

Alba Velázquez, Ana Latorre, María José García-Gomara, Alvaro Giménez, Alfredo López,
 Consuelo Ríos, Isabel Campello, Jose María Pérez-Trullén
 Neurology Department, Royo Villanova Hospital. Zaragoza. Spain.

OBJECTIVE

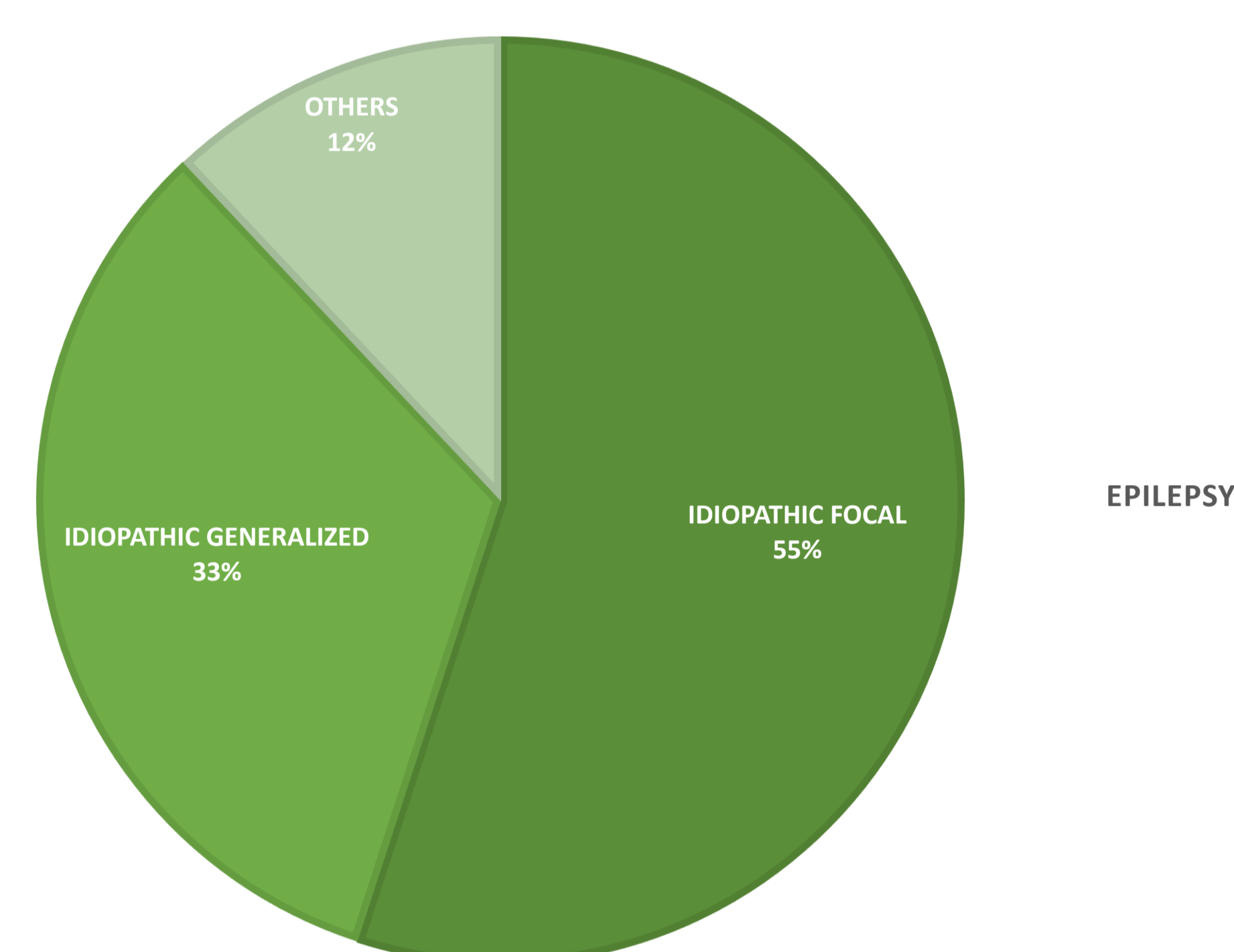
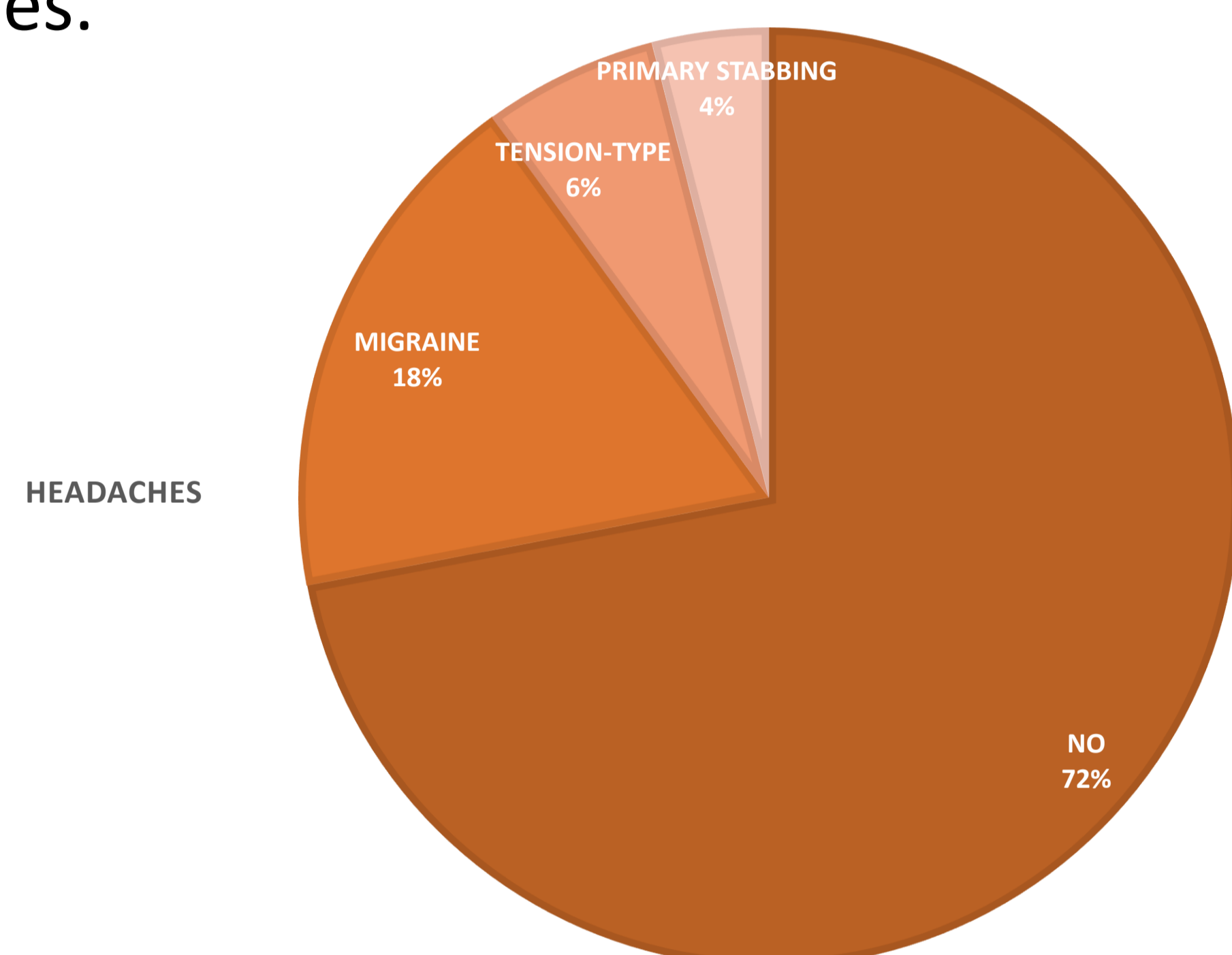
To determine the prevalence of primary headaches in patients from an epilepsy clinic. As secondary objectives we studied demographic and headache/epilepsy-related characteristics.

