

Early effect of Onabotulinum Toxin-A on EEG-based functional connectivity in patients with chronic migraine: a pilot study

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Abstract

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Abstract

Background

Onabotulinum Toxin-A (OBTA) is indicated as a treatment of chronic migraine (CM). Several studies have shown the modulatory action of BTA on the central nervous system. However, research on migraine is limited.

Objective

In this pilot prospective cohort study, we aimed to evaluate, by means of high-density EEG (HD-EEG), the longitudinal changes in brain functional connectivity (FC) in adult CM patients treated with OBTA.

Methods

This study was conducted at the Neurology Unit of "Policlinico Tor Vergata", Rome, Italy, and included 12 adult CM patients treated with OBTA and 15 healthy controls (HC). Patients underwent clinical scales at enrollment (T0) and at three months (T1) from the start of treatment. HD-EEG was recorded using a 64-channel system in CM patients at T0 and T1, and in controls (HC). A source reconstruction method was used to identify brain activity. FC in δ - θ - α - β -low- γ bands was analyzed using the weighted phase-lag index. FC changes between HCs and CM patients at T0 and T1 were then assessed, using cross-validation methods to estimate the reliability of the results.

Results

Compared to HCs, at T0 CM patients showed hyperconnected networks in δ ($p=0.046$, AUC [0.76 0.98], Cohen's κ [0.65 0.93]) and β ($p=0.031$, AUC [0.68 0.95], Cohen's κ [0.51 0.84]), mainly involving orbitofrontal, occipital, temporal pole and orbitofrontal, superior temporal, occipital, cingulate areas respectively, and hypoconnected network in α band ($p=0.029$, AUC [0.80 0.99], Cohen's κ [0.42 0.77]), predominantly involving cingulate, temporal pole and precuneus. CM patients at T1, compared to T0, showed hypoconnected networks in δ band ($p=0.032$, AUC [0.73 0.99], Cohen's κ [0.53 0.90]), and hyperconnected in α band ($p=0.048$, AUC [0.58 0.93], Cohen's κ [0.37 0.78]), networks, involving the sensorimotor, orbitofrontal, cingulate, and temporal cortex.

Conclusions

These preliminary results showed that CM patients presented disrupted EEG-FC compared to controls that was restored by a single-session of OBTA treatment, suggesting a primary central modulatory action of BTA.

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