

Odors in migraine patients: does it smell so bad?

I read with great interest the paper written by Carlina Borini, Fernanda Gatti, Rebeca Grezos, and Yara Fragoso from Universidade Metropolitana de Santos: Odors as triggering and worsening factors in migraine [Odores como fatores desencadeantes e de piora na enxaqueca].

In our clinical experience, odors are important for migraine and other headache patients, both as a precipitant and/or as a worsening factor. Some studies tried to test sensitivity and specificity for osmophobia (as photophobia and phonophobia) as a tool for migraine diagnosis. The ID migraine study failed to recognize it as one of the key questions for migraine diagnosis¹, but a Japanese study found it relevant². In our study of trigger factors in 200 migraine patients we also found odors as a significant precipitator, disclosed by 35% of patients³.

Migraine patients are in general sensitive patients. Any excess of environmental stimulus, noise, sounds, or smells are not well tolerated; in fact, much more than that, any variation in the homeostasis, via an internal or external agent, is not tolerated by patients and is a potential trigger or worsening factor for migraineurs. The mechanism behind it is the cortical hyperexcitability very well-known in migraine pathophysiology⁴.

We live in a society absolutely deviated from our genetic background, we are not biologically prepared for such a high exposure of toxic products, ingested orally (alcohol, industrialized food) or inhaled, as chemicals found in air pollution, perfumes, cigarette smoke, cleaning products, gasoline. Therefore, the odors we smell on a daily basis really do smell bad for our migraine patients.

REFERENCES

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