What is Migraine?

Migraine is a much mis-understood and under-diagnosed condition affecting approximately 10–12% of the population of Ireland. It is a neurological condition characterised by severe, throbbing, one-sided headache and is often accompanied by visual distortions, nausea, vomiting, intolerance to noise and light and in rare cases, even paralysis and loss of consciousness. The condition is inherited in up to 60% of cases. Attacks, according to International Headache Society guidelines can last from 4 to 72 hours. Migraine is 3 times more common in women, though in childhood, it is more common in boys than in girls. Although some people may only experience 1 or 2 attacks a year, others may suffer on a weekly basis to the extent that their normal activities and quality of life are substantially reduced. Between attacks, people are otherwise free of all symptoms. Although there is no ‘cure’ for migraine, it can be effectively managed by using conventional and/or complementary treatments in conjunction with what you can do for yourself.

The cause of Migraine

Although research is ongoing, the exact cause of migraine is as yet unknown. It is clear however that a number of parts of the body including the central nervous system, the brain, the gastrointestinal tract and blood vessels combine to bring about an attack. Levels of chemicals or neurotransmitters such as serotonin are also altered. In some people, attacks are precipitated on exposure to a trigger factor or a combination of trigger factors (see page 8), whilst in others, attacks occur spontaneously because of an inherent low migraine ‘threshold’.

The Impact of Migraine

It is important to know that you are not alone in your struggle with migraine. There are about 400,000 migraineurs in Ireland alone, many of whom suffer in isolation without ever seeking help. Migraine costs our economy in the region of €45m p.a. and is responsible for at least 200,000 lost working days. The average sufferer gets one attack per month and loses 2 days from work each year with an additional 4 days equivalent in reduced effectiveness. There is also a huge non quantifiable loss to the quality of family and social life. The World Health Organisation has recently identified migraine as the 12th leading cause of disability worldwide among females and 19th overall.
The Role of Conventional Medicine

The most widely used drugs for migraine for most people are over the counter preparations such as paracetamol, aspirin, codeine and ibuprofen, all of which should ideally be taken very early in the attack, often combined with anti-nausea medicine if necessary. For some people, over the counter preparations have only partial success in treating their most severe migraines.

In recent years, many brain mechanisms involved in the migraine process have been identified resulting in the design of new treatments to interact with these mechanisms. These new anti-migraine medicines, called Triptans are giving hope to people who have been suffering for many years. Because Migraine is so individual, it still takes patience to find the correct medication for you, but finding and continuing to use a suitable drug is a key part of most management plans.

Your doctor may prescribe a preventative (prophylactic) drug if you suffer two or more attacks per month or if the attacks are having a severe impact on your life. These drugs are taken every day normally for about 6-12 months in an attempt to break the cycle of your migraines and include Beta Blockers, and calcium channel blockers.

The Migraine Attack

1. Combination of (see page 8) Trigger factors
2. Prodromal or Warning Phase (Tiredness, Yawning, Mood changes, Food cravings, increased awareness of light, noise and smells)
3. The Aura (Visual distortions, hearing or speech problems, disorientation. About 20-30% of sufferers experience aura)
4. Headache Phase (accompanied by sensitivity to light, noise and smells)
5. Resolution Phase (Easing of the Headache)
6. Postdromal or Recovery Stage (Similar to the prodromal stage. May take hours or even days to fully recover)

Not all of these stages will be experienced by everyone or indeed will they all be apparent in every attack.
The Role of Complementary Approaches

Complementary therapies are defined as techniques that are not part of a medical school curriculum. Many people turn towards using these treatments either as part of a combined approach, because drug therapies have had limited success, because of side effects caused by conventional treatments or because they do not wish to take drugs at all.

Treatments such as Acupuncture, Biofeedback, Herbal medicine, Aromatherapy, Reiki, Homeopathy and Physiotherapy are used regularly by thousands of migraineurs in Ireland, often with some success. You can contact us for further information on these approaches.

If you are attending a complementary practitioner as well as taking drug treatments, it is advisable that you inform your doctor of this fact. You should also check out the credentials (qualifications, insurance, membership of Professional body etc.) of the alternative practitioner you are attending before you undergo treatment.

