

Migraine in Malaysian Population: A Cause for Alarm

Tapash Rudra^{1*}, Hafizah Che Hasan², Kosheila Ramuni²

Received: 8 August 2019 • Accepted: 12 August 2019

ABSTRACT

Headache is the most common disorder of the nervous system, comprising of a number of categories. Migraine is one of the crucial sub-types among them, to be precise. Migraine is holding the third rank in the chronology of disabling disorders across the globe, especially threatening the age group under 50 years, irrespective of the sex. The Malaysian scenario in terms of migraine profiling has not been convincing in comparison to the global picture, simply because the lack of data from this part of the world. In our opinion, the pivotal aspect of treating and subsequently decreasing the prevalence of migraine disorder from the Malaysian population is to educate the civilians as much as possible regarding the dilemma which has been always existing, for going towards appropriate medical intervention.

Keywords: Headache, Malaysian population, Migraine.

Copyright ©2019 Tapash Rudra et al. This is an open access paper distributed under the Creative Commons Attribution License. Journal of Health and Medical Research is published by Lexis Publisher.

DISCUSSION

Headache is the most common disorder of the nervous system, comprising of a number of categories. Migraine is one of the crucial sub-types among them, to be precise. However, compared to the other types, migraine is inexplicably diverse in its manifestations, at the same time, extremely misinterpreting, under-diagnosed and more often than not leads to sizable complications [1].

According to the latest report of Global Burden of Disease Study (2010), migraine is holding the third rank in the chronology of disabling disorders across the globe, especially threatening the age group less than 50 years, irrespective of the sex (**Table 1**).

Table 1: Barriers to migraine treatment and management.

Categories	Examples
Socio- demographical	Misconceptions about headache
	Migraineurs'self-assumptive diagnosis and treatment
	Antipathy towards treatment
	Lack of awareness about migraine triggers
	Lack of availability of specialized headache counselling centers
Clinical	Incorrect diagnosis
	2. Wrong treatment
	Random usage of inappropriate medicines
Financial and legislative	Not enough impetus being given on counselling of headache to discriminate migraine from the rest of the headache types

¹Department of Biotechnology, Faculty of Science, Lincoln University College, Selangor, Malaysia

²Faculty of Nursing, Lincoln University College, Selangor, Malaysia

^{*}Correspondence should be addressed to Tapash Rudra, Department of Biotechnology, Faculty of Science, Lincoln University College, Selangor, Malaysia; E-mail: tapash@lincoln.edu.my

J Health Med Res 2019; 1(1): 2.

As mentioned previously the manifestation of the migraine disorder is quite diverse, in conjunction to that we would like to state that the genetic factors (Often unrecognized and undiagnosed) contribute the most regarding the diverse attributes are concerned.

Let us now take a closer look at the Malaysian scenario.

The Malaysian scenario in terms of migraine profiling has not been convincing in comparison to the global picture, simply because the lack of data from this part of the world.

The above table would give an idea about the principle barriers to migraine treatment and management in Malaysian perspective.

Furthermore, it does affect 10% of the global community and precisely the frequency in women are two to three times more compared to their male counterparts, chiefly due the hormonal influences [2].

Overall, in our opinion, the pivotal aspect of treating and subsequently decreasing the prevalence of migraine disorder from the Malaysian population is to educate the civilians as much as possible regarding the dilemma which has been always existing, for going towards appropriate medical intervention. This will not only escalate the proper migraine management, at the same regard, it will radically wipe out the mismanagements as well. We must emphasize that factors like genetic attributes which are mostly not taken into consideration for migraine treatment, should be given additional importance to make sure all the aspects are covered. Last but not the least, more specialized headache counselling organizations should be involved across Malaysia, with the input of health care professionals, capable of counselling the migraineurs right from the initial diagnosis to improve the quality of life of the sufferers.

REFERENCES

- 1. World Health Organization. Neurological disorders: Public health challenges. 2006.
- 2. World Health Organization. Atlas of headache disorders and resources in the world 2011. Geneva. 2011.