CONQUERING HEADACHES & MIGRAINES

YOUR STEP-BY-STEP GUIDE TO REDUCING OR ELIMINATING HEADACHE & MIGRAINES

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Individual results may vary.
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CHAPTER 1: HEADACHE FUNDAMENTALS

A headache is perhaps the most common ailment afflicting the general population today. While this may come as no surprise, headaches are a frequently shrugged-off issue that is taken as a naturally occurring part of life. After all, most headaches are able to be self-diagnosed, and why see a doctor about something that a simple pain medication such as aspirin could fix?

However, headaches are not always as simple as a dull ache, and can range from manageable to debilitating, causing sufferers to be confined to a dark and quiet room. The good news is, even with these severe symptoms, it is not always necessary to see a physician regarding a headache, and simply being aware of the triggering factors and natural remedies can serve to keep them away, allowing for you to function normally.

A headache is defined by the Merriam-Webster Dictionary as “an ache or pain in the head.” This serves as a rather broad definition of the symptoms felt by roughly 50% of the world population, according to the World Health Organization.\(^1\) In order to examine this further, take into consideration the various types of headaches. These chiefly include:
These are the headaches that will be studied in the later chapters of this book, and serve as the chief sub-types of headaches. Unfortunately, doctors are not always sure what causes a headache, and since there are over 150 different types of headache, there are naturally a huge range of triggering events and symptoms that are at once unique to a particular type, and may be categorized within a sub-type.

So how does one go about treating such an irritating and persistent ailment? Well, it entirely depends on the type of headache. Of course, some do not require any treatment at all and merely a bit of caution, such as the infamous “brain freeze” headache, also known as the “ice cream” headache. Although often treated as a cautionary tale of eating or drinking a cold substance too quickly, it actually does induce an actual headache that has been dubbed the “cold stimulus headache” in the International Classification of Headache Disorders (3rd Edition).

Many doctors believe that there is a link between “brain freeze” headache and migraine, although the only thing that seems to be absolutely certain is that these headaches involve the brain being shocked by cold stimuli, and then rapidly attempting to warm back up, causing nerve pain. What the link is between the “brain freeze” headache and migraine, however, is still up for some debate. Thus, “brain freeze” headache is a perfect example of how an ailment so common the world over might still be understood so little by the medical community. It is for this reason that the most important step towards conquering a headache is to discover its root cause.

Therefore, the first step to recovery is to identify the cause of the headache. Headaches such as tension headaches may be resolved with the help of a massage, while others will require relaxation or even a change in diet. While these will be discussed further later in the book, it is important to note that not all headaches can be cured with a holistic approach. If a headache is constant then consultation with a medical professional may be necessary. A doctor may recommend a series of well-known tests including:

- Computed Tomography (CT) scan
- Magnetic Resonance Imaging (MRI)
The first of these involves only a little preparation on the part of the patient, including informing the doctor of any existing medical conditions and abstaining from food and drink a few hours before the scan. Happily, the CT scan is quick, easy, and non-invasive. It can reveal any number of problems with the brain, including brain damage and internal bleeding. The MRI scan is used similarly, but differs in that it uses magnets in order to detect brain abnormalities.

Unlike a CT scan, the MRI may require the patient to be injected with a dye that will allow doctors to see the differences within the patient’s brain more accurately. Hopefully, getting either of these scans will help patients suffering from debilitating headaches to discover if there are any abnormalities in the brain, such as a growth that may be causing the pain. Some conditions that these scans may detect are internal bleeding, hormonal disorders, blood clots, and disease.

More often than not though, serious conditions such as these are not the cause of headache so much as normal everyday practices, such as stress levels and diet. In these cases, it is up to the patient to discover the source of their problem and takes steps to amend the issue. This may require a period of trial and error, in which the sufferer will experiment by eliminating certain practices and/or products from his or her life individually, in order to determine the exact problem.

If this is successful, the patient will be free of headaches with a moderately altered lifestyle. While these natural headache triggers may differ from person to person, researchers have determined that there are some food and drink more likely to bring on a headache than others, particularly when paired with other symptoms. Some of those items include:

While all of these have been noted as triggers for headache, they are by no means the hard and fast rules for every individual. Oftentimes, a particular substance will only cause a headache when paired with another outlying factor, such as hormone levels. Despite this, it is advised that those attempting to prevent their headaches take note of the foods consumed prior to the headache, and attempt to find a commonality.
However, if the headache persists, then after having rooted out the cause or triggers of the headache, such as a particular smell, patients should discuss their findings with a doctor. Because a headache can be an indication of a severe problem, readers should be aware of other important signals of when to consult a physician, including:

- Difficulty speaking, walking, or talking
- Confusion
- Nausea
- High fever
- Fainting

It is important to be as thorough as possible when speaking to a physician about symptoms, detailing all your knowledge of symptoms, what triggers and helps headaches, how long they last for, and how long you have been dealing with them. Along with a stroke and brain injury, a long-lasting headache accompanied by other symptoms may be a result of temporal arteritis, which is the inflammation or damage of blood vessels, particularly in the temporal area of the brain. If left untreated, temporal arteritis can prove to be chronic, if not fatal. This is just one example of why it is important to seek professional help if a headache is believed to be out of the ordinary, or is accompanied by extraordinary symptoms.

Of course, when suffering from a headache, it can be difficult to keep in mind all of the information that needs to be relayed to a doctor. For this reason, it is highly recommended that, once the patient has recognized there is a problem, that he or she begin a headache log, also known as a headache diary. This log should include the date and time of the headache, what the patient ate and drank beforehand, how much sleep he or she received the night before, pain intensity and location, and any other outside factors, such as stress level and currently prescribed medications.

