

What is Migraine Associated Vertigo?

Migraine Associated Vertigo (MAV) is a vestibular (balance) disorder with dizziness that is associated with a migraine headache condition. Dizziness and headaches are individually very common human conditions, but the combination is also a common symptom complex. Diagnostically, one must determine whether the dizziness and headaches are independent or related to each other, and in particular, whether they are a manifestation of migraine.

What are the Symptoms of Migraine Associated Vertigo?

Motion sickness is a common migraine accompaniment. Migraine without aura (about 80%) and migraine with aura (about 15 to 20%) are the most prevalent forms of migraine, and are also the most prevalent types of migraine associated with dizziness and vertigo.

Symptoms include vertigo with or without nausea and vomiting, and motion intolerance. **Headaches are usually felt but can be silent.** Hyperacusis (noise sensitivity) is common in migraine. The patient will usually display minimal or no nystagmus (jumping of the eyes) during an acute vertigo attack. This provides the most prominent distinguishing point for diagnosis.

Different Types of Auras Possible with Migraine Associated Vertigo

The aura of migraine is most commonly visual, and precedes the migraine attack by 20 to 60 minutes. Occasionally, the migraine aura will persist into the headache phase of migraine, or may even start once the headache has begun.

Photopsia



Bright flashes of light in the visual field.

Fortification Spectra



Bright, shimmering, jagged lines that can spread across the visual field.

Vertigo Duration

Some individuals have spells that typically last a few minutes to 2 hours, while others may have spells that last longer than 24 hours.

Therefore, by duration, these episodes could be confused with episodes due to Benign Paroxysmal Positional Vertigo (BPPV), Ménière's Disease, or even vestibular neuritis.

How is Migraine Associated Vertigo Treated?

Treatments include eliminating food triggers and preventive medication.

Patients are initially told to abstain from foods such as chocolate, cheese, alcohol, and MSG-contained preparations.

Patients may be prescribed medicines as a preventive treatment or to be taken as soon as the migraine starts.

Verapamil, a calcium channel blocker that widens blood vessels, makes it easier for the heart to pump and reduces its workload.

Amitriptyline is an antidepressant medication that may also help control vertigo independent of migraine.

How is Migraine Associated Vertigo Diagnosed?

There are no specific diagnostic tests for Migraine Associated Vertigo. Diagnosis is made by clinical history, or when the history is unclear, by a therapeutic response to treatment.

A definite diagnosis of Migraine Associated Vertigo can be made when patients have migraine with aura that is accompanied by concurrent episodes of vertigo, or when they have migraine without aura that is repeatedly associated with vertigo immediately before or during the headache.

In practices focused on treating migraine, 27 to 42% of patients report episodic vertigo. A large number (about 36%) of these patients experience vertigo during headache-free periods.

The remainder experience vertigo either just before or during the headache. The incidence of vertigo during the headache period is higher in patients with aura (sensations such as seeing colors, hearing voices, feeling numbness, noticing smells) as opposed to those without aura.



Disclaimer: *Although this information is intended to reach out to others and offer support, comfort and advice, it is in no way intended to take the place of examination, diagnosis, opinion, or treatment provided by a licensed and qualified health professional.*

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Artwork by Danny Pancy
Diagnosed with Ménière's Disease and Migraine
Associated Vertigo

Migraine Associated Vertigo



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