Some tips for when you have been prescribed a drug:

- Always complete the course of treatment prescribed and in the manner prescribed
- Treat your attacks as early as possible
- Always bring your medication with you wherever you go
- Use your migraine diary to record the effectiveness of the drug
- Do not overuse painkillers as this can lead to Analgesic Rebound Headache
- Report any side effects back to your doctor

There are two Headache/ Migraine Clinics in Ireland, in the Neurology departments of Beaumont Hospital Dublin and Cork University Hospital. The clinics have been set up in recent years to treat the most refractory cases. In most instances, your GP should be able to treat you without reference to the clinics and because your GP knows you and your medical history well, this is normally the best avenue of treatment. You will need a referral letter from your GP to attend either of the clinics.

‘Lord, how my head aches! What a head have I! It beats as if it would fall in twenty pieces’.
William Shakespeare, Romeo and Juliet.
What you can do – 10 steps in managing your migraine.

Migraine is not life threatening, but it can destroy the quality of your life if you let it. It has been found that migraine reduces an individual’s quality of life more than conditions such as heart disease and diabetes and creates as much psychological stress as life threatening diseases such as cancer. The ultimate goal of migraine management is to minimise disruption to your normal life allowing you to return to normal activity as soon as possible. Here are 10 tips that may help you to manage your migraine.

1. Assume responsibility

The very first thing that you must recognise is that ultimately, migraine is your own responsibility. Only you can be 100% familiar with your own migraines. Your GP, the Migraine Association and your friends, colleagues and family will all be supportive, but it is up to you to take action in managing the condition as best you can. Resist the common temptation to push the whole issue aside as soon as an attack subsides. Work on how you can prevent or curtail the next attack... don’t let migraine control you.

Educate yourself about your condition and stay in touch with developments in treatments and research. Learn to recognise the difference between a migraine attack and a tension headache. Education = empowerment.

‘Proper management and education can go a long way to improving your quality of life’. Dr. E. O’Sullivan, Clinical Director, Headache/Migraine Clinic, Cork

2. Utilise your GP

Visit your GP to confirm the diagnosis of migraine and also to ensure that there are no other conditions present such as Chronic Daily Headache. Prepare before you go to your appointment. Find out as much as you can about migraine (contact us for further leaflets on any aspect of migraine). Make a specific appointment to discuss your migraine – don’t just mention it at the end of another appointment. Because there is no test for migraine, a diagnosis can only be made on the account that you give to the doctor so be able to describe the symptoms accurately, list the treatments you’ve tried and outline the level of impact that it has on your life. Your doctor will also need to know when the problems started, what triggers your attacks and if there is a family history. Don’t be afraid to ask questions or to mention anything that you feel is relevant.

3. Avoid your trigger factors

Certain foods, drinks, situations or environmental conditions may precipitate or bring on a migraine. It is important to recognise that everyone’s trigger factors are highly individual and that even the most common ones may not be detrimental to you at all. Foods such as cheese and chocolate are the most commonly blamed trigger factors, but evidence suggests that only about 20% of attacks are caused by dietary factors so it is important to put the impact of diet into perspective. It is more likely that a combination of a small number of factors bring you over the migraine threshold. The most common are listed below. Recognising your own is the key in
managing your migraine. Remember that anything can be a trigger if you are susceptible to it.

- Travel (motion sickness).
- Sleep related triggers – sleep deprivation or disturbance, Irregular sleeping patterns, too much sleep.
- Changes in routine.
- Increases in stress or anxiety levels. Excitement or other positive changes in mood.
- Foods and Beverages – alcohol, caffeine products or withdrawal from caffeine, cheese, chocolate, products which contain MSG (e.g. hot dogs, Chinese food), citrus fruits, dairy products, nuts, wheat, fatty foods, nitrates and marinated or pickled foods are the most common food triggers. Keeping your diary accurately may point out a pattern over time. Trace your diet back 72 hours before the onset of migraine to see what you have eaten. Don’t unnecessarily eliminate the entire list above from your diet. They may not be responsible at all for your attacks and a mass elimination policy can also be dangerous to your health. It’s very important to keep a balanced diet. Eliminating one foodstuff at a time for a short while (say 6 weeks) may be the key to finding your dietary triggers.
- Lack of food, delayed meals, irregular eating patterns, fasting and dieting may also be trigger factors as they all lead to lowered blood sugar levels.
- Hormonal Changes in Women. Puberty, Menstruation, Pregnancy, HRT and Menopause are all potential triggers.
- Meteorological Triggers – change of seasons, high atmospheric pressure, strong sunlight, heat or cold.
- Environmental Triggers – Smoke, Strong smells, high altitude, loud noise, bright, irregular or flickering lights.