In addition to this, patients should list the symptoms. Having this log on hand when meeting with a doctor will prove immensely useful to the eventual managing, and hopefully reduced frequency, of the patient’s headaches. A headache obviously does not have to be a part of the a person's daily life. With a little bit of awareness and proactivity on behalf of the afflicted, headaches can largely be eradicated from life, resulting in a much happier and productive society. Read on to further discover the anatomy of headaches and how individuals can learn to improve their quality of life by ridding themselves of the unnecessary evil of headache.
CHAPTER 2: A TENSION HEADACHE

A tension headache is among the most common headache that goes largely untreated. Fortunately, the pain is usually rated as only moderate, and thus, those who are afflicted with this particular brand of headache can usually continue with their normal daily routine, without too much trouble.

However, the frequency and low pain levels that accompany a tension headache causes many to believe that it is a daily part of life, when in fact it can be avoided entirely. Through self-awareness and proactive steps, it is possible to eliminate almost all of them from a patient’s life.

A tension headache is often described as feeling that muscles are constricting in the head, giving the feeling that one’s head is wrapped in an elastic band. Usually, this pain begins at the back of the head and slowly travels forward. A feeling of tightness and/or tenderness may occur on the front, back, or temporal parts of the skull. This type of headache can be split into two categories: chronic and episodic.
If an individual is experiencing a tension headache for more than 15 days out of the month, it is labeled as chronic, while anything less is episodic. In either case, dealing with a tension headache can prove to be distracting and painful, with some symptoms including a lack of sleep and muscle pain in the head, neck and shoulders. While it is possible to deal with episodic a tension headache without taking any steps towards curing it, it does pose a quality of life problem.

In order to take the first steps towards ridding the body of a tension headache, it is necessary to identify the individual’s symptoms. These may include:

- A dull ache or tight pain in the head
- Tension in the head, neck, or shoulders
- Trouble sleeping
- Irritability
- Difficulty focusing

If an individual lists muscle tension in the head, neck, or shoulders as one of his or her symptoms, further examinations should be made regarding what is causing the tension. Sometimes it is not the tension itself that causes the muscle pain, but rather stress or bad posture. If this is the case, the individual should make an effort to relax himself or herself, whether that is through massages, meditation, or therapy.

Another potential cause for a tension headache is stiff and/or tight jaw joints. According to collaborative research conducted by the University of Buffalo, the University of Minnesota, and the University of Washington, many of the symptoms of tension-type headache (TTH) and temporomandibular disorders (TMD) overlap. It is possible then that some people who are experiencing a tension headache may also be suffering from TMD, which is causing and aggravating the headaches.

It is important for those who suspect this to determine when they are experiencing TMD, as it sometimes manifests itself in jaw locking and teeth grinding during sleep. Readers should be aware of whether they wake in the morning with tight or stiff jaw joints, and then consult a doctor to see if TMD is the source of their frequent a tension headaches.
Other potential causes of a tension headache are a lack of rest, hunger, low iron levels, or, as stated before, depression, stress, or poor posture. These are all obviously easily avoided in most cases; thus a tension headache can be avoided by getting enough rest every night, keeping stress levels low, eating well, and improving posture. In the case of low iron levels, individuals should consult a doctor to see if anemia may be the cause, and explore the possibilities of iron supplements, in addition to eating iron-rich foods, such as dark leafy greens and dried fruits.

In the case of depression, it may be necessary to acquire an anti-depressant prescription, if the holistic approaches are not proving affective or if the patient is not interested in pursuing that particular avenue.

Other ways to prevent a tension headache include relaxation strategies, such as a massage, yoga (as opposed to stress-inducing exercise), and meditation. Additionally, trigger point injections can prove helpful, in which injections are made at muscle trigger points that form into painful knots when unable to relax. In favor of these, a physician may prescribe medications such as muscle relaxants, pain relievers, tricyclic antidepressants, and anticonvulsants. The latter two have proven helpful in the past for relieving a tension headache, and may be used even if the patient is not experiencing depression or seizures.

Of course, it would be much better if a tension headache could be prevented altogether. This can be achieved a majority of the time through a balance of lifestyle changes, such as eliminating caffeine and incorporating low-stress exercise routines, and medication. One such popular medication is a muscle relaxant, because it attacks the source of the headache. Some of the more popular brands are:

- Cyclobenzaprine
- Orphenadrine citrate
- Baclofen
- Carisoprodol
- Metaxalone

Patients should speak with their doctors about the best option for their own personalized situation. However the appeal of some of these medications is that, unlike some other muscle relaxants, they do not allow the body to become tolerant, and thus do not require larger doses in order to do their job.

A tension headache may seem like a natural part of life, but there is no reason why it needs to be. With the proper approach, a tension headache can become non-existent, offering huge relief and abundant time for the activities that make life enjoyable.
CHAPTER 3: SINUS HEADACHE

Another common complaint, especially of those who live in highly polluted areas like big cities, is sinus headache, which involves extreme pressure in the sinuses. The sinus cavities are located along the sides of the nose and in the upper inside corners of the eyes. This common and painful headache may be brought on by sickness, such as the common cold, the flu or allergies.

What causes a headache is when the sinuses are filled up with excess fluid, causing inflammation. The job of the sinuses is to secrete mucus, and so when the sinuses become blocked up, that mucus causes an immense amount of pressure along the face, giving the sufferer a sinus headache.

