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The Disabling Effect of Migraines

My son asked me the other day, "Mom, what is the worst pain you have ever experienced?" I had to really think about this answer as I have been in three car accidents, had back surgery, dislocated a shoulder, tore a hamstring, and fallen off of a galloping horse and got whiplash. Which one was the worst? And then it hit me: "migraines".

If you are someone who suffers from migraines, you can likely relate. Migraines are a disabling health condition, and if you have never experienced one, it may be hard to understand how a migraine differs from a regular headache.

While other types of headaches can be painful or disabling, they do differ from migraines. Other types of headaches include:

- **Tension headaches:** This is the most common type of headache. The pain from tension headaches tends to spread across both sides of the head, often starting at the back and creeping forward. Causes may include eyestrain, stress, and hunger, and these can be chronic.
- **Sinus headaches:** These are caused by swelling in the sinus passages, resulting in pain behind the cheeks, nose, and eyes. The pain is often at its worst when you wake up in the morning, and when you bend forward.
- **Cluster headaches:** These headaches are very painful – even more so than a migraine. They occur in "clusters", meaning they happen daily, usually at the same time, and sometimes up to several times a day for months. They are a result of dilation in the blood vessels of the brain due to a release of serotonin and histamines, an effect that is similar to a migraine. They can be caused by physical exertion, bright lights, or even altitude. Cluster headaches are relatively rare, affecting

only 0.1% of the population, and are more commonly seen in men. Meanwhile, migraines affect about 12% of the population, and are more commonly seen in women.

What is a Migraine?

A migraine is a neurological disorder, believed to result from a combination of genetic, environmental, and neurological factors. Research indicates that these headaches are linked to abnormal brain activity that affects nerve signals, chemicals, and blood vessels within the brain. The diagnosis of a migraine is based on symptoms and the exclusion of other possible causes for headaches.

Migraines do not show up on CT or MRI scans, but they are a real electrical and neurochemical phenomenon. Research suggests that migraine pain occurs due to waves of activity by groups of excitable brain cells. This activity releases chemicals, such as serotonin, which narrow the blood vessels in the brain and throughout the body.

When serotonin or estrogen levels change, this leads to a migraine in some people. While serotonin levels may affect both sexes, fluctuating estrogen levels affect women only. This could be why, according to the World Health Organization, migraines affect 6-8% of men and 15-18% of women.

Since migraines are due to neurological rather than psychological reasons, stress and depression are not the cause of migraines. Having anxiety and depression, however, are linked, and can contribute to the frequency and intensity of migraines. These mental conditions involve similar nerve pathways and chemicals that play a role when someone has a migraine.

A migraine episode may occur in four different phases, though not everyone experiences every phase. The phases include:

- **Prodrome:** The first phase begins up to 24 hours before the sufferer experiences a headache. Symptoms could include mood changes, difficulty concentrating, trouble sleeping, fatigue, nausea, increased hunger and thirst, or frequent urination.
- **Aura:** An aura is a group of sensory, motor and/or speech symptoms that act as a foreshadowing of a migraine attack. This phase may last from five to 60 minutes, occurs before the headache, and may continue during the headache. Auras can affect a person's vision, touch, or speech, and can include blurred vision, blind spots that expand over time, numbness in the arms, ringing in the ears, and slurred or jumbled speech. Not everyone who suffers from migraines experiences auras.

- **Headache:** A migraine headache lasts from four to 72 hours. When the pain hits, it may range from mild to debilitating. Oddly enough, some people can have a migraine without developing a headache. Physical activity and exposure to light, sound, and smells may worsen the pain. Other symptoms include nausea and vomiting, dizziness, and extreme fatigue.
- **Postdrome:** The postdrome stage usually lasts from a few hours to 48 hours. The migraine sufferer may feel symptoms similar to an alcohol-induced hangover, including exhaustion, nausea, difficulty concentrating, a light headache, light and sound sensitivity, and dizziness.

