

## CLINICAL CORRESPONDENCE

# Injection of polidocanol foam (PF) in varicose veins as a trigger for attacks of migraine with visual aura

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### Introduction

Polidocanol foam has been recently developed as a sclerosing treatment for varicose veins (1). Although usually well tolerated, some side-effects have been reported, mostly local, but also general, such as 'visual problems', 'monocular blindness' and 'migraines' (2, 3).

We report four consecutive cases, seen in 6 months, in whom the injection of PF in a non-saphenous varicose vein and telangiectasias triggered a typical attack of visual migrainous aura (4).

### Case reports

#### *Patient 1*

A 53-year-old man received for the first time an injection of 2 ml PF 400 (0.20%). Three minutes later he noticed a central blurring of vision, which turned into a typical scintillating scotoma, spreading to the periphery. The visual symptoms lasted 20 min without subsequent headache.

#### *Patient 2*

A 45-year-old woman received for the second time a 2-ml PF 400 (0.15%) injection. Ten minutes later she saw a white spot in the lower part of her visual field, rapidly expanding, associated with moving broken lines and blurred vision. This lasted 23 min and was followed by a 2-h bitemporal pulsatile headache without nausea, vomiting, photo- or phonophobia.

Immediately after the previous injection, she also had blurred vision for a few minutes, followed by headache.

#### *Patient 3*

A 43-year-old woman received for the first time a 2-ml PF 400 (0.15%) injection. Ten minutes later she

progressively saw as through a kaleidoscope in her left visual field for 30 min, and subsequently suffered fronto-temporal headache. The headache was slightly pulsatile, without nausea, vomiting, photo- or phonophobia.

#### *Patient 4*

A 47-year-old woman had a typical history of migraine with aura since the age of 12 with three to four attacks per year except during the previous year. Ten minutes after a 2-ml PF 400 (0.15%) injection, she experienced her typical scintillations lasting 25 min and followed by a headache of 4 h duration. Symptoms were the same as those she experienced before.

### Discussion

These four patients (three of whom had never before had a migraine attack) experienced a typical visual migrainous aura (followed by headache in three) 3–10 min after the injection of PF 400 in a varicose vein. The mechanism remains unknown: direct toxicity of the drug, liberation of vaso-active substances due to the disruption of the endothelium, or migration of the foam through a patent foramen ovale (5)? Further work should help to elucidate the mechanism of these unusually triggered visual migrainous auras.

### References

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