

Vestibular Migraines

Migraines affect nearly 30 million Americans, especially women, who suffer from them by a three to one ratio, according to the National Headache Foundation. Doctors aren't sure exactly how many people are affected by vestibular migraines but they know these headaches have a unique twist that run-of-the-mill, throbbing migraines don't: a component of **vertigo**.

Susan Broner, attending neurologist at Roosevelt Hospital's Headache Institute in New York, explained the following:

What are migraines?

Migraine is typically a one sided, throbbing headache, moderate to severe in intensity and associated with light sensitivity or sound sensitivity and nausea or vomiting with headache. Some people have dizziness or visual aura that precedes the headache.

What are vestibular migraines?

Vestibular migraine is a variant of migraine in which dizziness, instead of headache, is the predominant feature. Patients usually say that out of nowhere they were extremely dizzy, some with a spinning or rocking sensation. They have light or sound sensitivity and are sick or nauseous. Episodes last minutes to hours, with a chronic form where there is a constant sense of imbalance. In many instances people have a history of migraine headaches before experiencing vestibular migraines.

What causes vestibular migraines?

It is believed they are an inherited disorder. Patients brains are normal on imaging but it is believed that there is a **hyperexcitability** in the brainstem that overlaps the vestibular structures (control of balance) that causes the dizziness.

How common are vestibular migraines, and who is most affected?

There are 30 million migraine sufferers in America. It is more common than asthma and diabetes combined. It affects women more than men by three to one. Average onset is any age from 14-40.

Vestibular migraine is much less diagnosed. It could be undiagnosed or misdiagnosed as Ménière's disease- a form of vertigo that occurs in older patients- or as benign positional vertigo, in which patients experience episodes of vertigo from seconds to minutes long when they move their heads in a certain way. Positional vertical go episodes are caused by an inner ear disorder that is treatable by a manual manoeuvre of the head.

What are the symptoms?

With vestibular migraine people are exquisitely sensitive to motion and they are sensitive to migraine triggers like fluorescent lighting or drinking wine. It is important to rule out seizures and structural abnormalities.

What is the treatment for vestibular migraines and how is it different from other migraines?

There are not conclusive controlled trials yet but medication for normal migraine are often used. These are calcium channel blockers (blood pressure medication), anti epileptic and antidepressant drugs (Selective serotonin reuptake inhibitors- SSRI). For acute attacks ant inflammatory or triptan, anti nausea and muscle relaxants can help.

How can physiotherapy help?

Physiotherapy can help control the trigger, or response, of increased muscle activity in the neck, jaw or face. It can control postural influences and stress related tension.

A progressive desensitisation program can be used to decrease the brain's reaction to stimuli and increase function. This should be customised to suit the needs and the condition of the patient at the time.

Enquire whether your physiotherapist is experienced in care of the sensitive nervous system.