

Theses

Prophylactic treatment of migraine and metabolic syndrome (Abstract)*. Theses. Rio de Janeiro, 2009.

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Epidemiological studies suggest a strong association between migraine and vascular disorders, mainly in women in their fertile ages. This study aimed to investigate the prevalence of metabolic syndrome (MS) in individuals with migraine after the onset of preventive treatment. Participants were 90 migraine patients, randomly selected from those attending the out-patient neurologic clinic at the Regional Hospital in Barbacena, from March 2007 to February 2008. MS was assessed according to the criteria of the National Cholesterol Education Program - Adult Treatment Pan-

el III (NCEP-ATP III). Parameters were: triglycerides ≥ 150 mg/dl; HDL-cholesterol < 40 mg/dl for men and < 50 mg/dl for women; arterial pressure $\geq 130/85$ mmHg; fasting glycemia ≥ 110 mg/dl; waist circumference > 102 cm for men and > 88 cm for women. Diagnosis of MS requires abnormalities in at least 3 of these parameters. Blood tests were conducted at the 8th and 24th weeks of treatment. Preventive treatment consisted of amitriptyline, divalproate, propranolol, or topiramate. Of the 90 patients, 85 were women. After 8 weeks of treatment, the prevalence of MS as a function of treatment group was: amitriptyline - 3 (12%); divalproate - 0; propranolol - 1 (5%) and topiramate - 1 (4.4%). Differences among groups were not statistically significant ($p=0.415$). After 24 weeks of treatment, frequencies were: amitriptyline - 1 (4%); divalproate - 0; propranolol - 0, and topiramate - 1 (4.4%). Comparisons were also not statistically different. This seems to be the first study assessing the metabolic profile in individuals with migraine using preventive treatment, when broad criteria of analyzes are used. Using the criteria of NCEP-ATP III, incidence MS was not seen.

Key words: migraine, metabolic syndrome, migraine prophylaxis.

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