

Migraine-like headache attributed to a causative disorder: primary migraine or secondary headache with a migraine-like phenotype?

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Background

Migraine-like headaches can accompany or be the initial manifestation of many neurological disorders.

When a migraine-like headache develops or worsens in the presence of another neurological disorder, there is often uncertainty about whether the headache is true migraine (i.e., the primary headache) or is a secondary headache with migraine-like symptoms.

Methods

To answer this question, we analyzed headache characteristics and the effect of treatment in several neurological disorders:

550 patients with first-ever ischemic stroke

120 patients with transient ischemic attacks

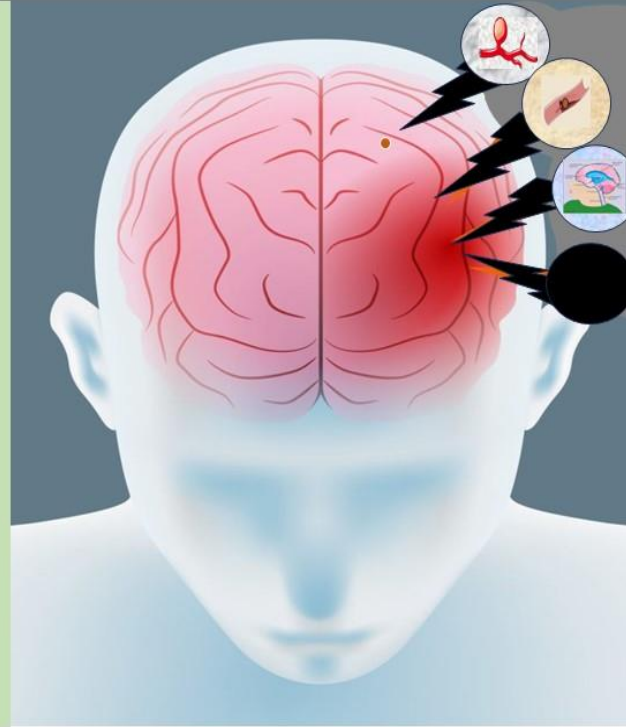
199 patients with intracranial saccular aneurysms

77 patients with newly diagnosed definite idiopathic intracranial hypertension

169 + 59 patients with post-traumatic headache

Primary migraine

1. A long-standing history of similar headaches and their stable pattern over many months or years
2. A family history of similar headaches
3. A normal neurological and physical examination
4. Normal results of neuroimaging and other examinations/tests



Secondary migraine-like headache

1. The onset of a headache or its changes in close temporal relation to the causative disorder:
 - 1) New location
 - 2) New headache quality
 - 3) More severe intensity
 - 4) Longer duration/unremitting headache
 - 5) Development of new accompanying symptoms
 - 6) Significant increase in frequency
 - 7) Absence of response to analgesics
2. Presence of symptoms of causative disorder
3. Progression or disappearance of a headache after treatment of a disorder

Results

Headache phenotypically fulfilling the diagnostic criteria for 1.1 Migraine without aura and/or 1.2 Migraine with aura can be due to a causative disorder with the following incidence:

Posttraumatic headaches -72%

Idiopathic intracranial hypertension - 51.9%

Saccular intracranial aneurysm - 44.2%

Transient ischemic attacks - 13.3%

Ischemic stroke - 6.9%

Migraine-like headaches disappeared after treatment or remission of the causative disorder in 38.5% of cases with idiopathic intracranial hypertension and 47.7% after clipping of intracranial aneurysms

Migraine-like headaches attributed to mild traumatic brain injury often responded poorly to migraine treatment, at least suggesting that they differ from primary migraine.

Conclusion: Our study supports the International Classification of Headache Disorders-3 statement that migraine-like headache attributed to a secondary cause should be coded as a secondary headache of the migraine type.



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