

Comparison. MG with Eaton-Lambert syndrome

	<b>MG</b>	<b>Eaton-Lambert</b>
Repetitive motion	Worse	Improves
Location	Proximal ms	Proximal ms
Action potential	Decreased	Increases w activity
DTRs	Preserved	Absent
Location of dz- aby attack	Post synaptic acetylcholine recp	Presynaptic calcium channel

<b>Migraine</b>	<b>Tension H/A</b>	<b>Cluster H/A</b>
Scintillating scotomata	Muscle contraction h /a	Unilateral, severe boring pain
No assoc with H/ A	Worse at end of day	Daily severe sharp peri orbital,supra orbital
Vessels & scalp are tender	Never assoc nausea	Brief, 15 min to 3 hours
Tx- triptans,metop, valproate, divalproex	Better with alcohol, exercise, hot showers, may last up to months	Alcohol worsens, may have rhinorrhea flushing ptosis
Cyproheptadine for kids	NSAIDs, muscle relaxants	Oxygen for 10 min, ? Steroids