Additionally, a block up of mucus keeps air from flowing through sinuses. While the sinuses are inflamed, any sudden movements may be painful, and the swelling in the sinus cavities may make the face painful to the touch.
As previously stated, a sinus headache most often accompanies some other ailment, like a cold or allergies. Sinus headache is usually simple to diagnose, as the pressure surrounding the nose and eyes is easily noticed and identified by the afflicted. Prevention measures include strict sanitary routines, including frequent hand washing and attempting to avoid those who are sick.

It is also advisable to avoid allergens, which admittedly can be tricky when living in a polluted environment. It will, however, help immensely to avoid smoke, particularly cigarette smoke. Consequently, it may be helpful to purchase a humidifier in order to breathe clean air inside, as it will help to clear out the sinuses.

If the patient has contracted a sinus headache, then most over-the-counter solutions should work fine, since a sinus headache is most often a fairly short lived one in which the sinuses become clear after the body has gotten over a cold or allergic reactions. In most cases, taking allergy medicine will work or in the case of a cold, it may be wise to attempt draining the sinuses with a netty pot, in which water is poured into one nostril in order to drain the mucus out of the other. It is also beneficial for those sufferers to drink plenty of fluids in order to get over their cold, and thus empty out the sinuses, getting rid of the headache. Patients who are unsure how to best handle their sinus headache should consult a doctor.

There are of course occasions in which a sinus headache is not what it seems to be. As with a tension headache, those who believe they have a sinus headache should be aware of their other symptoms. If the headache is coupled with a fever, or if over-the-counter medication fails to relieve inflammation, sufferers should speak with their physician about other potential causes of sinus pain.

Luckily, seeing a doctor is not often necessary in the case of sinus headache, as opposed to an infection. If a sinus headache is suspected, determine the root cause of the infection and treat it with either natural remedies or medications. Either way, it should not be long before the sinuses are clear and the individual is breathing easy and freely again.
CHAPTER 4: CHRONIC HEADACHE

Earlier when discussing a tension headaches, it was mentioned that a headache occurring more than fifteen days out of the month is classified as chronic. While only affecting a limited portion of the population, chronic headaches are extremely painful and can take a great toll on quality of life, at times becoming debilitating. Unlike the other types of headaches discussed in this book, the term chronic headache can be applied to various individual types of headaches, including tension, cluster, and migraines.

Due to the umbrella nature of chronic headaches, symptoms may include any number of things, including the telltale stiff neck and shoulders of a tension-type headache, along with the intense pain of a migraine. If the headache lasts for four hours or more, then it is known as long-lasting, an important point that needs to be mentioned to a doctor, if an individual afflicted with the condition decides to see one. It would not be unusual for a chronic headache to become so intense that an individual seeks out professional medical assistance. In this case, it is likely that the patient will be put on a new lifestyle regimen, and the headache diary mentioned in Chapter 1 would be used as a guide to form a new diet.
However, a lifestyle change will take time to become effective and in the meanwhile, the patient is suffering daily from the vicious symptoms of chronic headaches. Thus, the patient’s physician may prescribe medication to help deal with the headaches. However, it is this prescription that sometimes causes another specific type of headache called medication-overuse headache (MOH).

This involves three main factors; that of the original headache, the pain medication used to ward off the headache, and the rebound headache that occurs as a result of the medication wearing off. This brutal cycle often results in chronic headaches that can become constant. While it may seem that it would be simple to merely cease the use of medication and cure the original ailment holistically, this particular issue often requires the use of other medications and therapy in order to recover, and thus necessitates the attention of a doctor.

In order to relieve a chronic headache, users will most likely need to go on medication. However, with the risk of MOH, it is obviously paramount for users to only use the prescribed amount of medication. If that particular amount is not working, then the patient will need to immediately contact his or her physician in order to work out a new medication plan, both to relieve the pain and to avoid MOH.

If, however, the patient is already suffering from MOH, then they will need to end their reliance upon the painkillers. Whether this is done “cold turkey”, or slowly with the supplementation of other painkillers, is up to the patient and his or her physician. Unfortunately, the period of transition may put the patient’s pain threshold to the test. However, with a combination of medication and lifestyle changes, managing chronic headaches should become possible.

A brief solution that is worth discussing is that of botulinum toxin type A, also known as botox, which is a protein that has proven to help in dealing with the pain of chronic migraine. Although experiments have not shown that use of botulinum toxin reduces the number of chronic migraines to episodic levels, it does help alleviate pains and thus may be a good alternative to traditional medication. Preventing chronic headaches is very similar to preventing other forms, in that it requires a lifestyle balance of a healthy diet where no meals are skipped, low-intensity exercise such as yoga or walking is practiced, and stress levels are kept low. In order to stay relaxed, readers should be sure to get enough sleep each night, stay away from the caffeine that naturally accelerates heart rate, and keep from having too much on one plate.
Those who are often overwhelmed by a busy schedule and multiple obligations, in addition to exercising every day and eating a poor diet, are ideal candidates for high levels of stress, and thus an agonizing headache.

Of course, determining the root cause of a chronic headache is key to treating it. While chronic migraines are usually an organic issue, they sometimes manifest as a symptom of a larger problem, such as stress or depression. Individuals who suffer from chronic headaches will need to explore all possible reasons for their migraines, in order to take the quickest route to recovery and a manageable daily life.
Also occurring in episodic and chronic forms, cluster headaches are an as of yet incurable type of headache that some say is the most painful. Characterized by concentrated pain on one side of the face, usually behind the eye, a cluster headache can last for 45 minutes to an hour. As befitting their name, cluster headaches are cyclical. Those with episodic headaches may experience them every day at the same time for a week, and then enter a period of remission. In the worst cases of chronic cluster headache, sufferers may have as many as three, if not more, headaches a day every day. This creates enormous stress in the life of the sufferer, altering how they must go about work, family, and personal life.