METHODS

65 patients were reviewed, using their clinical visits reports and electronic medical history. The period of recruitment was 3 months in a row. IHS and ILAE classification were used. Ictal/postictal headache were not included and patients with mental/cognitive impairment were excluded because of diagnosis difficulties.

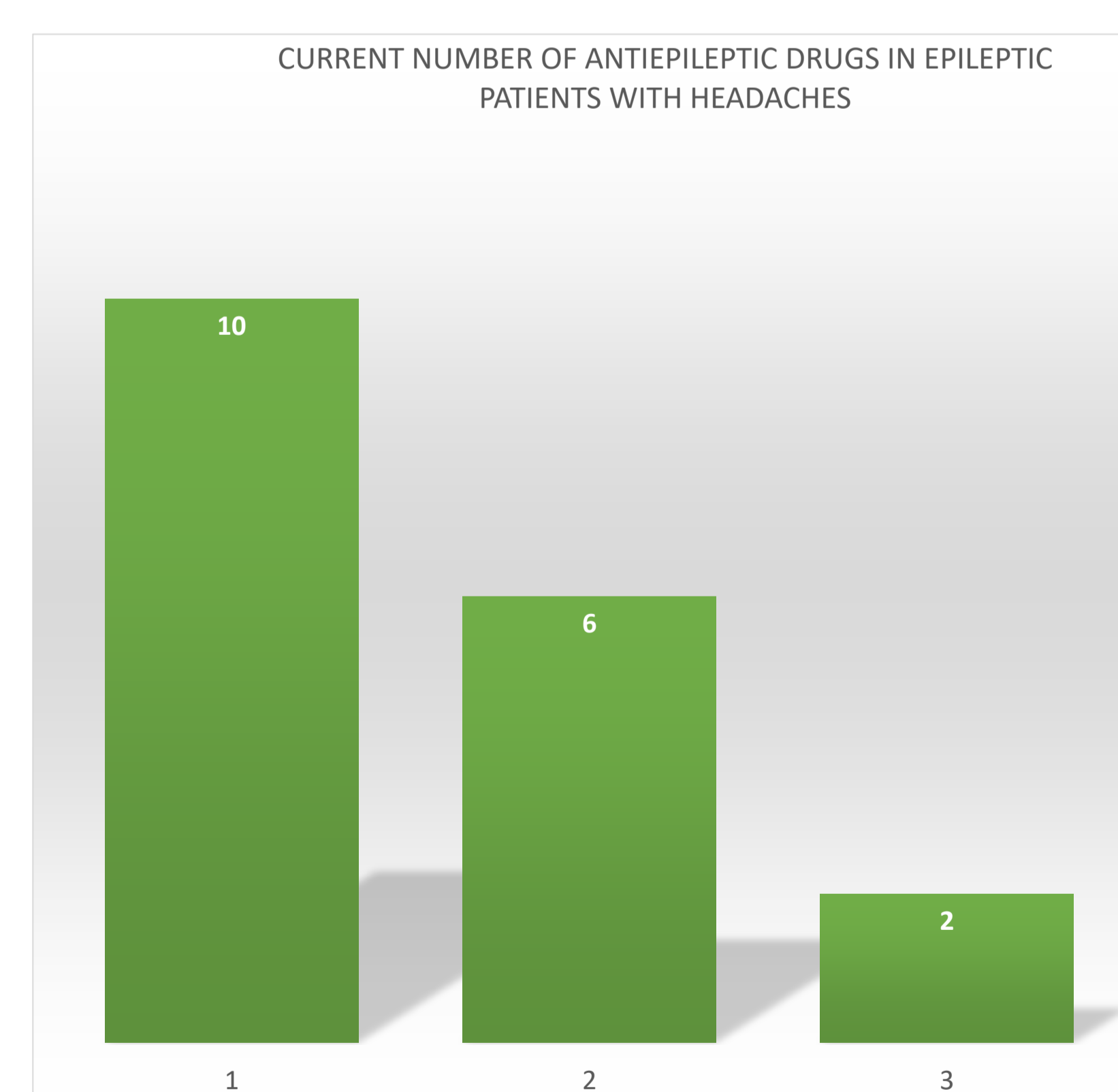
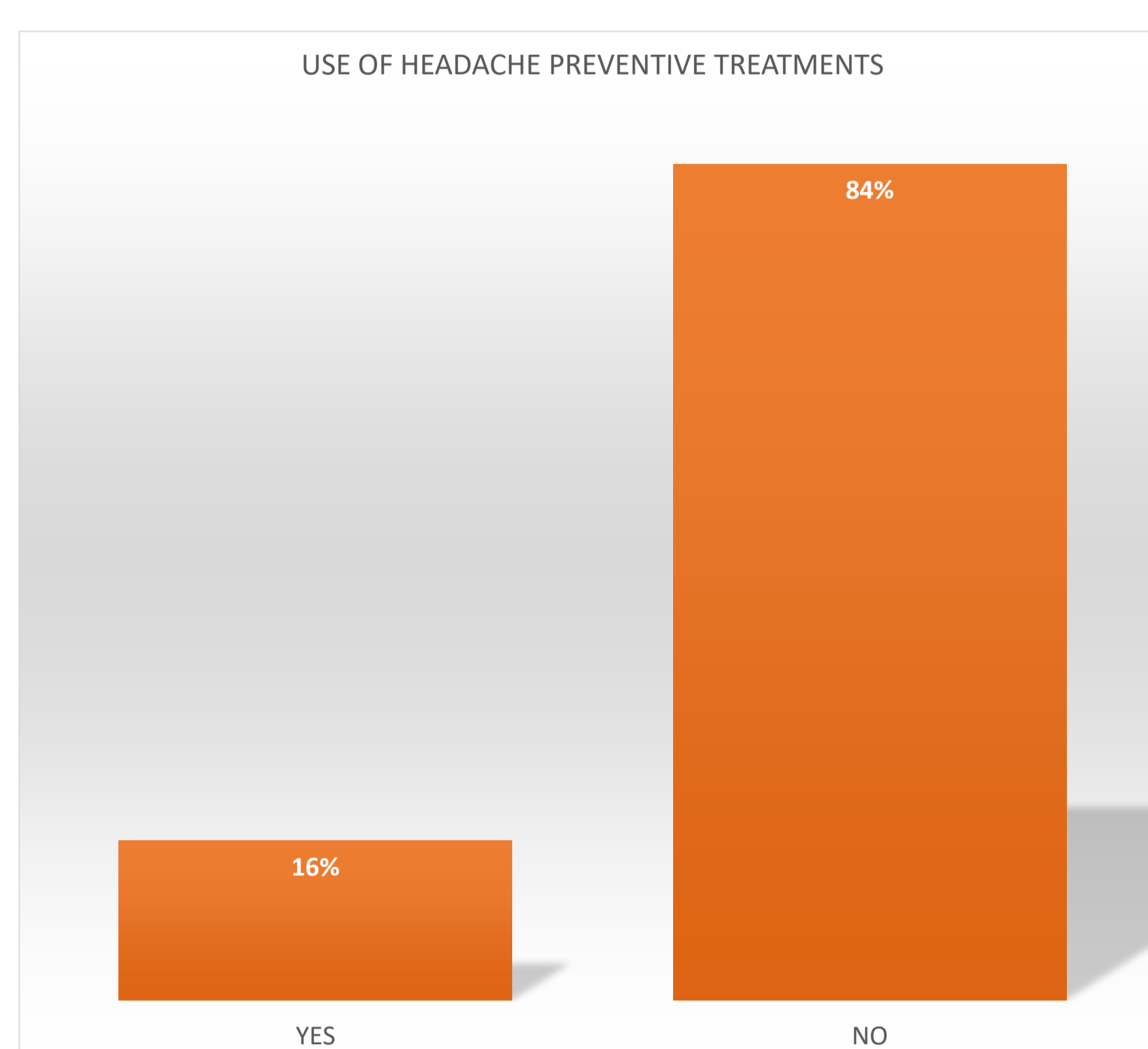
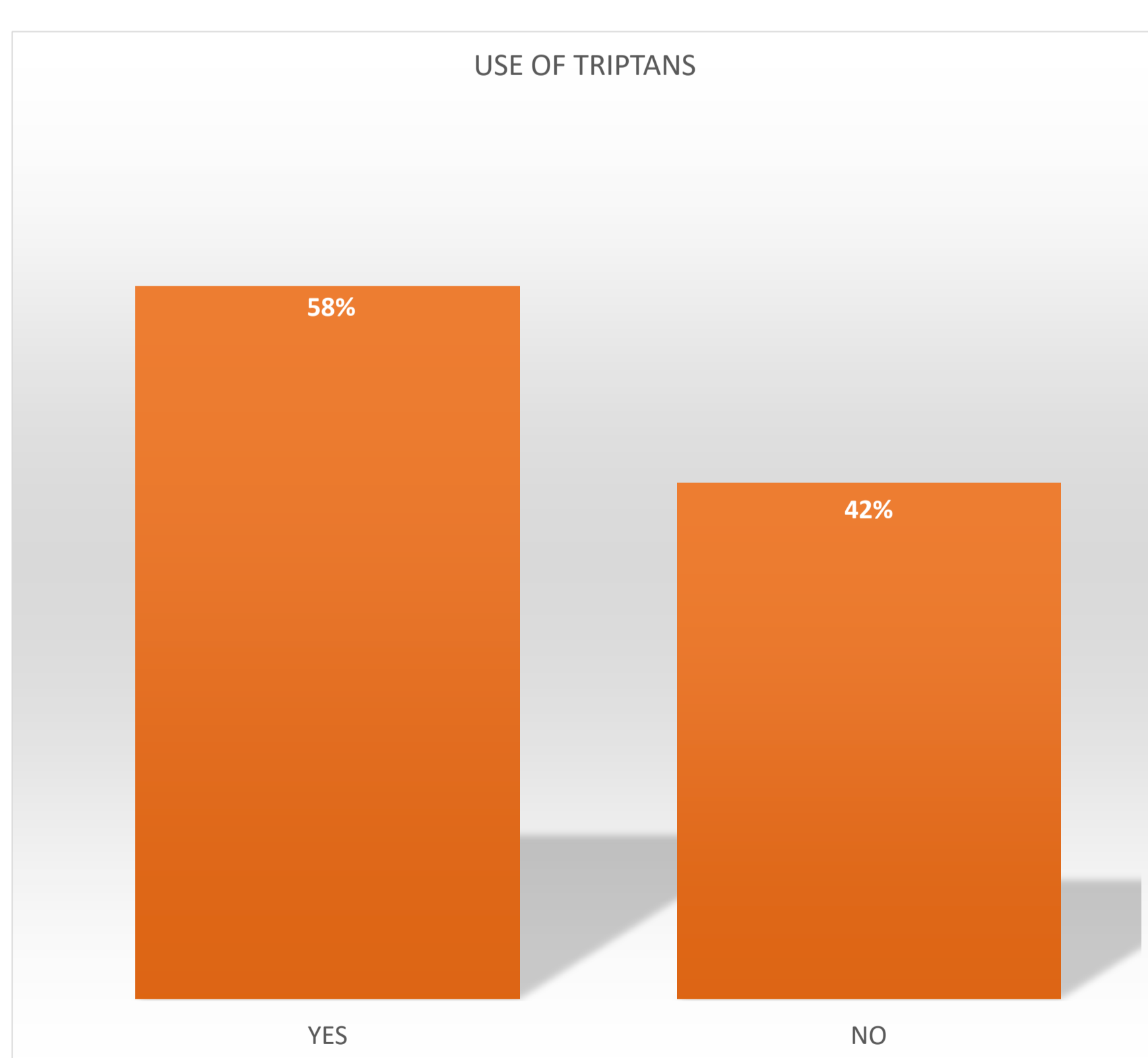
RESULTS

