
MIGRAINE HEADACHES: TREATMENT PLAN

General Information

Migraine Headaches are a painful and often disabling condition. These headaches occur most commonly in women. People who experience migraines often describe periods of intense, pulsating pain. Commonly, these headaches may be on one side of the head. Nausea and vomiting can be present. The headache may be preceded by a “prodrome” that may include such symptoms as sensitivity to light, sounds, or odors; feeling tired or yawning; experiencing food cravings or a loss of appetite; and mood changes. Others may experience an “aura” that is characterized by blind spots that may be surrounded by glittering, zig-zag lines, which slowly move across their visual field. Others may see flashes of light. Additional symptoms may include a feeling of numbness and tingling in the arm or face, or a feeling of heaviness in the legs without a loss of muscle strength. Less commonly, language difficulties may be a part of an aura.

Migraine Headaches may last from four to 72 hours. After the headache passes, patients may be left feeling fatigued, irritable, and may have appetite changes. Patients often find it difficult to manage their daily obligations when suffering an episode of migraine.

There are several different types of Migraine Headaches. The most commonly occurring type is called a Common Migraine and is not associated with an aura. Migraine with an aura is the “Classic” Migraine. Migraines may become chronic, or can be associated with the overuse of pain medications.

Commonly Co-Occurring Conditions

Migraine Headaches may accompany other medical conditions and your physician will want to evaluate your general health to rule out any other possible cause of this type of headache.

Anxiety and depression can be triggering, exacerbating, or maintaining conditions associated with migraine. Head trauma can be associated as well. Migraines are common in those with seizure disorders. Additionally, other medical conditions – and any medications that may be prescribed to manage them – may influence the treatment options for the management of Migraine Headaches.

What Causes Migraine Headaches?

Migraines appear to be a complex disorder and the cause is not well understood. At one time migraines were believed to be a neurovascular disorder, but additional evidence suggests that other factors may be at play including abnormal activity in the brain, inflammatory activity, and chemical signals within the brain. Genetics may play an important role, too. Approximately 70% of those with migraines have close relatives with migraine headaches.

There are many described precipitants of migraines, although none are proven in large scale studies. Some of the more common include hormonal changes (such as menstruation or ovulation), stress, lack of sleep, chemical triggers (such as perfumes or pollution), exposure to environmental triggers (fluorescent lights, bright lights), weather changes, foods and additives (MSG, foods high in tyramine-aged cheeses, artificial sweeteners), cold (ice cream headache), and medications (nitroglycerin, ranitidine).

Testing & Assessments

Innovative Testing

Neurological Examination: Your neurologist will need to take a thorough history of your headaches and the pattern of your episodes. A full neurologic exam will need to be completed. If you have other physical conditions that may play a role in your presentation, you may need to be seen by your Primary Care Physician (PCP).

Lab Work: Blood tests may be needed to rule out other medical conditions.

Other Testing: Depending on your symptoms, your neurologist may need you to undergo additional testing which might include ECG, EEG, or imaging. These are especially necessary if your headache pattern has changed, or is a new presentation in an individual over age 50, or is accompanied by vertigo, fainting, muscle weakness, speech problems, or an abnormal neurological exam.

Developing Your Treatment Plan

Not every patient with migraine can be treated the same. You and your physician will need to review your general health status, the medications you take, your personal habits, functional impairments, and reproductive plans before determining the best option for you. Some patients may need to try several strategies or rely on a combination of interventions before achieving better control of migraines. Below are some of the treatment options that may be beneficial in managing your migraines.

Treatment Options

Your provider will work with you to determine which treatment is best for you at this time. It will be important for you to work with your provider as you undertake a new treatment plan.

Therapy



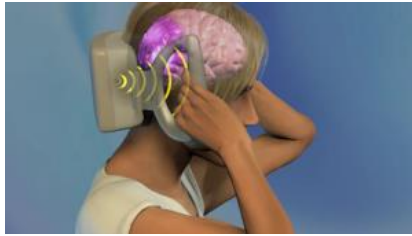
- Anxiety and stress can exacerbate migraines. Learning good stress management skills is highly encouraged.
- Cognitive Behavioral Therapy (CBT) is an evidence-based treatment that can be very useful in decreasing anxiety and depression, improving stress management. Classes are available in our office.
- Biofeedback, a technique that uses sensors placed on the body can help you learn to control (calm) some of your body's functions.

Medications

- Medications may be used to treat an acute migraine or as a preventative medication to decrease or eliminate new headaches.
 - Acute Treatments: NSAIDs (aspirin, ibuprofen, naproxen), acetaminophen, anti-nausea medications, selective serotonin receptor agonists (triptans)
 - Preventative Treatments: Antiepileptic medications, beta blockers, tricyclic antidepressants, SSRI antidepressants, triptans, botulinum toxin, or calcitonin gene-related peptides (CGRP) inhibitors may be appropriate when the patient has failed to respond to or tolerate acute treatments, when the headaches interfere with daily function, or when the headaches occur very frequently



Alternative Options



- The FDA has approved the Cerena TMS device. The patient places this on the back of their head at the onset of a headache and the machine delivers a magnetic pulse.
- The Cefaly device delivers a direct current to the forehead area during a migraine episode.



Achieving Better Outcomes

What You Can Do

- Identify the triggers that cause you to have a headache and try to eliminate these.
- You may need to avoid certain foods that may be triggering agents. Common ones include processed meats that contain nitrates and aged cheeses.
- Alcohol is a common trigger and you may want to keep track of your intake and how this affects the frequency of your headaches. Red wine may be a trigger for some patients.
- Get adequate sleep; lack of sleep is a common trigger.
- Identify environmental triggers. Change the lighting in your home or office if necessary. Avoid using products that you're sensitive to (perfumes, aftershave, chemicals).
- Manage your stress.
- Stop smoking

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