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A PATHOGENETIC CLASSIFICATION OF THE so-called
OPHTHALMOPLEGIC MIGRAINE (O.M.)

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NEUROGENIC DEFECTS

The oculomotor - III cranial nerve - (according to some authors, in 90% of the cases of O.M.). Muscles involved: superior, medial and inferior rectus, levator palpebrae superioris, inferior oblique (extrinsic muscles); ciliary and sphincter pupillae (intrinsic muscles).

Mechanism: interruption of axonal flow and nervous conduction due to a compression by the posterior cerebral and anterior cerebellar arteries on the nervous roots or on the nerve at their emergence from the brainstem to the interpeduncular cistern, in the presence of vasodilation and migrainous oedema.

The abducens - VI cranial nerve - (rarely involved). Muscle involved: rectus lateralis.

Mechanism: interruption of axonal flow and nervous conduction due to a compression on the nerve by some of the branches of the basilar artery at the emergence from the brainstem into the cerebellopontine angle cistern, in the presence of vasodilation and migrainous oedema.

The facial - VII cranial nerve - Muscle involved: eyelid orbicular.

Mechanism: interruption of axonal flow and nervous conduction due to a compression on the nerve following the hydrodynamic action of the migrainous oedema in the facial canal, downstream the geniculate ganglion.

MYOGENIC DEFECTS

Muscle involved: superior oblique or trochlearis (rather frequent defect).

Mechanism: jamming of the myofascial complex in the trochlea, in the presence of migrainous oedema.