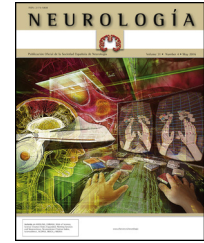




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## ORIGINAL ARTICLE

### Impulsivity among migraine patients: Study in a series of 155 cases ☆,☆☆

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#### KEYWORDS

Anxiety;  
Depression;  
Plutchik scale;  
Impulsivity;  
Chronic migraine;  
Medication overuse

#### Abstract

**Introduction:** Impulsivity is a psychological phenomenon that has not been extensively studied in headache patients. We aim to assess the presence of impulsivity in patients with chronic migraine (CM) and medication overuse (MO).

**Patients:** All patients examined in an outpatient headache clinic between January 2013 and March 2014 were included. Episodic migraine, CM, and MO were diagnosed according to ICHD-III beta criteria. We prospectively gathered demographic and clinical characteristics. Mood disorders were evaluated using the Hospital Anxiety and Depression Scale (HADS) and impulsiveness was assessed with the Plutchik Impulsivity Scale.

**Results:** A total of 155 patients were included (22 men, 133 women). The mean age (SD) was 38.2 (11.7) years (range, 18-70); 104 patients (67.1%) presented CM and, among them, 74 (71.1%) had MO. Of the patient total, 28.4% met criteria for anxiety, 7.1% for depression and 16.1% for impulsivity. The CM group showed higher scores for HADS-anxiety (8.5 [SD 4.5] vs 6.4 [SD 3.6],  $P = .003$ ) and HADS-depression (4.4 [4.3] vs 1.9 [2.3],  $P < .001$ ). Among CM cases only, scores for HADS-anxiety (9.3 [4.4] vs 6.8 [4.3],  $P = .01$ ) and HADS-Depression (5.1 [4.6] vs 2.7 [2.9],  $P = .002$ ) were higher in patients who also had MO. We found no associations between Plutchik scale scores or presence of impulsivity with either CM or MO.

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**PALABRAS CLAVE**

Ansiedad;  
 Depresión;  
 Escala de Plutchik;  
 Impulsividad;  
 Migraña crónica;  
 Uso excesivo de  
 medicación

**Conclusion:** Impulsivity is a common trait in our population of migraine patients, but unlike mood disorders, it is not correlated with either CM or MO.

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**Impulsividad en pacientes migrañosos: estudio en una serie de 155 casos****Resumen**

**Introducción:** La impulsividad es una dimensión psicológica no estudiada en profundidad en pacientes con cefalea. Pretendemos evaluar su influencia en la presencia de una migraña crónica (MC) o uso excesivo de medicación (UEM).

**Pacientes:** Pacientes atendidos consecutivamente en una consulta de cefaleas (enero de 2013-marzo de 2014). Diagnosticamos migraña episódica, MC o UEM de acuerdo con la Clasificación Internacional de Cefaleas, versión beta de la III edición (CIC-III). Recogimos prospectivamente características demográficas y clínicas. Evaluamos trastornos del ánimo mediante la Escala de Ansiedad y Depresión Hospitalaria (HADS) y la impulsividad con la Escala de Plutchik.

**Resultados:** Ciento cincuenta y cinco pacientes (22 varones, 133 mujeres), edad  $38,2 \pm 11,7$  años (18-70); 104 (67,1%) con MC y entre ellos 74 (71,1%) con UEM. El 28,4% de los 155 pacientes incluidos en la serie cumplía criterios de ansiedad, el 7,1% de depresión, y el 16,1% de impulsividad. Las puntuaciones de las subescalas HADS-ansiedad ( $8,5 \pm 4,5$  vs.  $6,4 \pm 3,6$ ,  $p: 0,003$ ) y HADS-depresión ( $4,4 \pm 4,3$  vs.  $1,9 \pm 2,3$ ,  $p < 0,001$ ), eran mayores en los casos con MC. Entre los pacientes con MC, HADS-ansiedad ( $9,3 \pm 4,4$  vs.  $6,8 \pm 4,3$ ,  $p: 0,01$ ) y HADS-depresión ( $5,1 \pm 4,6$  vs.  $2,7 \pm 2,9$ ,  $p: 0,002$ ) eran más altas en aquellos con UEM. No encontramos relación entre la presencia de impulsividad o la puntuación en la Escala de Plutchik y la MC o UEM.

**Conclusiones:** En nuestra población de migrañosos la impulsividad es frecuente, pero, a diferencia de los estados de ánimo, no se correlaciona con MC o UEM.

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**Introduction**

Psychiatric disorders, which are common in patients with migraine,<sup>1,2</sup> are increasingly being documented in the literature. The most frequent disorders in this population are major depression and anxiety disorders.<sup>3,4</sup> Psychiatric comorbidities have been associated with poorer response to treatment, medication overuse (MO), and migraine transformation.<sup>5-7</sup> Furthermore, certain personality profiles have been linked to pain coping strategies that make migraine management more difficult.<sup>8,9</sup>

MO is one of the main risk factors for transformation to chronic migraine (CM).<sup>10,11</sup> This behaviour may be due to 2 main causes. On the one hand, increasing the dose of symptomatic medication may merely respond to an increase in the number of days with pain. Meanwhile, MO has been associated with certain personality traits that lead patients to take medication out of fear of experiencing new episodes of pain, especially episodes of intense pain that interfere with daily living activities.<sup>12</sup> This second hypothesis is especially relevant for the purposes of our study.

Until now, few studies have analysed personality traits in patients with migraine and their influence on MO and

CM.<sup>13-16</sup> For example, a tendency to increase analgesic consumption rapidly and progressively, which ultimately leads to MO, may be associated with impulsivity. Impulsive patients are characterised by a tendency to act quickly since they usually underestimate the consequences of their actions. This type of patients may lose control of their analgesic consumption, something that cannot be managed with preventive medication for migraine, making it harder to manage their condition. Therefore, screening for impulsivity traits may help clinicians provide a more accurate prognosis and choose the best treatment for each patient.<sup>12</sup>

The purpose of this study is to evaluate impulsivity in migraine patients in different clinical situations and determine whether there is a connection between this personality trait and a stronger tendency towards symptomatic MO or transformation to CM.

**Material and methods**

We included consecutive patients whose initial visit to the headache unit of a tertiary hospital took place between

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