The best way to prevent a cluster headache is often the same as treating them. The only statistical information that may indicate if a person will be afflicted with cluster headache is that the condition affects about 1 in 1000 people, and about six men to every woman. Additionally, cluster headaches tend to begin appearing in people ages 20 and older. However, past this there are no known trademarks indicating who will be afflicted. Thus, if an individual is diagnosed as having cluster headaches, it is advised to explore these practices suggested below in order to both prevent the oncoming headaches, and relieve the pain once they occur.
Once an individual has discovered they do suffer from cluster headaches, these medications are helpful in preventing a headache during a period of remission (if suffering from chronic cluster headaches, the patient may need to speak to a doctor regarding when to begin these treatments): Verapamil, Methysergide, and Corticosteroids. Each of these medications, along with others that have become popular in recent years, helps to relieve pain and/or increase remission time. However, they must all be taken with caution and should only be taken under the careful supervision of a doctor, since even slight overdosing can lead to serious complications.

Other preventive measures include the avoidance of certain foods, smells, and activities. Like other types of headaches, these sensitivities are largely dependent upon the individual. Some of the most commonly reported triggers are alcohol, cigarette smoke, strong scents such as gasoline and chlorine, high nitrate foods, heat, exertion, and bright lights. Those who are afflicted with cluster headaches should be aware of these and avoid them during active cluster periods, in the case of those with episode clusters and, as much as possible, all the time for those who suffer chronic cluster headaches.

For those who are already in the midst of a cluster headache, many have found it useful to inhale oxygen from an oxygen supplier. This may sound redundant, but similar to an asthma inhaler, breathing in oxygen at a specified rate for a certain amount of time can aid to either prevent or relieve a chronic cluster headache. In general, the treatment begins to work within 15-20 minutes of inhalation.

While cluster headaches are known to be the most painful of them all, surpassing even that of migraines, they are not completely unmanageable. Those afflicted should immediately seek professional guidance on how to deal with the issue since, particularly if left untreated, cluster headaches can lead to an extremely low quality of life. Hopefully, scientific advances in the research of cluster headaches will bring new hope to the afflicted, and an improvement in their day-to-day life.
CHAPTER 6: MIGRAINE HEADACHE

When a migraine headache is mentioned, it is usually synonymous with pain. The 36 million Americans who have reported having migraines\(^29\) may immediately imagine the need to be in a quiet, dark room when remembering the unpleasant headache sensation. The good news here is that migraine headaches can be managed.

The anatomical cause of a migraine is still unclear, though it is widely believed that migraines are brought on by the release of a chemical, which flows through the brain’s blood vessels and nerves, perhaps overexciting them and causing the pounding sensation migraines are known for.\(^30\) Symptoms can occur in four stages, though depending on the individual, some stages may not be present. The stages are as follows:\(^31\)
1. **Prodrome:** This means the early warning signs of an oncoming illness. In this particular case, symptoms such as constipation, and increased thirst and irritation may be precursors to a migraine. Coincidentally, mood swings and food cravings are also indicators, which women who are beginning their final stages of menstruation should be aware of.

2. **Aura:** This is a symptom that involves an individual seeing flashes, dots, or specks of light. As the aura is a sign of the nervous system malfunctioning, sufferers may also experience numbness, phantom sounds, and a temporary failure of sight.

3. **Attack:** This is when the actual migraine sets in. The individual will feel a dull ache or pounding in the brain, may be sensitive to light or loud sounds, and may experience nausea or vomiting.

4. **Post-drome:** This is the end of the attack, in which the patient may feel moody or weak. While these experiences are unpleasant, the lack of pain in the head will mean that the migraine is over, and that these symptoms are just the dregs waiting to wear off.

These attacks often prove to be hindering. Reportedly, 91% of people say that they cannot function properly while having a migraine and may need to miss work, while another 59% reported having to miss important personal events. Unsurprisingly, as hinted at with the description of overlapping symptoms of both PMS and migraine headaches, women are afflicted with migraine headache twice as often as men, due to frequent shifts in hormone levels.

Of those men and women who suffer from migraines, most are above the age of puberty and are most frequently affected between the ages of 35 and 45. Migraine attacks usually last at least 4 hours and, in extreme cases, can last up to 72 hours. These migraines can appear anywhere from only a few times a year (episodic) to more than 15 times a month (chronic). When a migraine will occur is different for each person, though triggers often have a hand in initiating an episode.

Migraine triggers cover a range of activities and products. It is best to create a list of potential triggers in a headache log so that sufferers will be able to be more aware of potential triggers in the future. Additionally, a doctor who reviews the trigger list may be able to point out patterns, such as dried fruits acting as a trigger, or high-sodium content foods that one would not normally spot on their own. Here is a short list containing some categories and items of activities, conditions, and foods to be aware of:
- Menstruation
- Medical ailments (i.e. anxiety, depression, stress, fatigue)
- High-intensity exercise
- High-sodium food or drink
- Alcohol (especially red wine and beer) and caffeine
- Medication (MOH can turn episodic migraine into chronic)
- Too much stimuli (noise, bright or flashing lights, screens, strong odors)
- Poor diet
- Dehydration
- Climate (extremely hot or humid weather, and sudden changes in temperature)

These are merely a few conditions to keep in mind. Any of these or related issues could prove to be triggers for a migraine, so as much as possible, those suffering from migraine should avoid these. Notably, there are also chemicals in foods that are widely reported by migraine sufferers to act as a trigger, although there is still a lack of definitive data to support exactly which foods trigger migraines. Barring that, below are listed some of those chemicals and the foods that may bring on a migraine headache.

