What Are Ocular Migraines and How Are They Different from Regular Migraines?

For starters, ocular migraines are pretty rare.

By Arielle Tschinkel

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If you're a migraine sufferer, you know there are stark differences between headaches and migraines. (Location and severity of pain and accompanying symptoms are key differentiating markers, FYI.) But did you know that there are multiple *types* of migraines that can vary greatly based on symptoms, severity, and frequency?

"Migraines are generally divided into two overarching types: migraines with aura and migraines without aura," says Nashville-based eye surgeon Ming Wang, M.D., Ph.D., of Wang Vision 3D Cataract & LASIK Center. Aura refers to a cluster of visual symptoms: seeing waves, stars, zig-zags, flashes of light, or even missing spots in your vision. On average, these symptoms can last anywhere from five to 60 minutes, explains Dr. Wang. "[Auras typically] appear suddenly, last for a short time, and then go away," he adds. "They can occur with or without a headache. [Sufferers of] migraines without aura do not have any visual symptoms, only the headache."

But one of the most alarming types of migraines might not actually "feel" like a migraine at all: When you get an ocular migraine, your eyes experience the effects more than anything else. (That's not to say you won't also have head pain, though. More on that below.) This can be a confusing and scary situation to be in, especially if you've never had an ocular migraine before. (Related: What I've Learned from Having Chronic Migraines)

Here, the lowdown on ocular migraines, so you can understand what you're experiencing (and act accordingly).

What is an ocular migraine?

Within the two major types of migraines, there are diagnosable subtypes—including ocular migraines, explains Dr. Wang. Generally speaking, an ocular migraine is a headache that's accompanied by visual disturbances (zig-zags,

flashes of light, etc.), according to the Mayo Clinic. But an ocular migraine is different than a migraine with aura, says Dr. Wang. "A true ocular migraine is rare, but the term is often used interchangeably with 'migraine with aura,' which creates a lot of confusion," he explains.

As its name implies, ocular migraines affect the eye. That's right—typically, only one eye is involved, says Ajeet Sodhi M.D., a stroke neurologist and the director of Neuro Critical Care at the California Institute of Neuroscience. "Symptoms may include partial or complete vision loss in the affected eye, headache, nausea, vomiting, and sensitivity to light and sound. Ultimately, symptoms resolve without any lasting deficits," explains Dr. Sodhi.

Granted, many ocular migraine symptoms can mimic those of other migraines, he adds. But both Dr. Sodhi and Dr. Wang confirm that the *real* indicator of an ocular migraine is its effect on just one eye. (Related: 10 Surprising Things Your Eyes Reveal About Your Health)

Why do some people not experience headaches with ocular migraines?

While it might seem counterintuitive (and confusing!), not all forms of migraines include head pain as a symptom, according to the American Migraine Foundation. Migraines without headaches are sometimes called silent migraines.

It sounds vague, but migraines with aura *and* ocular migraines can both happen with or without a headache, explains Dr. Wang. "Some patients may always experience a headache with migraine, and some may not [experience headache with migraine at all]," he says. On the other hand, some patients *occasionally* have headaches with migraines, and other times the migraine is present *without* the head pain, he adds. Translation: Migraines are *very* unique to each individual who experiences them, and no two migraine-sufferers' symptoms are exactly alike.

One thing is for sure, though: Ocular migraines *are* different than migraines with aura, even though they sound super similar. While the visual symptoms themselves are virtually identical for both migraine types, visual disturbances caused by migraines with aura are usually present in both eyes—unlike an ocular migraine, which presents in one eye only, explains Dr. Sodhi. If you haven't visited a doctor yet, you'll typically be able to tell the difference between an ocular migraine and a migraine with aura based on whether your symptoms exist in one

eye or both—if both, you likely have a migraine with aura and not an ocular migraine, confirms Dr. Wang. (Related: The Scary Thing You Should Know If You're On Birth Control and Get Migraines)

How common are ocular migraines?

Overall, migraines affect 39 million people in the U.S. and 1 billion people worldwide (a.k.a. about 10 to 13 percent of people), according to the Migraine Research Foundation.