What Causes a Migraine?

There does not seem to be a single cause that results in a migraine. Furthermore, what triggers a migraine will vary between individuals. Common triggers can include:

- **Gender and hormonal shifts:** Changes in hormones, including during the menstrual cycle, can be a factor for women.
- **Allergies:** Allergies cause irritation and inflammation in the body; since migraines are associated with inflammation of the blood vessels, allergies may be a trigger.
- **Family history and genetics:** Scientists have discovered a genetic mutation that is common in folks with typical migraines. In fact, up to 80% of people with migraines have a first-degree biological relative with the condition.
- **Environmental:** This category includes a wide range of triggers:
 - Changes in weather (such as barometric changes)
 - Certain medications
 - Too much physical activity (overexertion)
 - Missing a meal
 - Foods such as aged cheese, alcohol, or chocolate
 - Additives like nitrates and MSG, processed foods, fermented or pickled foods.
 - Addictive substances like caffeine or tobacco
 - Exposure to bright lights, loud noises, or strong odours

Treatment for Migraines

While there is no specific cure for migraines, medication and lifestyle changes can help treat your symptoms and prevent future episodes. Treatments include:

- Over-the-counter (OTC) pain medicines like acetaminophen, ibuprofen, and aspirin can be helpful for mild migraines. Some people get relief from OTC medicines that also have caffeine.
- Melatonin may help prevent migraines.
- Prescription medications may be necessary for those who regularly experience moderate to severe migraines. Medications range from blood pressure medication, to antidepressants, to anti-seizure medication, to Botox injections. There are two categories of medications available:
 - Medications to stop migraines that are taken at the first sign of a migraine.
 - Medications to prevent migraines if you experience severe symptoms that interfere with your routine, or have frequent migraines. These medications can reduce how often and how severely you are affected by migraines. You can take these medications as directed, usually on a daily basis.

[Here is an article](#) from Harvard Medical School on medications for migraines.

- Avoiding trigger foods. Health practitioners may have patients track their migraines in a journal, including details about the foods eaten or activities they were doing when the migraine happened, how they felt, and how long the migraine lasted. There are even phone apps to help track migraines, like this one from [Migraine Canada](#).
- Taking supplements and vitamins such as vitamin B2, magnesium, feverfew, butterbur, or co-enzyme Q-10. [Click here](#) for more info.
- Acupuncture treatments can result in pain relief, and can provide improved circulation and muscle relaxation.
- Lifestyle changes, including:
 - Exercising regularly
 - Making dietary changes to avoid trigger foods
 - Improving sleep habits
 - Practicing relaxation techniques, like yoga and meditation

Coping When the Migraine Hits!

There are certain things an individual can do to feel better when a migraine attacks, including:

- Resting in a dark, quiet, cool room.
- Applying a cold or warm compress or washcloth to the forehead or behind the neck.

- Massaging the scalp.
- Applying pressure to the temples in a circular motion.
- Keeping in a calm state and/or meditating.
- Trying to sleep.
- Using essential oils such as peppermint, rosemary, lavender, chamomile, and eucalyptus. Mix these with a “carrier oil”, and keep it light so that the strong scent doesn’t make the headache worse. Some essential oil vendors have specific roll-ons for headaches.

Always speak to your physician before incorporating any new intervention for your migraines.

Being a migraine sufferer is certainly no fun. However, research has come a long way, leading to a greater understanding of migraines and helping to inform how to best treat them. I hope that you will find something in this article that will help to reduce the impact of your next migraine.

For more information and to keep up with research and resources for migraine sufferers, [you can click on this link.](#)

A handwritten signature in black ink, appearing to read 'R. Morandini', with a stylized flourish at the end.

Rochelle Morandini

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If you would like to contribute or have ideas about what you would like to see in the ReFresh series, we would love to hear from you: contact rochelle@bcpvpa.bc.ca.