Prevalence of primary headaches was 28% (migraine 18%, tension-type headache 6%, primary stabbing headache 4%). Median age was 41 years old (16-68). All of the patients with diagnosis of headache were females. The most frequent epilepsy type was idiopathic focal epilepsy (55%) and idiopathic generalized epilepsy (33%) with an average of 13 years after epilepsy diagnosis. One patient was also diagnosed of non epileptic seizures.



According to the ILAE seizures classification, focal onset to bilateral tonic-clonic were present in the 55.5% of the patients, followed by focal onset seizures (38%). 89% suffered from impaired awareness seizures. Most of the patients were seizure free for more than a year according to their medical reports. 33% also suffered from anxiety-depressive disorders.

According to headaches frequency, *episodic headaches were more frequent (83%)* than chronic (17%). We found *no abuse related headaches* and *only 16% were using a headache preventive treatment* (the most frequent was amitriptyline). *Only 58% of migraine patients used triptans* as symptomatic treatment and there were only one patient who was treated with onabotulinumtoxinA.



CONCLUSION

According to our data, headaches in epilepsy patients, specially migraine, is at least as prevalent patient as in general population. We analyzed patients from an epilepsy clinic, who are usually treated with more antiepileptic drugs and use to have more comorbidities than well controlled epileptic patients, such as anxiety or depressive disorders.

Although we cannot confirm that prevalence of headaches is higher in epilepsy patients than healthy people, we can say is a common comorbidity. Therefore, headaches need to be diagnosed and treated early in epilepsy patient, specially in drug-resistant epilepsy, because they can worsen quality of life and make epilepsy control worse.