

# Does migraine affect income or income affect migraine?

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Studies show that migraine is more common among people with lower incomes. This relationship is examined in a study published in the August 28, 2013, online issue of *Neurology*, the medical journal of the American Academy of Neurology, looking at whether developing migraines limits people's educational and career achievements, leading to a lower income status, or whether problems related to low income such as stressful life events and poor access to health care increase the likelihood of developing migraines.

Contrary to the theory that social stressors increase the rate of [migraine](#) in low-[income](#) people, the researchers found that the remission rate when migraines stop occurring for a time or for good was the same regardless of income. "If the stresses of low income were the sole determinant, we would expect low-income people to be less likely to stop having migraines," said study author Walter F. Stewart, PhD, with Sutter Health, a not-for-profit health system in Northern California. "It's possible that the start of the disease may have a different cause than the stopping of the disease."

For the study, 162,705 people age 12 and older provided information on whether they had migraine symptoms, the age symptoms started and [household income](#). Low income was defined as less than \$22,500 per year for the household and high income as \$60,000 per year or more.

The study confirmed that the percentage of people with migraine is higher among those in lower income groups. For example, for women

age 25-34, 20 percent of those from high-income households had migraine, compared to 29 percent of those with middle income and 37 percent of those with low income. For men in that age range, 5 percent in high-income households had migraine, compared to 8 percent in middle income and 13 percent in low income. The results remained the same after adjusting for factors such as race, age and sex.

"New evidence from this study shows that a higher percentage of people have migraine in low income groups because more people get migraine, not because people in lower income groups have migraine for a longer period of time," Stewart said. "Because the remission rate does not differ by income, it means that the duration of time that people have migraine is not different by income level. These results strongly support the theory that stressors associated with lower income play an important role in the relationship between migraine and income. Identifying these factors may be a crucial step toward developing prevention strategies."

Provided by American Academy of Neurology

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