

A migraine is a recurrent headache that strikes after, or along with sensory disturbances known as aura. These disturbances can include flashes of light, blind spots and other vision changes, or tingling in your hand or face.

A migraine can last between 2 to 48 hours (sometimes longer), and usually affects one side of the head, comes on gradually (over 15 to 30 minutes), feels pulsating, is of moderate or severe intensity, and can be aggravated by routine physical activity. Nausea, vomiting, pulsating or throbbing pain, along with a hypersensitivity to light and noise are also common symptoms. Migraines affect around one in 10 people. They are three times more common in females and tend to affect young people who are otherwise healthy. Most people who get migraines will have a family member with the same problem.

Migraine is thought to be a neurovascular pain syndrome ie. involving nerves and blood vessels where electrical activity in the nerves in the brain stimulate the surrounding blood vessels to release painful inflammatory chemicals, but very little is actually known about it.

The pain is often so bad that it makes it very hard to drive or concentrate.

An aura typically consists of a combination of disturbances:

- ① **Visual** - including seeing spots and lights or being aware of blind spots
- ② **Sensory** - include tingling and pins and needles or numbness
- ③ **Movement problems** - include reduced coordination, dizziness and speech disturbance.

These symptoms will be completely reversible and tend to happen up to 60 minutes before the onset of a migraine, almost like a warning sign.

HOW IS MIGRAINE DIAGNOSED?

Everyone presents differently and may have features of other headache types which can make diagnosis difficult. Most headaches can be diagnosed and classified according to your history and an examination by a healthcare practitioner. There is no one specific test, scan or examination that can confirm or differentiate migraine from another headache type. In some cases you may be referred to a neurologist who

Migraine

specialises in migraines, who can help with medication prescription.

WHAT ARE TRIGGERS FOR MIGRAINES?

There are many causes or 'triggers' for migraines and being able to identify them in yourself will go a long way to keeping your migraine episodes at bay. Often keeping a diary of what you have done, or eaten and drunk during the day will help you to identify any patterns or triggers preceding a migraine which you can subsequently avoid.

Triggers may include:

- Vasodilators (some heart medication like calcium channel blockers, aspirin and nitroglycerine)
- Skipping meals
- Weather changes
- Dehydration or insufficient clear fluid (water) intake
- Sleep deprivation
- Stress
- Excessive afferent stimuli (eg. flashing lights, strong odours)
- History of head trauma, underlying neck problem

- Hormonal changes, monthly cycle, contraception, menopause
- Certain foods – chocolate, caffeine, aspartame (artificial sweetener), sugar, processed meats, foods containing lots of colorants and preservatives like MSG
- Genetics – there is a family history of migraines in about 60% of cases, suggesting a hereditary factor exists.

HOW CAN PHYSICAL THERAPY HELP MIGRAINES?

Migraines are individual, you may present with a few or all of the above symptoms, with or without an aura. A "copy and paste" principal for treatment shouldn't be applied, because what works for one person, may not work for you. The best thing is to contact your healthcare practitioner such as a doctor or physical therapist, to find what works best for you.

When considering treatment most people believe migraines are only managed through medication and avoidance of triggers. Yes, medication does play a vital role in migraine management, however there are many benefits from physical therapy interventions.

With migraines, muscles around your head and neck can become very tender and present with spasm. Combined with any stress or underlying neck pain, physical therapy may be key to reducing the pain and intensity of your migraine episode as well as decreasing the frequency and duration of each episode.

- ① **Manual therapy**, including massage has been shown to be as effective as some medications in reducing the pain and intensity of a migraine. Regular massage (weekly massage treatment) has also been shown to be a good preventative measure for migraine management substantially reducing the frequency of migraines.
- ② **Cold therapy** in the form of gel ice packs or frozen neck wraps can be applied at the onset of a migraine, targeting the carotid arteries at the

front of the neck, and can significantly reduce the pain.

③ **Exercise therapy** has been shown to be integral in the management of migraines. In some people activity can be a trigger for their migraines, and avoiding physical activity during a migraine is normally necessary. But regular exercise has been proven to reduce the intensity and frequency of migraines, so if you can gradually build up your level of physical activity under the guidance of your physical therapist, this can help. In addition, specific neck exercises and stretches can be used to reduce tension and stress between episodes and even during an attack.

④ **Acupuncture** has been shown to be effective in reducing pain intensity with migraines. Over the long term regular treatment has shown a decrease in consumption of medication necessary to manage the migraine.

⑤ **Relaxation techniques** - this is a little more controversial, because it's difficult to calculate its efficacy clinically, but each person is different and this may be beneficial to you. Your physical therapist can teach you relaxation and deep breathing techniques that may be used during or preceding a migraine to reduce its intensity and improve your coping mechanism during an attack.

better the efficacy, don't leave it and wait to see how you go. Take medication as prescribed as soon as you know the migraine is coming on, and start your home routine to lessen the intensity and hopefully the duration of the migraine.

Other tips that may reduce the frequency or intensity of your migraine include:

- Wearing sunglasses regularly, possibly transitional glasses that can reduce the glare even indoors.
- When commuting wear ear plugs or listen to relaxing music to drown out loud noises that may be triggers.
- Carry or wear scents that appeal to you and ones you can inhale should you be overcome with an adverse smell – lavender, mint (essential oils) or coffee beans may appeal to you.
- Daily schedule and regular sleep routine can help regulate your migraines
- Stress or anxiety management – know what you can cope with at work and home and plan accordingly. This may include using tools that work for you to relieve stress including exercise, regular

massage, reflexology, meditation or a yoga class, and mindfulness.

- Reduce screen glare – try and cut down screen time where possible. Wear rose-tinted glasses (and no it's not a joke!) to reduce the blue tint from the screen which can be harsh and is thought to be a possible migraine trigger. Purchase an anti-blue light screen protector.
- 70% of individuals with PTSD, post-traumatic stress disorder, suffer from migraines. Advice and counselling may improve the symptoms of both conditions.
- Join a local headache support group if one is available.

In people who suffer frequent (more than 15) migraines a month, 25% have depression, and up to 50% have anxiety. Or is it that the anxiety and depression bring on the migraine? A case of the chicken or the egg? Either way migraines are a serious condition that can affect your daily life and so the more you can do to mitigate the symptoms and make surviving them a bit easier, the better.

WHAT CAN YOU DO DAY TO DAY?

There are some simple ideas you can implement at home which can help you manage a migraine:

- Lie quietly in a cool dark room
- Place a cold flannel or cold pack on your forehead or neck
- Do not drink tea, coffee, orange juice or alcohol
- Avoid moving around too much
- Use meditation and relaxation techniques
- Listen to quiet soothing music
- Do not read or watch TV, avoid any screen time
- Do not drive
- Some people find relief from 'sleeping off' an attack
- Take medication as directed – the earlier you start treatment the

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