Tyramine: This is an amino acid that sometimes can set off a reaction in the brain causing the blood vessels to dilate, thus beginning the pounding sensation associated with migraine headache. Tyramine is a naturally occurring component of food, but levels will rise depending on how food is stored and how long it is stored for. Foods containing tyramine that should be avoided are listed here. Readers should note that this list grows much longer when taking into account certain medications, and will need to consult with a doctor in order to get a full scope of foods that should be avoided.36 37

- Aged cheese
- Chocolate
- Cured or processed meats
- Citrus fruits
- Dried fruits
- Some other fruits (like avocado and banana)
- Olives
- Raw Onion
- Vinegar
Nitrates and Nitrites: Both of these have long been suspected to be migraine triggers. Like tyramine, nitrates contribute to the dilation of blood vessels. Vegetables often become high in nitrates/nitrites because of treated soil, while some manufacturers add them to meat for preservation. Beware of these foods that contain high levels of nitrates and nitrites.

- Processed meats (hot dogs, lunch meat, sausage, etc.)
- Some vegetables (root vegetables and those grown in nitrate-rich soil)
- Some unfiltered water (including foods made with it)

Gluten: Headaches are a common symptom of those afflicted with gluten allergies and Celiac’s Disease. For those who suffer from migraine headaches, gluten can sometimes aggravate the situation. Products that commonly include gluten are listed below, but concerned persons should always check the label of purchased foods to determine if it contains gluten.

- Pasta
- Bread
- Beer
- Flour
- Pastries

Monosodium Glutamate (MSG): This extremely popular flavor enhancer is a known migraine trigger. Foods that commonly contain MSG are

- Chinese food
- Sauce and seasoning
- Fast food
- Processed, prepared, packaged, and frozen foods

Once someone has received a migraine, they may feel a range of symptoms that were briefly highlighted in the description of the aura and attack phase of migraines. To extrapolate further, migraine symptoms may include aura, nausea, vomiting, weakness, constipation, feeling as though the head is pulsating (particularly only on one side), numbness, and dizziness. These symptoms are another important point to note when writing in a headache log.
In addition to these, there are some forms of migraine that are closely related to the most well known type. These are the migraines people usually associate with behavior or events, such as the long lasting headache of a brain injury, like a mild concussion or whiplash. These may also include the “brain freeze” migraine discussed in an earlier chapter, and thunderclap migraines, which involve a short blast of intense pain that resolves itself over an hour or span of days. This last type of migraine divides into very rare types, such as hemiplegic and basilar migraine, which both mimic similar effects of stroke with difficulty speaking and body numbness or tingling. However, these last two are part of a very rare group of migraine that affects only a very small portion of the American population.

In order to prevent a migraine from coming on, it is advised to not only avoid the foods listed above, but also to make certain lifestyle changes. However, even these may not be enough to keep the pain away, in which case sufferers may need to turn to medications and therapies that are administered daily. Here is a compilation of measures commonly undertaken to prevent migraines, with an additional list of medications that fall under each category with some, but not necessarily all, of the potential side effects.

Aspirin: Call it the old stand by, but aspirin has proved time and again its usefulness in the world of medicine. In 2012, an Italian study conducted by Dr. Lidia T. Savi resulted in at least a 50% decrease in aura migraine headaches for 50% of the study participants who took 300 mg of aspirin a day. For this preventative measure, it is best to take traditional aspirin, although sufferers need to speak with a doctor beforehand to determine whether aspirin is a safe option. Side effects may include confusion, breathing problems, rash, fatigue, nausea, vomiting, headache, diarrhea/constipation, and heartburn.

Anticonvulsants: This was mentioned earlier as a means for preventing a tension headache, although the original intention behind these drugs was to prevent seizures. In small doses, these can help with preventing migraines, but depending upon the specific prescription, may cause various side effects. Popular anticonvulsants are

- **Topiramate**: In one study, a group of 35 patients who were given topiramate experienced a median 33% reduction in migraine headaches. Side effects include fatigue, dizziness, diarrhea, nervousness, and sensory distortion.

- **Tiagabine**: In a 1999 study, researchers found that this medication gave some patients remission relief and over 75% of those remaining patients who participated in the study had a 50% reduction in migraine headaches. Side effects include confusion, depression, nausea, urinary problems, anger, and insomnia.
Antidepressants: Like anticonvulsants, tricyclic antidepressants have proven to have uses other than scientists’ original intentions. In a study comparing tricyclic versus placebo antidepressants, it was found that tricyclics reduced migraine headache pain by 50%, as well as the frequency of the migraines. The strength of this medication also proved to increase over the duration of use.\(^{49}\)

- **Amitriptyline**: This medication is used for nerve pain and as a migraine prophylaxis. Side effects include dry mouth, dizziness, diarrhea/constipation, stomach pain, and fatigue.\(^{50}\)

- **Nortriptyline**: Used for depression, nortriptyline is meant to affect chemical imbalances in the brain; hence it has been slated as a migraine reliever. Side effects include weakness, dry mouth, nausea, constipation, sensory distortion, low libido, and breast swelling.\(^{51}\)

Beta Blockers: These medications prevent certain chemical interactions from occurring between chemicals and blood vessel brain receptors. Originally slated as a heart medication, it has since become a widely favored migraine preventative medicine. The two listed below are currently approved by the FDA.\(^{52}\)