- Exercise – too much exercise may act as a trigger, although lack of exercise can also be a problem.
- Oral Contraceptives.
- Smoking or passive smoking.
- Long periods in front of a computer screen.
- Head, neck or back injuries, High Blood Pressure and other physiological irregularities.

4. Keep a diary

The Migraine Diary is a simple but effective way of managing your migraine. It can help you to establish certain patterns in your attacks. Perhaps you get most of your headaches at weekends or perhaps every time you are presented with deadlines at work or at home. These examples would be quite easy to notice but most people’s migraines are not as easy to predict. Therefore, when you get an attack it is important to be able to go back and record the main events of the previous 72 hours.

Attacks may only be triggered by a certain combination of trigger factors, say when you miss a meal AND experience stress. Either factor on their own may not be enough to trigger an attack, but when combined, they do. Using the diary religiously for a period of at least 3 months may establish some patterns to your headaches and may enable you to take action to prevent them or manage them better. It can also help you to feel more in control and this, in itself can also reduce the frequency of the attacks.

The diary will also act to show your doctor how much an impact that Migraine has on your life. Whenever you visit your doctor, you should bring your diary along, as it will help him/ her to implement a specific treatment plan for you.
In general, sticking to eating, resting, exercise and sleep routines is a good idea for migraineurs.

Our members regularly inform us of tips that can be utilised that may help your migraine. Although no scientific data will support these methods, you may find that some of them will afford partial or temporary relief especially if utilised early in the attack. The most popular suggestions include:

- Sleep is still one of the best ways to get through an attack, though not always possible.
- Lying motionless in a quiet dark room for a period is normally helpful.
- Acupressure and self-massage are simple techniques that you can learn which may also be helpful when applied to the head.
- Ice treatment is an ancient therapy that is still used. Many people find that the application of ice or cold water is a useful natural pain reliever.
- Likewise, certain sufferers find that heat can be very beneficial, whether in the form of a hot wet towel, a warm bath or even through heating other parts of the body. Some people say that alternating hot and cold therapies provide relief.
- General pressure, perhaps in the form of a bandage has also been shown to be effective, especially if applied to the temporal artery.
- Migraineurs often let us know about ‘Migraine Products’ on the market which have been beneficial such as special pillows, magnets, ice-packs, electro-stimulation devices etc.

‘Comparing Migraine to headache is like comparing the Flu to a cold’. Audrey Craven
Most experts agree that regular aerobic exercise helps to reduce the severity of a migraine attack. Exercising will increase oxygen to the brain and is also responsible for stimulating chemicals such as serotonin and dopamine and the body’s natural painkillers, endorphins. Increasing these chemicals may help prevent attacks as low levels are associated with migraine. A healthy mind and body will also prepare you to better deal with a migraine attack. Regular exercise may also erase some of the stresses that can precipitate an attack.

Be careful when exercising though – sudden, excessive or vigorous exercise can be a migraine trigger, as can low blood sugar levels as a consequence of exercise.

There is never a good reason to suffer in silence. The Migraine Association can provide you with advice and information on any aspect of your migraine so is a valuable resource to have at hand. Our services are outlined on the back page. We encourage participation from all members whether it is through events, research, product trials or simply sharing information.

Many people have found ways to control their migraines, by using one or more of the above methods or by ‘inventing’ something themselves, so if at first you don’t succeed, try again. Don’t give up.
The Migraine Association of Ireland

The Migraine Association of Ireland was formed in 1994 with 3 main goals:

• To provide information, support and reassurance to migraine sufferers in Ireland.
• To raise awareness of the condition in the general population and in the population of the health profession.
• To support research into the condition of Migraine and seek out better treatments for people with migraine.

Our services include:

• Regular newsletter
• Regular e-mail newsletter
• Information leaflets and publications
• Support & Reassurance available via our Helpline
• Advice on medications available from the Specialist Migraine nurse
• On-line information at www.migraine.ie
• Public information seminars and awareness campaigns
• We also support research into migraine in Ireland and we were the catalyst in the setting up of Ireland’s Headache/ Migraine clinics

It costs just €15.00 p.a. to become a member, so join the Migraine Association today!

CALL-SAVE HELPLINE
1850 200 378
(10.00 – 4.30, Monday to Friday)

Address: The Migraine Association of Ireland,
All Hallows College, Drumcondra, Dublin 9.
Advice Line: 01 797 9848
(Specialist Nurse 2.30pm – 4.30pm, Monday – Thursday)
Phone: 01 806 4121
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Managing Migraine

10 steps to managing your migraine