

Clinical differentiation of Migraine, Cervicocephalic Syndrome and Meniere's Disease

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Abstract

Meniere's disease, cervicocephalic syndrome and migraine are relatively common pathologies. It is important for the clinicians to make difference between these pathologies in clinical settings. This is a brief review on the important clues to differentiate these pathologies from each other to make the diagnosis of each one of these pathologies easier.

Keywords: migraine; cervicocephalic syndrome; meniere's disease

Summary

In Meniere's disease, the occurrence of headache is spontaneous while the pain persists for hours and head position changes would not affect such headache episodes. Spinal movements are not limited in Meniere's disease. Vomiting can be seen in such pathology either. Loop diuretics and glucose infusion can be used for treatment. In migraine, the occurrence of headache is the same with Meniere's disease. Spinal movements are not limited and nausea and vomiting can also be seen. Ergotamine alkaloids can be used for treatment in migraine. In cervicocephalic syndrome, headaches have short durations and would be affected by head position changes. Cervical spinal movements are limited and spasm in the cervical muscles can be seen. There is not any episode of nausea or vomiting in cervicocephalic syndrome. Cervical collar and cervical traction can be used for treatment.

Proper diagnosis of migraine, Meniere's disease and cervicocephalic syndrome is important in clinical settings to make appropriate decisions for treatment of such pathologies.

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