

## MIGRAINE: CLINICAL FEATURES

### Chapter 43

# Symptomatology of Migraines without Aura

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#### DEFINITION

##### IHS ICHD-II Code and Diagnosis

1.1 Migraine without aura

##### WHO ICD-10NA Code and Diagnosis

G43.0. Migraine without aura

##### Short Description (Headache Classification Subcommittee, 2004) (26)

Recurrent headache disorder manifesting in attacks lasting 4 to 72 hours. Typical characteristics of the headache are unilateral location, pulsating quality, moderate or severe intensity, aggravation by routine physical activity, and association with nausea and/or photophobia and phonophobia.

##### Previously Used Terms

Common migraine, hemicrania simplex

##### IHS Diagnostic Criteria for Migraine Without Aura (Headache Classification Subcommittee 2004)

- A. At least five attacks fulfilling B through D
- B. Headache attacks lasting 4 to 72 hours (untreated or unsuccessfully treated)
- C. Headache has at least two of the following characteristics:
  - 1. Unilateral location
  - 2. Pulsating quality
  - 3. Moderate or severe pain intensity

- 4. Aggravation by or causing avoidance of routine physical activity (e.g., walking or climbing stairs)
- D. During headache at least one of the following:
  - 1. Nausea and/or vomiting
  - 2. Photophobia and phonophobia
- E. Not attributed to another disorder

#### INTRODUCTION

Migraine without aura is the commonest form of migraine (46). It has been suggested (6) that the migraine episode be divided into five distinct phases: (a) premonitory symptoms, (b) aura, (c) headache and associated symptoms, (d) resolution, and (e) recovery (Fig. 43-1). In migraine without aura headache is an essential part of the diagnosis and, although not preceded by any identifiable focal symptoms of neurologic disturbance, as is the case in migraine with aura, it may be preceded by premonitory symptoms, often quite characteristic for the individual and clearly identifiable as the warning symptoms of an impending attack.

#### PREMONITORY SYMPTOMS

The Headache Classification Subcommittee (26) states that premonitory symptoms occur a couple of 2 days to a couple of hours before a migraine attack. They include various combinations of fatigue, difficulty in concentrating, neck stiffness, sensitivity to light or sound, nausea, blurred vision, yawning, and pallor. Premonitory symptoms have been known to precede a migraine attack for centuries (28) and have been classified on clinical grounds as excitatory or inhibitory (5). *Excitatory* premonitory symptoms include irritability, being "high," physical