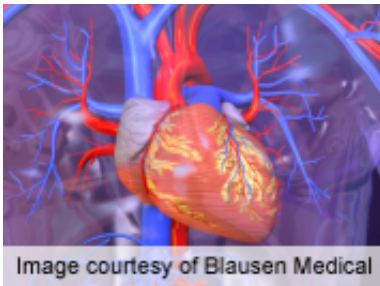


IHC: Higher lipids as a child ups later migraine risk

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An adverse lipid profile in childhood may be a risk factor for migraines in adulthood, according to a study presented at the 2013 International Headache Congress, held from June 27 to 30 in Boston.

(HealthDay)—An adverse lipid profile in childhood may be a risk factor for migraines in adulthood, according to a study presented at the 2013 International Headache Congress, held from June 27 to 30 in Boston.

Ana Recober, M.D., from University of Iowa in Iowa City, and colleagues analyzed data from the ongoing, longitudinal Muscatine Study. Since 1970, the study has followed school-aged children into adulthood. Body mass index, triceps skinfold thickness, total cholesterol, total triglycerides, and diastolic and systolic blood pressure were measured when participants were school age as well as in young- and middle-adulthood. Participants (419) also answered the ID Migraine screening questionnaire, with those with positive results undergoing a

semi-structured telephone interview.

The researchers found that, at the last school survey examination (mean age, 15.4), those with migraines in adulthood had higher total cholesterol ($P = 0.0843$) and significantly higher total triglycerides ($P = 0.0101$). There was a trend towards higher total to high-density lipoprotein (HDL) cholesterol ratio ($P = 0.0810$) and [body mass index](#) ($P = 0.1098$), and significantly higher [diastolic blood pressure](#) ($P = 0.0115$) in [young adulthood](#) (mean age, 27.6) among those with migraines in [adult life](#). In an analysis of risk factors based on a later adult examination (mean age, 34.9), those with migraines had higher body mass index ($P = 0.0547$), significantly higher total to HDL cholesterol ratio ($P = 0.0119$), higher total triglycerides ($P = 0.0424$), and significantly lower HDL cholesterol ($P = 0.0113$), compared to those without migraines.

"Our results are the first to suggest that adults with migraine have significantly higher triglycerides in childhood and higher diastolic blood pressure as young adults," Recober said in a statement. "However, these findings are still preliminary, as the data from the telephone interviews and more detailed cardiovascular information need to be fully analyzed."

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