Migraine and Stroke: Two Peas in a Very Dangerous Pod

Migraine and stroke are very common and debilitating neurological conditions (disorders of the body’s nervous system). Because they are so common, they can often co-exist in the same person. The relationship is much more complicated than that.
Many people believe that having migraine, especially the type associated with an aura, is an independent risk factor for having a stroke. It should also be noted that migraine could occur after any form of neurological injury such as head trauma or stroke.

This article aims to describe the relationship between migraine and stroke and answer some basic questions about the relationship.

**What is a migraine?**

Migraine is a chronic neurological disorder characterized by recurrent moderate to severe headaches often in association with a number of neurological symptoms.

Typically the headache is one-sided, feels like a pulsation, and lasts hours to days. Associated symptoms may include nausea, vomiting, increased sensitivity to lights and sounds, and the pain is worsened by activity. Up to one-third of people with migraine have auras: short-lived disturbance in visual, sensory, language, or motor functioning.

**What is a stroke?**

A stroke is the rapid loss of brain function due to disruption of the blood supply. This can be due to ischemia (decreased blood supply) caused by blockage (clot), or a hemorrhage (bleeding from broken blood vessel).
This loss of function can result in sudden weakness or numbness, sudden confusion or trouble with speech, sudden trouble with vision, sudden trouble walking, or dizziness, or a sudden severe headache with no known cause.

Can migraine headaches lead to stroke?
Most epidemiological studies indicate that an individual who has migraine headaches has an increased risk of having a stroke. This risk of stroke with migraine is very small when compared to the more established risk factors of high blood pressure, smoking, obesity and poor diet.

It is not very well understood why having migraines is associated with this small increase in stroke risk, and there are many theories, which have yet to be proven. The most important thing to know is that people with migraine headaches should see a physician who can correctly diagnose the condition and encourage a healthy lifestyle.

If I have migraine headaches is there anything I can do to lower my stroke risk?
The answer to this question is yes. Although migraine is a small risk factor for stroke, being a smoker and having other stroke risk factors like diabetes and high blood pressure increase the risk further.

Understanding your risk factors, controlling your risk factors and maintaining a healthy lifestyle is the best way to prevent stroke. It is important to exercise regularly, maintain a healthy weight, and have regular medical care with a primary care doctor.
There was an interesting study recently presented which indicated that receiving treatment for migraine headaches could reduce the risk of stroke further. This research is still not proven, but it certainly makes sense to prevent migraine headaches through treatment.

**How can I reduce the number of migraine headaches?**

The cornerstone of migraine therapy is prevention through avoidance of triggers such as certain foods and regular exercise. The same activities that reduce stroke risk can also reduce the frequency and severity of migraine headache.

A healthy balanced diet free of common triggers such as wine, cheese, and chocolate is one place to start. Regular exercise and biofeedback, which is the process of gaining greater awareness of headache patterns and using medication and other techniques to abort episodes, is also important.

Some people will require medications. It is very important to discuss migraine headache with your primary care doctor. Most people who suffer from migraine will not require evaluation by a neurologist or any further testing.
How do I know if the symptoms I am having are a migraine aura or a stroke?

If you experience any sudden neurological symptoms, you must call 9-1-1. In migraine aura the symptoms typically occur in the same way repeatedly and develop into a pattern.

Often migraine symptoms are "positive phenomena" or false visual images, where there is a flashing light or distortion of vision rather than a "negative phenomena" such as loss of vision, which occurs in stroke.

When you are experiencing new neurological symptoms, you must call 9-1-1 and get to the Emergency Room as soon as possible. A physician should make a diagnosis of migraine aura. Once this diagnosis is established, then you can make a determination of whether your current symptoms are due to an aura or are something very different.

Can a severe migraine attack lead to a stroke?

Yes, but this is a very rare occurrence and I have not seen it yet in my practice. It is called migrainous infarction and it occurs in people who have a very severe form of aura that does not go away.
If you have a very severe aura that does not get better, it is important to be evaluated urgently.

**Can a stroke lead to migraine headaches?**
Any form of brain injury can lead to migrainous (migraine-like) headache.

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