



What is Migraine?

The pain of a migraine headache is often described as an intense pulsing or throbbing pain in one area of the head. It is often accompanied by extreme sensitivity to light and sound, nausea, and vomiting. Migraine is three times more common in women than in men.

Some individuals can predict the onset of a migraine because it is preceded by an "aura," visual disturbances that appear as flashing lights, zig-zag lines or a temporary loss of vision.

People with migraine tend to have recurring attacks triggered by a lack of food sleep or exposure to light, or hormonal irregularities (only in women). Anxiety, stress, or relaxation after stress can also be triggers.

For many years, scientists believed that migraines were linked to the dilation and constriction of blood vessels in the head. Investigators now believe that migraine is caused by inherited abnormalities in genes that control the activities of certain cell populations in the brain.

Is there any treatment?

There are two ways to approach the treatment of migraine headache with drugs:

- prevent the attacks, or
- relieve the symptoms during the attacks.

There are three principle approaches to treatment:

Acute, preventive, and complementary.

Acute treatment uses drugs to relieve the symptoms of attacks when they occur. **Preventive treatment** uses drugs taken daily to reduce the number of attacks and lessen the intensity of pain. Although in some patients, life-style changes, biofeedback and other non-drug treatments can help avoid the triggering of attacks.

Complementary treatment, which does not use drugs, includes biofeedback, relaxation techniques, acupuncture, exercise, and proper rest and diet.

Paying close attention to one's diet, regular (but moderate) exercise, relaxation and avoiding stressful situations and conditions can produce rather positive results.

The best migraine prevention diet is one that is wholesome, fresh and unprocessed as possible, thereby eliminating many of the supposed chemical triggers for migraine. In addition, eat these foods in small portions spread throughout the day averaging 5-6 calorie controlled portions. This eating behavior assists in preventing headache due to hunger, avoids large amounts of any supposed chemical trigger at any given time and finally fires up one's metabolism preventing weight gain, a likely factor contributing to risk of headache progression.

Foods and substances to eliminate from the diet include the following: coffee and caffeine, alcohol, foods containing MSG

Many people with migraine use both approaches by taking medications originally developed for epilepsy and depression to prevent future attacks, and treating attacks when they happen with drugs called triptans that relieve pain and restore function.

Hormone therapy may help some women whose migraines seem to be linked to their menstrual cycle. Stress management strategies, such as exercise, relaxation, biofeedback, and other therapies designed to help limit discomfort, may also reduce the occurrence and severity of migraine attacks.

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What is the prognosis?

Taking a combination of drugs to prevent and treat migraine attacks when they happen helps most people with migraine to limit the disabling effects of these headaches.

Women whose migraine attacks occur in association with their menstrual cycle are likely to have fewer attacks and milder symptoms after menopause.

What research is being done?

Researchers believe that migraine is the result of fundamental neurological abnormalities caused by genetic mutations at work in the brain.

Investigations of the more rare, familial subtypes of migraine are yielding information about specific genes and what they do, or don't do, to cause the pain of migraine headache.

Understanding the cascade of biological events that happen in the brain to cause a migraine, and the mechanisms that underlie these events, will give researchers opportunities to develop and test drugs that could prevent or interrupt a migraine attack.

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