- **Propranolol**: This particular brand is meant to help reduce the frequency as well as the pain level of migraines. The side effects list for this medication is dauntingly long. Thus, it is best for individuals to alert a doctor of any physiological changes, even if they do not believe it is related to migraine.\(^{53}\)

- **Timolol**: Mainly used for blood pressure regulation, timolol can help to prevent migraines. Side effects include itchy skin and sore eyes. If any symptoms occur that are more serious, such as chest pain, headache, or difficulty breathing, individuals should contact a medical professional immediately, if not call 911. Sufferers should speak to their doctor at length about this medication, since some symptoms may disappear as the body acclimates to the medication.\(^{54}\)

Biofeedback: This is one of the few holistic options to fighting migraine that is widely accepted by the medical world. Biofeedback involves using machinery to monitor when the body becomes stressed. By regularly consulting this machine, individuals can learn to notice exactly when their body begins to stress, and can learn how to change their response to stress in such a way that it prevents migraines. Since stress is a migraine trigger, this technique can prove extremely helpful. However, it is best used in combination with a migraine preventative medication.
For example, those who use a combination of biofeedback and drugs may expect a 70% reduction in migraine frequency, as opposed to only 55%. Because this is a completely natural therapy, there are no known side effects.

Calcium Channel Blockers: Calcium causes the muscles of the artery in the brain to contract; however, since the body needs calcium to live, cutting it out of the diet isn’t an option. Thus calcium channel blockers are used to keep the contractions from happening and headaches from coming on.  

- **Verapamil**: Mentioned earlier, this drug causes blood vessels to relax. Side effects include heartburn, constipation, and dizziness. Serious side effects requiring the immediate attention of a physician include, but are not limited, to loss of energy and appetite, nausea, fatigue, swelling, and difficulty breathing.

- **Diltiazem**: This drug was also originally used to help with cardiac pain, high blood pressure, and arrhythmias. Side effects include constipation, hypotension, nausea, headache, rash, edema, fatigue, and dizziness.

Nerve Stimulation: This is another type of therapy in which sufferers use a handheld device to administer short electric shocks to the head in order to stimulate nerves, and relax the various muscles of the brain. This is said to help prevent migraines. Although data is still being developed, some studies have shown that nerve stimulation used during a migraine can help to rid an individual of the headache within two hours.
CHAPTER 7: TREATING MIGRAINE

Now that a few options for preventing migraine headaches have been discussed, methods for treating a migraine once it has initiated can be explored. Since the goal of many preventative medications is to reduce the frequency of headaches, these measures are instead more focused upon controlling the pain levels during migraine attacks. These various medicinal and lifestyle suggestions should be discussed with a physician before undertaking them.

This is due to the side effects of the medications, not all of which are listed here, and the potential confliction of chemicals when combined with preventative or other medications that may currently be prescribed to the patient, in addition to pre-existing medical conditions. With this in mind, readers are encouraged to peruse the following list of migraine treatments and consider which would be the best fit for their individual needs.
Over-the-counter Painkillers: Usually a go to for those with minor headaches, research has supported the theory that OTC painkillers, such as Excedrin and ibuprofen, are more helpful in relieving migraine pain than placebo pills. These are recommended more for someone with episodic migraines, since overuse of these pills can lead to serious complications. Additionally, it is best for sufferers to note whether caffeine relieves, or merely brings on, migraines, as the case is different for each individual and Excedrin is made up partly of caffeine.

Prescription Painkillers: The advantage to this approach is that any and all medical conditions or preferences are taken into account by the doctor, which allows for a tailored drug administration that can be changed depending upon the patient’s developing needs.

Most painkillers differentiate in that they are better used for those who have infrequent but severe attacks, constant but mild attacks, or any other combination thereof. What they all have in common, however, is that prescription painkillers work best when they are taken as soon as the patient realizes a migraine is coming on. Below are different classes and types of painkillers that are frequently recommended by physicians:

- **Ergot:** This painkiller actually originates from the ergot fungi, which is known for growing on wheat. It’s peculiar history suggests that it may have played a part in the history of disease, as ergot was cooked with rye to make bread during the Middle Ages, resulting in the horrific disease that is now referred to as St. Anthony’s Fire.

  However, since then research has been done to create an ergot pill that fights migraines by constricting arteries and veins. Despite its dim history, the side effects of ergot are not usually severe. They include nausea, vomiting, abdominal pain, numbness and muscle pain, and weakness.

- **Triptans:** This represents a class of migraine relieving drugs. Perhaps the most appealing aspect of them is that they not only generally relieve migraine pain within two hours, they also treat the symptoms of migraine, such as nausea and light sensitivity.

  Like ergots, triptans narrow the blood vessels, making it a candidate only for those without circulatory problems. The different types of triptans include almotriptan, eletriptan, frovatriptan, naratriptan, rizatriptan, sumatriptan, and zolmitriptan. Side effects may include drowsiness, nausea, dry mouth, dizziness, and odd bodily sensations.
Steroid Hormones: Steroid hormones are at once emerging and long established in terms of migraine treatment. Currently, researchers are exploring the links between ovarian hormones and migraines, with the aim to determine if sex hormones are responsible for brain signaling that initiates migraine. This is of particular interest, since about 50% of women afflicted with migraine have reported that their migraines are strongly influenced by their menstrual cycle. However, other steroid hormones are well established in the fight against migraine pain, although they pose serious side effects if taken for too long a period of time. One such example of a pain relieving steroid hormones is listed below:

- Dexamethosone: This belongs to a sub-class of steroid hormones called glucocorticoid, which is a class of corticosteroids, which are steroids. These are widely believed to be beneficial to relieving migraine. Dexamethosone is speculated as helping to stymie inflammation in the brain, and thereby reducing the amount of migraines over the short term. Side effects include, but are not limited to, emotional instability, acne, insomnia, and heart arrhythmias.

