BACKGROUND

• Chronic migraine (CM) has been demonstrated to have even greater impact than episodic migraine (EM) on socioeconomic status,1,2 headache-related disability,2,4 health-related quality of life,2,5 direct and indirect costs,6 and comorbid medical and psychiatric conditions.1,2
• The Headache Impact Test (HIT-6), a well validated measure of headache impact, has been used extensively in research and clinical practice with EM.7
• A recent publication validated the HIT-6 for use with persons with CM.8
• We sought to further explore the validity of the HIT-6 to assess the impact of CM within the general population and report rates of headache-impact between persons with EM and CM.

OBJECTIVES

1. To assess HIT-6 as a useful measure of headache-impact among persons with CM.
2. To report rates of various levels of headache-related impact among persons with EM and CM.

RESULTS

• In 2009, 27,253 questionnaires were fielded, 20,107 were returned (73.8%). 11,792 (69.4%) of surveys sent to headache sufferers were returned, of which 9,215 (78.2%) respondents reported at least one headache in the preceding year. 373 met criteria for CM (2.4%) and 6,554 met criteria for EM (41.9%).

Sociodemographics:
• The majority of respondents in both groups were female (80.7% of CM and 78.3% of EM) and Caucasian (92.0% of CM and EM 93.9% of EM).
• Both groups had an above average mean BMI (CM=30.4, EM=29.6) and CM respondents tended to be slightly older than EM respondents (p<0.001) between CM (64= "severe impact") and EM (58= "substantial impact").
• Those with CM were more likely to be in the "severe" headache-related impact category (72.9% vs. 42.2%). Those with EM had lower levels of impact. The categories "no impact", "some impact", and "substantial impact" were higher for EM compared to CM by 11.0%, 13.1%, and 6.5%, respectively. (Fig. 2)
• An ordinal logistic regression multiple imputation model revealed that respondents with CM had significantly higher odds of greater headache-impact, compared to EM (OR=3.5, 95%CI=2.77-4.41, p<.0001).

Fig 2. HIT-6 Categorical Scores for EM and CM Populations

CONCLUSIONS

• Findings demonstrated that persons with CM experience greater headache-impact that persons with EM. Both univariate and ordinal logistic regression multiple imputation models demonstrated that CM respondents had significantly higher odds of greater headache-impact, as measured by the HIT-6 when compared with respondents with EM.
• This work also supports the use of the HIT-6 in a CM sample. HIT-6 scores were normally distributed among both EM and CM groups in this population-based sample.

REFERENCES


