THE PSYCHOMETRIC PATTERN: II. MIGRAINE

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INTRODUCTION

The literature is replete with studies concerning the patterning and scatter on psychometric tests evidenced by patients with relatively pronounced mental aberrations. Such studies are found to deal, among others, with schizophrenia, the manic-depressive psychosis, paresis, and various senile conditions. Conspicuous by their infrequent occurrence are related researches concerning the more benign psychiatric entities. To meet this shortcoming, the first of this series of papers, dealing with anxiety neurosis, was prepared. This, the second, concerns the psychometric patterning encountered among patients with migraine headache, so diagnosed after thorough psychiatric appraisal.

That migraine has long been recognized in the annals of medicine is apparent from the historical account given by Jelliffe and White, who indicate that the first description of this condition is credited to Aretaeus. Although precise statistics regarding incidence are unavailable, it has been suggested that 5 per cent is a moderate estimate, based on samples of the population. The migrainous headache is held to be familial and about two to three times more common among women than men. Among the many descriptions of the clinical picture, that presented by Wolff is typical:

"The outstanding feature of the migraine syndrome is periodic headache, usually unilateral in onset, but which may become generalized. The headaches are associated with 'irritability' and nausea, and often with photophobia, vomiting, constipation, or diarrhea. Not infrequently the attacks are ushered in by scotomata, hemianopia, unilateral paresthesia, and speech disorders. The pain is commonly limited to the head, but it may include the face and even the neck. Often other members of the patient's family have similar headaches." (P. 1401.)

The opinions and assertions contained in this paper are those of the writer and are not to be construed as official or reflecting the views of the Navy Department or the naval service at large.
With regard to etiological factors, Wolff contends that the headache of migraine is produced by distention of cranial arteries, particularly the branches of the external carotid. While common drugs have been found generally unsatisfactory in producing relief, there is evidence that the vasoconstrictor, ergotamine tartrate, is an effective agent in terminating or aborting the migraine attack.

Notwithstanding the fact that much of the research on migraine has been directed toward discovering causative factors and determining therapeutic measures, investigations regarding the psychological factors associated with this condition have not been wholly neglected. In this respect, the study of Trowbridge, Cushman, Gray, and Moore on the personality of patients with migraine is representative. Wolff's emphasis on the psychological characteristics of migrainous patients is noteworthy, as are the contributions of Touraine and Draper. Fromm-Reichmann's interpretations are of interest from a psychoanalytical viewpoint. More recently, Ross and McNaughton have investigated the Rorschach responses of patients with migraine and report significantly positive results.

**Subjects**

The subjects used in this research were 25 white males who, following complete psychiatric examination, were diagnosed as having migraine headache. The clinical picture in most cases was typical, with the following associated symptoms and characteristics reported in the order of their frequency: scotomata, nausea, necessity for bed rest, localized pain, vomiting, loss of time from employment, familial trend, no relief from ordinary medication, incapacitation, and vertigo. Each patient was examined by at least two psychiatrists, and there was general agreement regarding final diagnosis. Questionable histories were verified through social service investigation.

The age range of the patients was from 17 to 33, with a mean chronological age of 19.6 years. The average school grade completed was 10.1.