Migraines and Headaches

Migraines are painful headaches often accompanied by nausea, vomiting, and sensitivity to light.

Who Gets Migraines?
The National Headache Foundation estimates that 28 million Americans suffer from migraines. More women than men get migraines and a quarter of all women with migraines suffer four or more attacks a month; 35% experience 1-4 severe attacks a month, and 40% experience one or less than one severe attack a month. Each migraine can last from four hours to three days. Occasionally, it will last longer.

What Causes Migraines?
The exact causes of migraines are unknown, although they are related to changes in the brain as well as to genetic causes. People with migraines may inherit the tendency to be affected by certain migraine triggers, such as fatigue, bright lights, weather changes, and others.

What Triggers a Migraine?
Many migraines seem to be triggered by external factors. Possible triggers include:

- **Emotional stress.** This is one of the most common triggers of migraine headache. Migraine sufferers are generally highly affected by stressful events. During stressful events, certain chemicals in the brain are released to combat the situation (known as the "flight or fight" response). The release of these chemicals can provoke vascular changes that can cause a migraine. Repressed emotions surrounding stress, such as anxiety, worry, excitement, and fatigue can increase muscle tension and dilated blood vessels can intensify the severity of the migraine.
- **Sensitivity to specific chemicals and preservatives in foods.** Certain foods and beverages, such as aged cheese, alcoholic beverages, and food additives such as nitrates (in pepperoni, hot dogs, luncheon meats) and monosodium glutamate (MSG, commonly found in Chinese food) may be responsible for triggering up to 30% of migraines.
- **Caffeine.** Excessive caffeine consumption or withdrawal from caffeine can cause headaches when the caffeine level abruptly drops. The blood vessels seem to become sensitized to caffeine, and when caffeine is not ingested, a headache may occur. Caffeine itself is often helpful in treating acute migraine attacks.
- **Changing weather conditions.** Storm fronts, changes in barometric pressure, strong winds, or changes in altitude can all trigger a migraine.
- **Menstrual periods.**
- **Excessive fatigue.**
- **Skipping meals.**
- **Changes in normal sleep pattern**

Migraines and Associated Conditions

There are some medical conditions that are more commonly associated with migraines, including:

- Asthma
- Chronic fatigue syndrome
- Hypertension
- Raynaud's phenomenon (occurs when blood vessels narrow causing pain and discoloration usually in the fingers)
- Stroke
- Sleep Disorders

Are Migraines Hereditary?
Yes, migraines have a tendency to be hereditary. Four out of 5 migraine sufferers have a family history of migraines. If one parent has a history of migraines, the child has a 50% chance of developing migraines, and if both parents have a history of migraines, the risk jumps to 75%.
What Are the Symptoms of Migraines?
The symptoms of migraine headaches can occur in various combinations and include:

- A pounding or throbbing headache that often begins as a dull ache and develops into throbbing pain. The pain is usually aggravated by physical activity. The pain can shift from one side of the head to the other, or it can affect the front of the head or feel like it's affecting the whole head.
- Sensitivity to light, noise, and odors
- Nausea and vomiting, stomach upset, abdominal pain
- Loss of appetite
- Sensations of being very warm or cold
- Paleness
- Fatigue
- Dizziness
- Blurred vision
- Diarrhea
- Fever (rare)

Most migraines last about 4 hours although severe ones can last up to a week. The frequency of migraines varies widely among individuals. It is common for a migraine sufferer to get 2-4 headaches per month. Some people, however, may get headaches every few days, while others only get a migraine once or twice a year.

How Are Migraines Treated?

There is no cure for migraines. However, there are many drugs available to treat or even prevent some migraines. Some people may also reduce the frequency of migraines by identifying and avoiding triggers that lead to the migraine such as drinking red wine or getting too little sleep (see the triggers above).

- **Pain relief.** Over-the-counter drugs are often effective pain relievers for some people with migraines. The main ingredients in pain-relieving medications are ibuprofen (for example, Motrin), aspirin, acetaminophen (Tylenol), and caffeine. Be cautious when taking over-the-counter pain-relieving medications because sometimes they can contribute to a headache, or their overuse can cause rebound headaches or a dependency problem. If you are taking any over-the-counter pain medications more than three times a week or daily, it's time to see your doctor. He or she can suggest prescription medications that may be more effective.
- **Anti-nausea drugs.** Your doctor can prescribe medication to relieve the nausea that often accompanies migraines.
- **Abortive medicines (stop migraines).** There are some special medications that if used at the first sign of a migraine, may stop the process that causes the headache pain. These medications can also stop the headache pain itself. By stopping the headache process, these drugs help prevent the symptoms of migraines, including pain, nausea, light-sensitivity, etc. The medicine works by constricting the blood vessels, bringing them back to normal, and relieving the throbbing pain.
- **Preventive (prophylactic) medications.** When the headaches are severe, occur more than two or three times a month and are significantly interfering with normal activities, your doctor may prescribe preventive medication. Preventive medications reduce the frequency and severity of the headaches and are generally taken on a regular, daily basis.
- **Biofeedback.** Biofeedback helps people learn to recognize stressful situations that trigger migraines. If the migraine begins slowly, many people can use biofeedback to stop the attack before it becomes full blown.

All of these treatments should be used under the direction of a headache specialist or doctor familiar with migraine treatments. As with any medication, it is important to carefully follow the label instructions and your doctor's advice.