

Headache after ischemic stroke

Epidemiology

Observational studies indicate that 15 to 40% of patients with acute **ischemic stroke** report headache in close temporal relation to the event. The onset headache is more often seen in **posterior circulation strokes** than in strokes in other vascular territories. **Transient ischemic attacks** (TIA) can also lead to **headache**. The pathophysiology of headache associated with acute ischemic stroke includes edema, hemorrhagic transformation, and changes in the trigeminovascular system ¹⁾.

The prevalence of **Headache** after **ischemic stroke** is high in **China**. In addition, **women**, presence of **midbrain lesions**, **posterior circulation stroke** and a history of **migraine** were high-risk factors for ischemic stroke-related headaches ²⁾.

Diagnosis

The current diagnostic criteria of the ICHD-3 for acute headache attributed to ischemic stroke are based primarily on the opinion of experts rather than on published clinical evidence based on extensive case-control studies in patients with first-ever stroke. Diagnostic criteria for **sentinel headache** before ischemic stroke do not exist ³⁾

Treatment

No clinical trials on poststroke headache treatments were found in this review of the literature. While tricyclic antidepressants and anticonvulsants have been suggested for **central poststroke pain** syndrome, there is a regrettable lack of evidence supporting the use of daily medications aimed at reducing poststroke headache frequency. ⁴⁾.

Better understanding of headache associated with ischemic stroke is needed to establish **ischemic stroke treatment guidelines** and inform patient **management** ⁵⁾

Outcome

Headache is common at the onset of or shortly following **ischemic stroke** and may contribute to poststroke **morbidity** ⁶⁾.

Factors associated with diagnostic process failures did not increase the odds of subsequent ischemic stroke/TIA hospitalization following ED headache ⁷⁾

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