19th century. The very name of the condition therefore represents one of its most striking features - the fact that in many (but not all) cases the pain only affects one half of the head. It is important to remember, however, that the pain can be felt on both sides, at the front or the back of the head, and even in the face. The pain is generally throbbing in nature, and often made worse by any form of movement or exertion.

Unlike tension-type headaches, which are generally featureless, the pain of migraine is usually accompanied by other features such as nausea, dizziness, extreme sensitivity to lights, noises, and smells, lack of appetite, disturbances of bowel function, and so on. In many cases these features are as debilitating as the actual pain. Rarely people may experience these features without any pain at all, and it can often take some time for it to be recognised that the problem is in fact migraine.

1 in 5 migraine sufferers experience *aura*, usually (but not invariably) before the headache starts. Most aura is visual, consisting of a combination of positive visual phenomena (floaters, flashes of light, moving or expanding zig-zag patterns, and so on) and negative phenomena (loss of vision causing blind spots). Many sufferers also experience sensory aura, consisting of tingling and numbness, often spreading over the hand, arm, face, lips and tongue on one side of the body. More rarely people may become weak down one side of the body, experience difficulty speaking, or develop double vision, inco-ordination, and vertigo. These symptoms usually settle before the pain starts. A small proportion of sufferers experience aura without any headache at all.

Many of these symptoms can be caused by other neurological disorders, and it is important to seek medical advice if you experience them. Having said that, however, if they come recurrently and are followed by a migrainous headache, then the diagnosis will almost certainly be migraine!

Between 10-20% of migraineurs experience premonitory symptoms up to 48 hours before their migraines. These are also known as the *prodrome*. Such symptoms may include fatigue or abnormal bursts of energy, neck stiffness, yawning, and frequent urination. Similarly many people experience a *postdrome* after the attacks, during which they may experience grumbling headache, a bruised feeling in the head, fatigue and nausea, and a continuing sensitivity to lights, noises, smells, and movement.

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