Roughly 25 percent of all migraine-sufferers experience migraines with aura, says Dr. Sodhi. But the incidence of ocular migraines is much less certain, he adds. "Many people who experience [ocular migraines] do not seek medical attention, as the symptoms tend to resolve spontaneously without treatment," he explains.

"Ocular migraines are so rare that frequency is not described," confirms Dr. Wang. "Much, much less than 1 percent of the population gets ocular migraines." (Related: 7 Self-Care Practices Every Migraine Sufferer Should Know)

While they're relatively uncommon, ocular migraines can affect anyone, including those who already suffer from migraines in general, notes Dr. Wang. And once you do get an ocular migraine, it's possible that you'll experience it again. "Some patients have them several times a year, while some will go years between episodes," he explains. "It can be a one-off occurrence, but that is less common."

Migraines of any kind (including ocular migraines) can happen for a number of reasons. They're usually brought on by a trigger (or series of triggers), explains Dr. Wang. "The most common triggers are stress, light reflections, certain tastes or smells, changes in weather, or hormones," he says. "I encourage patients to keep a journal and see if they can link what's going on in their life when they experience a migraine to see if they can determine a trigger."

Some factors can increase your chances of experiencing migraines in general, as well as ocular migraines, including dehydration, low blood sugar, and excessive heat and altitude, adds Dr. Sodhi. (Related: Dietitian-Recommended Foods to Try When You're Recovering from a Migraine)

When should you see a doctor about your symptoms?

If you suspect you have a migraine of *any* kind, ocular or otherwise, you should start by visiting your primary care doctor, says Dr. Wang. "A primary care doctor can, and often will, treat them," he explains. "A neurologist is a good resource and treatment source for more advanced cases. This is true for any type of migraine."

Ocular migraines, specifically, are usually diagnosed after imaging and evaluation by a neurologist, explains Dr. Sodhi. "The evaluation is very important in order to rule out dangerous conditions that can mimic migraines such as strokes, inflammation, brain tumors, or other serious medical problems," he says. "Diagnosis and treatment vary from person to person, and each patient should work with their doctor to create a treatment plan that's best for them." (Related: What Your Headache is Trying to Tell You)

If you experience any neurological symptoms—such as dizziness, weakness, or slurred speech—with head pain, it's best to see a primary care doctor ASAP, who can evaluate your symptoms and potentially refer you to a specialist, such as a neurologist, ophthalmologist, or other eye specialist, depending on how exactly your symptoms present, explains Dr. Wang. Generally speaking, "patients should see a neurologist for frequent or severe migraines or for migraine symptoms that do not resolve on their own," adds Dr. Sodhi.

How are ocular migraines treated?

Treatment for migraines, in general, may include medication (such as beta-blockers to reduce blood pressure, low doses of certain epilepsy medications, as well as over-the-counter pain relievers for less severe symptoms), injections, lifestyle changes (including diet, sleep, and exercise), and biofeedback, also known as progressive muscle relaxation training, which often provides immediate relief, explains Dr. Sodhi. (Related: 5 Steps to Beating a Migraine Every Time)

As for ocular migraines, specifically, both Dr. Sodhi and Dr. Wang say treatment highly depends on an individual person's symptoms. Again, sometimes treatment isn't even necessary, as ocular migraine symptoms tend to resolve on their own, explains Dr. Sodhi.

In terms of finding relief for ocular migraines: "Closing and resting your eyes can help, as well as avoiding harsh, bright light and tech screens," says Dr. Sodhi. Dr. Wang also recommends remaining in a dark room to prevent triggers from light. In some cases, anti-nausea medications and/or nonsteroidal anti-inflammatory

drugs (NSAIDs), such as ibuprofen, can target certain symptoms and provide relief as well, adds Dr. Sodhi.

Of course, if you experience a sudden loss of vision in one eye or both or any troubling symptoms you haven't experienced before, you'll want to see a doctor ASAP to rule out a more serious condition like a stroke or a seizure, which both require immediate medical attention. Your primary care doc is a good place to start, as they can refer you to a specialist as needed. Regardless, checking in with your doctor is the best way to determine the cause of your symptoms and how to alleviate them as quickly as possible.

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