

Episode 172: Silent Migraine

Lindsay Weitzel, PhD:

Hello, everyone, and welcome to HeadWise, the videocast and podcast of the National Headache Foundation. I'm Dr. Lindsay Weitzel. I'm the founder of Migraine Nation, and I have a history of chronic and daily migraine that began at the age of four. I'm super excited to tell you that I am here today with Dr. Hope O'Brien. Hi, Dr. O'Brien, how are you today?

Hope O'Brien, MD:

Hi, Dr. Weitzel, it's so good to be here with you.

Lindsay Weitzel, PhD:

Well, we are happy you're here. She is the CEO and medical director of the Headache Center of Hope in Cincinnati. Dr. O'Brien is a board-certified neurologist and headache specialist. She is also a board member of the National Headache Foundation, and I am super excited to hear what she has to say about our topic today.

We see a lot and hear about silent migraine. It's also known as acephalgic migraine, or migraine that presents without headache, meaning it only really comes with an aura. The ICHD-3 refers to this as typical aura without headache. This may be one of those podcast episodes where some of the audience members might listen and suddenly realize they might experience this on occasion and never really realized it. Let's go on with this interesting topic. Dr. O'Brien, can you first give us some background by just letting everyone know how head pain and aura usually present during a typical migraine attack?

Hope O'Brien, MD:

Well, headache is a symptom. It doesn't really tell us the underlying cause. So, a headache is a symptom just like belly pain or back pain. We don't know what the underlying cause is. Now migraine is a diagnosis that includes moderate to severe head pain. And typically the pain is one-sided, but it can involve both sides of the head. The headaches tend to be throbbing or pulsating in nature. And the pain tends to last about four hours in adults, a little bit shorter in children. The headache is not just the only symptom in migraine, but patients will often complain of light sensitivity or sound sensitivity, nausea, and or vomiting. And all you need for the diagnosis is five attacks in a lifetime. Now a third of patients will actually get aura, which is typically a warning sign that the migraine is about to start.

Lindsay Weitzel, PhD:

How is this different in migraine, aura without headache? How does this present differently?

Hope O'Brien, MD:

Sure. Well, about a third of patients will actually get aura with their migraine, as I mentioned before, like a warning sign. But what aura without a headache is, is patients will get that typical aura or warning sign without the headache. So, the most common warning sign that patients will complain about is visual changes. They'll say they see squiggly lines or flashing lights, or they may get a halo around certain

objects. They may also get sort of a loss of peripheral vision. Those are some of the warning signs. And that's an indicator for patients that I better get ready, a migraine is about to start. While the aura without the headache, they'll have those same features, but the headache never starts.

Lindsay Weitzel, PhD:

When someone experiences a silent migraine, what types of aura might they experience? Is it always a visual aura?

Hope O'Brien, MD:

Great question. No, not necessarily. There are different types of aura. Visual tends to be the most common. Other types of aura include numbness or tingling, so more of a tactile aura. Some patients may experience difficulty in their speech or language. Those are the most common types. And in a very rare type of aura, patients will experience weakness or an inability to use an arm and a leg. So that tends to occur with a family history, but again, the most common is the visual. And these aura tend to last anywhere between 5 minutes to 60 minutes. Anything outside of that is what we would call prolonged or atypical aura.

Lindsay Weitzel, PhD:

Can silent migraine in and of itself be debilitating even though it is not painful?

Hope O'Brien, MD:

Yes, absolutely. Imagine you're driving a car and you lose vision or you're typing on something and all of a sudden you have a visual change occur. So, they can absolutely be disabling. And so, it's something that we need to address and manage for the safety of not only you but other people.

Lindsay Weitzel, PhD:

So just out of curiosity, is silent migraine managed in the same way as more typical migraine attacks?

Hope O'Brien, MD:

It is. Now, there's not a lot of research done on silent migraine. However, what we know is that by treating migraine in general, it tends to improve all of the symptoms, including aura. So, in patients who can basically tell when a migraine is going to begin, either with an aura or maybe a prodrome, they might want to do some things to prepare themselves prior to that headache starting. There's also preventive treatment that can be started that can help minimize the likelihood of an aura coming or those migraine symptoms.

Lindsay Weitzel, PhD:

So just another curious question. Does this type of migraine, this silent migraine, occur in people who also experience regular migraine with pain?

Hope O'Brien, MD:

Yes, absolutely. And in fact, that is the definition. You have to have a diagnosis of migraine first before we make the diagnosis of aura without migraine. And the reason why is there are certain mimics of aura. Mimics are seizures. So, a seizure can present as an aura and then stroke is the other condition that can present as an aura.

We need to really make sure that first of all, the pattern and the characteristic of the aura are pretty much the same every time and in patients who have a history of migraine. I tend to worry if somebody is older than the age of 50 and all of a sudden have these warning signs or they have these warning signs with other type of symptoms such as confusion or maybe visual change with numbness and tingling because I worry about either a stroke or a seizure. So yes, typically patients have a diagnosis migraine.

Lindsay Weitzel, PhD:

That was going to be one of my next questions, so I'm glad you said that if there's things that need to be ruled out, if someone thinks that they're experiencing this. And then so another follow-up question would be if someone already experiences typical migraine, and then they feel like they're experiencing silent migraine too, how do they know when to either seek out the advice of their physician related to this silent migraine or treat it? Should they be randomly trying to, let's say use their triptans also for this situation that feels like silent migraine, or should they be going to a physician? What's the next step if they feel like they might have this?

Hope O'Brien, MD:

Great question. So, what I would say to somebody who has migraine and have migraine with aura, in other words, have a warning sign before they get the migraine, if it's a aura that's typical of their migraine and there's no other symptom, then I would say, you know what? I would be less cautious. However, if a patient develops an aura without the migraine and it's their first time developing an aura, then I would say absolutely it needs to be checked out, especially if it's associated with confusion or numbness or tingling or weakness. Again, we want to make sure that we're ruling out any secondary causes. Any older patients for the first time developing an aura without any headache, again, as you age, your risk for stroke increases, so we want to make sure that we address that as soon as possible.

Lindsay Weitzel, PhD:

Okay, great. This has been a great discussion. And this is a topic, we hear the words, but we don't hear a lot of information about it. I'm so glad that we covered this. Is there anything else you'd like to add to this discussion?

Hope O'Brien, MD:

No, except for thank you for having this discussion. And you're right. It's rare that we see it, but I think it's important for your listeners to know and viewers to know kind of what to look for in case there is something unusual that occurs.

Lindsay Weitzel, PhD:

All right. Well, thank you so much for being here. And thank you everyone for listening in to this episode of HeadWise. You all have a great and wonderful pain-free day.