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Conclusions

Primary headache get worse after SARS-COV-2 infection. De novo primary headache is frequent post SARS-COV-2 infection. Young male patients with SARS-COV-2 infection tend to have worse headache. These features may be helpful in diagnosing the headache related to SARS-COV-2.

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119337

Use of traditional medicine in treatment of migraine during coronavirus disease 2019 (COVID-19) pandemic- an online survey

Ismail Ismail, Jasem Al Hashel, *Ibn Sina Hospital, Neurology Department, Kuwait city, Kuwait*

Background and aims

Since the emergence of COVID-19 pandemic, patients with migraine were specifically vulnerable to worsening of their headaches, in addition to inadequate quality of medical care and overall psychosocial stressors. Traditional medicine (TM) has been used for centuries to treat headache disorders, and around 2/3 of migraine patients reported seeking TM in literature.

Methods

We conducted an internet-based, cross-sectional study, to assess the use of TM in treatment of migraine amid COVID-19 pandemic. A self-administered questionnaire was distributed to patients with migraine from the headache clinic in the largest neurology center in Kuwait, and was also posted on several medical social-media accounts.

Results

A total of 1018 patients completed the survey. TM was used by 406 (39.9%) respondents; 353 (86.9%) females, with mean age of 34 ± 9.5 years, and mean disease-duration of 9.8 ± 8.3 years. The most common reported TM methods were; head-massage by 52.3%, head-banding by 47.9%, herbal-drinks by 45.8%, and essential-oil aromatherapy by 37.2% respondents. Hijama and Farry were reported by 1.1%, and 0.5%, respectively. Higher migraine frequency ($p < 0.001$) and migraine severity ($p = 0.002$), older age ($p = 0.04$), longer disease duration ($p = 0.005$), non-compliance to treatments ($p < 0.02$), and less communication with physicians were associated with higher TM use.

Conclusions

Worsening of migraine, in addition to the overall negative impact of COVID-19 pandemic, has forced the patients to self-treat themselves by using TM, despite being compliant to their conventional treatments. Neurologists should prepare their patients with "rescue" strategies for headache management, and new means of communication, to face these "new normal" challenges.

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119338

Impact of COVID-19 pandemic on the care of patients with migraine

Cristiana Silva, Carolina Fernandes, Isabel Luzeiro, *Centro Hospitalar de Coimbra, Neurology, Coimbra, Portugal*

Background and aims

Migraine is one of the most prevalent chronic diseases. The COVID-19 pandemic and the consequent deep remodeling of health care may have contributed to the worsening of migraine. We aim to study the impact of COVID-19 pandemic on the care of patients with migraine.

Methods

Cross-sectional study with patients with migraine followed in a Neurology outpatient clinic. Patients completed an online survey that included variables related to migraine, treatment and healthcare approachability.

Results

A total of 97 patients completed the survey, mostly female (92.8%), with a mean age of 43.3 years old, in a full-time job (60.8%), 14.4% changed to teleworking. There was an increasing of anxiety (87.6%) and TV watching (63.9%) and a decrease of exercise (52.6%) and quality of sleep (56.7%). There was a worsening of pain severity in 54.6% patients, with greater need of analgesia (56.7%), 26.8% reported difficulty in getting their medication, botox injections treatment was mostly delayed (82.0%) and 20.6% had to go to emergency ward. Only 11.3% had COVID-19, of those 60.0% had worsening of symptoms. The majority had teleconsultation (55.6%), 42.2% reported that frequency of consultations was not appropriate, and that care was different from presential appointments.

Conclusions

The COVID-19 pandemic had a negative impact in patients with migraine, there were profound changes in habits and, overall, there was an insufficient health care response to these patients. It is urgent to reorganize health care in order to enhance teleconsultation and promote accessibility to health care.

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The migraine postdrome: The misunderstood phase with a significant impact in quality of life

Inês Carvalho, Diogo Damas, Catarina Fernandes, Helena Gens, Isabel Luzeiro, *Centro Hospitalar e Universitário de Coimbra, Neurology, Coimbra, Portugal*

Background and aims

The postdromic phase consists in a set of symptoms occurring once the acute headache has resolved. Its duration varies between several hours and one or more days and it occurs in around 2/3 of the patients. Although it is very common and disabling, the postdromic phase is the least studied and understood phase of the migraine attack. We aimed to determine the prevalence, characterize the clinical presentation and assess the impact of the postdromic phase on daily activities, work activity and quality of life.

Methods

Sequential patients with migraine according to ICHD-3 were screened about the occurrence of postdromic symptoms and its characteristics using a self-fulfilled questionnaire.

Results

Of 70 evaluable patients, 94.3% reported at least one nonheadache symptom in the postdromic phase. Postdrome symptoms, in order of frequency, included feeling tired (71.2%), photophobia (62.1%) and having difficulty concentrating (57.6%). 58.5% reported an impact on daily activities and 78.8% in quality of life. Migraine relief medication influenced positively the duration of postdromic phase in 83.1%. The