

An Insight in to Migraine

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ABSTRACT

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As many as 180 million people suffer from chronic migraine, and general population studies involving all nations have demonstrated a prevalence rate equal to or approximating that recorded in the United States. This issue includes a special section that examines in detail a topic of immense relevance to the public health: migraine. This section contains a lot of information about this common disorder that fills the waiting rooms of subspecialty clinics, claims a substantial share of our health-care resources, and drains those afflicted of their productivity and emotional well-being.

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As many as 180 million people suffer from chronic migraine, and general population studies involving all nations have demonstrated a prevalence rate equal to or approximating that recorded in the United States. Seminal work by Mathew, Silberstein, Lipton, and others have assisted in defining the epidemiology of what until recently was most often termed “transformed” migraine, but we continue to lack much in the way of data that would enable us to understand the origins of this common migraine, its complication and its optimal management.

So often in medicine when we are confronted with a common, clinically vivid and baffling disorder, we resort to one of 2 solutions to “explain” that disorder’s pathogenesis: blame it on the patient (or the patient’s parents - eg, autism), or simply affix the label “idiopathic” (a tautological sleight-of-hand that translates as “we don’t know”). Like the rash of measles, chronic migraine differs little in its clinical phenotype from patient to patient, but the patients themselves are a diverse lot; and just as measles is neither “idiopathic” nor patient-

induced, so may we come to find that chronic migraine possesses origins presently obscure to us ... and quite different from what we might have anticipated.

In selecting subtopics and contributing authors, the section editor has chosen well. The result is nothing less than a full-spectrum summary of what we currently know-and do not know-regarding many vexingly common disorders that fills the waiting rooms of subspecialty clinics, claims a substantial share of our health-care resources, and drains those afflicted of their productivity and emotional well-being.

END NOTE

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