Response to Letter Regarding Article, “Onset Headache Predicts Good Outcome in Patients With First-Ever Ischemic Stroke”

We thank Dr Isabelle for expressing her interest in our article.1 In her comments, she speculates that the better outcome among stroke with onset headache could be related to higher proportion of posterior fossa ischemic stroke in this patient population. In addition, she also questions the possible impact of different stroke types within the same anatomic localizations.

In our study protocol, we specifically planned to attempt to clarify the impact of onset headache on the outcomes of first-ever patients with ischemic stroke. For this purpose, we adjusted baseline National Institutes of Health Stroke Scale, anatomic infarct location (anterior versus posterior territories), stroke subtypes (Trial of Org 10172 in Acute Stroke Treatment [TOAST] criteria), and other potential confounding factors in the outcome analysis. Our results showed better short-term and long-term outcomes in patients with onset headache. We also found a similar advantageous trend in each stroke subtype after controlling for the infarct location. Thus, patients with onset headache had better outcomes, irrespective of stroke types and locations. Onset headache seems to have an independent favorable impact on the outcome in patients with ischemic stroke.

We also concur with Dr Isabelle that anatomic and vascular localizations affect the outcomes in patients with ischemic stroke.2,3

Disclosures

None.

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