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Migraine-related hospitalizations in Recife: an epidemiological profile and challenges for preventable care

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Introduction
Migraine and other primary headache disorders are highly prevalent neurological conditions associated with substantial social burden, characterized by recurrent episodes of intense pain that negatively affect quality of life, daily functioning, and productivity. Although clinical management is predominantly outpatient-based, severe or refractory cases may require hospitalization, increasing costs for both the healthcare system and society. In this context, the epidemiological analysis of headache-related hospitalizations in Recife provides an opportunity to characterize the affected population and identify critical aspects relevant to healthcare planning and public health strategies.

Objective
To analyze the epidemiological profile of migraine-related hospitalizations in Recife and discuss their implications for healthcare organization and preventable care.

Methods
This observational, retrospective, descriptive epidemiological study used data from the Brazilian Unified Health System Hospital Information System (SIH/SUS), referring to Recife over the last five years. All hospitalizations classified according to ICD-10 codes related to migraine and other primary headache disorders were included, totaling 2,424 records. Variables analyzed included age group, sex, and ICD-10 chapter classification. Data were evaluated descriptively using absolute and relative frequencies.

Results
Hospitalizations were predominantly concentrated among young and middle-aged adults, especially individuals aged 30–39 years (421 cases), followed by 40–49 years (402 cases) and 20–29 years (376 cases). This distribution indicates a marked impact on economically active populations. Children and adolescents also demonstrated expressive frequencies, particularly in the 10–14-year age group (215 cases), suggesting early clinical manifestation. Among individuals over 60 years of age, 344 hospitalizations were recorded, indicating persistence of the condition in older age groups. Women represented the majority of admissions, accounting for 1,597 hospitalizations (65.9%), while men accounted for 827 cases (34.1%). All admissions were classified within ICD-10 Chapter VI (Diseases of the Nervous System). The predominance among women is consistent with established evidence regarding hormonal and psychosocial influences on migraine occurrence.

Conclusion
Migraine represents a relevant public health issue in Recife, disproportionately affecting women and adults of productive age. The hospitalization burden suggests potential gaps in outpatient management and reinforces the importance of strengthening primary healthcare through earlier diagnosis, improved clinical follow-up, and broader access to preventive treatment strategies to reduce avoidable hospitalizations.

Keywords:
Migraine disorders
Hospitalization
Primary health care

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