In the previous chapter, nerve stimulation was discussed as an effective method for preventing migraine headaches. Fortunately, it is equally effective once the migraine has already commenced. In recent years, the FDA has approved at least two methods of nerve stimulation, including the Cerena Transcranial Magnetic Stimulator (TMS) and Cefaly, which is a transcutaneous electrical nerve stimulator (TENS).

The difference between the two is that the former is used for migraine preceded by aura, and electrical magnetic energy is sent in through the back of the head to relieve pain. The Cefaly, on the other hand, provides stimulation through the front of the head, and is not specific to aura migraines. Those who are afflicted with migraines should speak to their doctor to determine if nerve stimulation is a fitting treatment method.

In researching the various migraine medications and the symptoms of the prevalent illness, one cannot help but notice how often the words nausea and vomiting appear. Unfortunately, these are trademark side effects of migraine that, despite their efficacy, few medications address along with head pain. Thus, when speaking with a doctor, patients should review anti-nausea medication and holistic approaches that may be complementary to their migraine prescriptions. A few frequently used options are metoclopramide, prochlorperazine, and antihistamines. While it may not be particularly pleasant to add medication on to an already existing regimen, nausea and vomiting will frequently accompany migraines.
If a patient is already suffering from migraine-induced nausea, he or she should discuss it with a physician since some migraine treatment medication (such as ergot) may have nausea and vomiting side effects. Holistic options for reducing nausea may include acupuncture, acupressure, and aromatherapy, the last of which has shown success using the scents of ginger and peppermint.\textsuperscript{72}

Migraine relief methods, however, always take some time to set in. Many of the ways to naturally aid the body in dealing with a migraine will be based on instinct; the harsh pain that accompanies bright light and even the smallest noise will naturally cause sufferers to retreat to a dark and silent room. This will naturally help the brain to calm down since it is no longer dealing with so much stimulation.

In addition to this, those experiencing a migraine attack should try a cold compress and to cool down the room. Heat naturally causes the body to swell, so it stands to reason that colder temperatures should cause the body to shrink somewhat in size (think of the way a ring fits in the summer versus the winter, and how it is best to wash out pores with warm water because cold water causes them to close up).

Since migraines are thought by researchers to be brought on by the dilation of blood vessels in the brain, colder temperatures should naturally help them to constrict. Be sure to also give the body fluids by drinking water. While it is a difficult road, those afflicted with migraine headaches can get their lives back. Rather than deal with episodic or chronic head pain, the right combination of preventative and pain relieving treatment, paired with a healthy and migraine-conscious lifestyle, can prove to turn a patient’s life around.
Despite the incredible advances in medicine throughout history, medicinal methods are not always the best for treating an ailment. Although humans are no longer practicing bloodletting as a way of healing, medication simply cannot be used every time someone feels ill. In the case of headaches, this is because overuse of medication can cause an overdose, MOH, or creates a dependency that further complicates a patient’s condition. So, for all of those times when it is not wise to take another pill or the patient simply does not want to, here is a compiled list of activities that may help to relieve the pain. Some are reiterated from earlier in the book, and others are altogether new; what they have in common is that they have all provided some measure of relief for the millions who suffer everyday from headache.

**Identify the Cause of Your Headache:** The key to relieving painful headaches is often finding what triggered them. So, as stated before, pay special attention to any patterns that emerge when headaches come on and victims should take note of what type of headache they believe they are experiencing. Which leads to the next point...
Start a Headache Diary: The importance of logging information regarding headaches cannot be overstated. Having this information on hand not only allows those with headaches to aid a doctor’s diagnosis, but keeping a log long term allows patients to take note of any changes that occur, such as resistance to medication, progression or regression in headaches, or evolving headaches (i.e. tension to migraine).

It is also useful because, depending upon the medication, patient’s may become foggy and have difficulty focusing, and therefore may have trouble recalling the details of a migraine; a diary will eliminate the need for remembering details if it is always on hand. Thus, a headache diary should be in a large notebook or online in something like an Excel file, although information can always be stored in a phone, if carrying a log is not a desired option. Logs should include the following information:

- Date
- Food consumed
- Time of meals
- Beverages consumed
- Time beverages are consumed
- Exercise regimen, including length
- Amount of sleep the previous night
- Time headache began and ended
- Symptoms of headache
- Triggers (i.e. odors, stress, food)
- Pain location
- Pain severity
- Medication taken
- Time medication is taken
- Time medication takes affect
- Currently administered medications
- Outlying factors (i.e. menstruation)

Having this information on hand may allow patients to visibly track their progress, acting as a type of encouragement during bad periods when it seems that the headaches will never get better. If it is updated with every headache then it can play a vital role in the recovery process.
Over-the-Counter Painkillers: A brief note on the already mentioned painkillers. While it may be daunting to begin a road to recovery with the aid of prescription medication, over-the-counter painkillers are only a temporary solution. And while they are helpful in the short-term, taking them often can lead to serious organ complications. Additionally, these medications are not suitable for everyone. For example, someone with kidney disease should not take ibuprofen since, when used incorrectly, ibuprofen can cause kidney damage. Consequently, it is best for individuals to consult a doctor regarding which OTC painkillers are the best chemical fit for each individual’s anatomy and current medicinal regimen.

Herbal Supplements: In order for headache victims to both prevent headaches and relieve pain, it would be useful to implement herbs into daily life. The best herbs for headaches are anything that is anti-inflammatory, such as ginger and butterbur. Vitamins such as magnesium and riboflavin are also useful, either in preventing headaches or relieving pain once they arrive.

