

# What You Should Know About Migraines

Calling a migraine “just a headache” is like calling a hurricane “just a sprinkle.” Severe head pain is only one symptom of migraine, and the misery of migraine can take you out of action for hours or even days.

Fortunately, migraine management is improving, and while there is still no cure, now more can be done to reduce migraine frequency and severity, and sometimes even prevent them before they start.

## How to Tell if Your Headache Is a Migraine

If you have migraines or think you might, you are certainly not alone. More than 29 million Americans suffer from migraine, and about three of every four of them are women. Recurring, severe headache is the central symptom of migraine, but migraine often has other symptoms and characteristics that distinguish the condition from other kinds of headaches. Some of the signs and symptoms of migraine include:

- Intense pulsing or throbbing pain, usually on just one side of the head
- Attacks that last between 4 hours to 3 days, and sometimes longer
- Attacks that are worsened by physical activity
- Nausea or vomiting
- Severe sensitivity to light, noise, or odors
- Changes in vision, including blurring and blind spots
- Stuffed-up nose
- Tender scalp
- Stiff or tender neck
- Lightheadedness
- Feeling cold or sweaty.

In addition, about one of every five people with migraine also experience auras—warning symptoms that occur about 20 minutes to an hour before the start of the migraine itself.

Aura signs and symptoms can include:

- Seeing flashing lights or zigzag or wavy lines
- Feeling tingling, prickly, or “pins-and-needles” sensations in one arm or leg
- Having difficulty speaking or a feeling of weakness.

Whether or not they experience aura, some people have other symptoms that let them know a migraine might be coming on. These “prodrome” symptoms, which generally occur several hours or a day before the migraine, can include:

- Feeling thirstier than usual
- Feeling drowsy
- A desire for sweet foods
- Feeling “up” or very energetic
- Feeling depressed or irritable.

Doctors can often diagnose migraine based on these symptom patterns alone. That is why it’s so important for women who think that they might have migraines to keep careful track of their symptoms over time. It can help to keep a migraine diary (a record of when your migraines occur and what you were doing at the time, where

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in your menstrual cycle you were, and what seemed to make them better or worse) so that you can be very clear with your doctor about what's happening and when. A migraine diary can also help you keep track of what might be triggering your migraines. Sometimes doctors will order tests, such as brain scans or blood tests, to make sure that there is no other cause for the symptoms. If none is found and the symptom patterns fit, then the picture points to migraine. (No test is currently available to confirm a migraine diagnosis.)

### What Makes Migraine Happen

The causes of migraine are not yet completely understood. Research suggests, though, that they are related to changes in levels of brain chemical messengers, including serotonin. When serotonin levels are too low, blood vessels on the brain's surface widen. These expanded blood vessels can press on nearby nerves, which causes pain. Just why these changes happen is not clear. But they do appear to be linked to genetics, since as many as eight of 10 migraine sufferers have a family history of the condition.

### Managing Migraine

There are two main ways to approach migraine management: Treat attacks once they start (acute management), or try to prevent them from happening in the first place (preventive management). Some people combine both strategies. The choice of which approach is best for you depends on how frequent, severe, and disabling your migraines are. A preventive approach might be right for you if you suffer at least two disabling attacks a month, if you use migraine-relieving medications more than twice a week, or if migraine-relieving medications do not work consistently for you.

#### Resources

- The National Women's Health Information Center <http://www.WomensHealth.gov>
- The National Migraine Association <http://www.migraines.org>
- The Mayo Clinic <http://www.mayoclinic.com>
- The National Headache Foundation <http://www.headaches.org>
- National Menstrual Migraine Coalition <http://www.headachesinwomen.org>

**Acute Management.**—Several medications are available that can help to relieve migraines once they start. Nonsteroidal anti-inflammatory drugs such as aspirin or ibuprofen may help relieve milder migraines, but they generally are not effective for more severe attacks. Ergots, like ergotamine (Ergostat) or dihydroergotamine (injection [DHE-45] or nasal spray [Migranal]) are available by prescription and may be helpful for more severe migraines. Triptans, including eletriptan (Relpax), sumatriptan (Imitrex), and zolmitriptan (Zomig), among others, were the first medications developed specifically to treat migraine. These drugs act like serotonin and cause the blood vessels to narrow. All of the acute medications are most effective when taken at the very first signs of an attack.

**Preventive Management.**—A number of medications can be taken on an ongoing basis for migraine prevention. Examples include amitriptyline (Elavil), propranolol (Inderal), and topiramate (Topamax). These medications usually will not get rid of migraine completely, but they may reduce the frequency and duration of attacks.

You can also help prevent migraines by keeping track of what seems to trigger them or set them off. Everyone has different triggers, but some common ones include:

- Changes in weather or altitude
- Changes in your sleep times and patterns
- Getting your period, or taking oral contraceptives or other hormones
- Skipping meals
- Exerting yourself during physical activity, including sexual activity
- Loud noises, bright lights (including sun glare), or strong odors (including smoke)
- Certain foods or beverages, including processed meats, aged cheeses, caffeine, nuts and peanut butter, and alcohol (especially red wine).

General healthy lifestyle habits can also help with migraine prevention. Try to eat well-balanced meals, get some physical activity every day, get enough sleep, and if you smoke, stop. Taking care of yourself can help you take care of your migraines.

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*This Patient Handout was prepared by Nancy Morgan Andreola, RN, using materials from Hutchinson S. Menstrual migraine: The role of hormonal management. The Female Patient. 2007;32(3):54-58; the National Women's Health Information Center Web site; the National Institute of Neurological Disorders and Stroke Web site; the Mayo Clinic Web site; the American Academy of Family Physicians Web site; and the National Headache Foundation Web site.*