Exercise: When plagued by the sensation of a pounding head, most headache sufferers would rather avoid exercise. This is understandable, since exercise causes cortisol hormones to be released (also known as the stress hormone) and stress is a long-suspected trigger of headaches. However, in a study conducted by researchers in Sweden, exercise for 40 minutes a day three times a week had the same effect in reducing migraines as relaxation exercises and the drug topimarate. Thus, those who wish to avoid medication may find exercise to be an avenue worth exploring. It would be best to undertake the task gently, starting out with walks, yoga, Pilates, or other low-stress forms of exercise. As for those who do wish to take medication: exercise may help to further reduce the risk of migraines and other headaches, and it will likely benefit the rest of the anatomy as well.

Acupuncture: A number of studies have been done over the past decade, working to find whether the ancient practice of acupuncture has any place amongst the proven preventative and pain relieving methods of other medications and methods. The consensus thus far is that it can certainly help, and works to both relieve pain and reduce inflammation. Acupuncture can be used as both a prophylaxis and during a headache attack.

Psychotherapy: This practice involves treating headaches using psychological techniques, rather than medicinal ones. While still relatively unsupported by the scientific community, a psychotherapist may help patients to identify triggers for headaches by evaluating the patient’s lifestyle, as well as show patients relaxation techniques so as to avoid stress-inducing headaches.

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Relaxation Techniques: It is entirely possible that over the course of a year, in which an individual has suffered multiple headache attacks that his or her body could become traumatized, both by the headache itself, and from the constant anticipation of being overwhelmed by one. Due to both of these factors, it is paramount for those afflicted with headache to learn to relax. Of course, this can be difficult; life is not structured to be relaxing, and very few people have the luxury of drastically changing their lifestyle to make it more accommodating for life of headaches. The good news is, there is range of ways to relax the body, even while being active. This list ranges from solitary practices, such as meditation, to physical exercise like yoga. Any combination of these may prove to help headache sufferers relax and, hopefully, ward off headaches.

1. **Breathing Techniques:** Sometimes all the body really needs to calm down is a pause from non-stop life. Whenever individuals feel that they are becoming too stressed, they should try taking five minutes to lie on the floor and do some deep breathing, taking the time to relax the muscles and allow the breath to reinvigorate the body. Those interested in this technique should consider looking up local classes in which to learn breathing techniques for stress relief.

2. **Meditation:** An ancient practice, meditation takes a great deal of practice and discipline, but with time can become a useful tool in fighting headaches. Some studies have found that 72% of those who suffer from chronic pain reported a significant decrease with the help of meditation.76

3. **Biofeedback:** Mentioned before, biofeedback is an effective way to teach the body how to relax using scientific tools. If used regularly, patients can learn how to recognize the signs of stress within their environment ahead of time, therefore avoiding that stress. Readers should note that biofeedback merely tracks the various stress indicators within the body (i.e. muscle tension and heart rate), and so it is up to the individual to learn how to calm the body once cortisol levels rise.

4. **Yoga:** This is a fantastic combination of both breathing and physical exercise. Consequently, yoga acts as a relatively low stress source of physical activity and can double as a calming mechanism. Since yoga does take practice in order to perform it properly and reap its benefits, potential yogis should consider enrolling in a yoga classes.

5. **Hypnotherapy:** While this sounds suspiciously like hypnosis and is indeed a cousin of the practice, hypnotherapists help their patients to become aware of their bodies, so that the patients can control their physiological responses. This is a fair alternative to biofeedback and meditation, that can help individuals to learn how to sink into a profound state of relaxation and keep from being overly stressed.77
6. **Physical Therapy**: Unlike the physical therapy brought to mind as a rehabilitation method, physical therapy for those suffering from headaches can be a way for patients to learn how to help physically calm their bodies, through pressure point techniques and massage. Readers interested in participating in physical therapy should inquire their teachers for techniques they can use on their own.

As always, those who are interested in practicing alternative methods for headache management need to consult with a licensed medical professional prior to beginning any treatment. This is for both the safety of the patient and to improve the effectiveness of treatment courses. If everyone is informed, it is entirely possible that even chronic headaches can be brought down to a manageable level, one that does not regularly impede on daily life.
CONCLUSION

According to the Migraine Research Foundation, migraines rank as the sixth most disabling illness in the world.® The implications of that statistic alone are daunting, particularly given the fact that the statistic is only concerned with migraines, not cluster, tension, or other headache types. Given this, it is obvious that headaches are costing the world hundreds upon thousands of hours in lost family time, work, and personal pursuits. With such serious consequences, one would assume that headaches would be more widely discussed by the general public, but unfortunately it has become such a prevalent illness that most of the world’s population accept it as a natural part of life.

This does not have to be the case. Headaches are a debilitating illness that wreak havoc on the lives of those that suffer from them, but the good news is, researchers are on the case. New studies and clinical findings are reported every year, detailing the discovery of new medications and techniques for relieving pain. Over the course of this book, many of the possibilities for headache management currently available to those afflicted with headaches have been listed, offering a wide range of options that can serve to relieve pain using both holistic and pharmaceutical methods.
In the event that these suggestions are not right for an individual, remember that there are other ways in which to relieve a headache, which can be explored with the help of a physician.

Moving forward, readers should keep in mind the various techniques that would be best suited to their personality and medical condition. It is best to start out using the headache diary so as to discover the best path towards a manageable life quickly, and with the least amount of pharmaceutical experimentation possible. Again, while one particular technique may be appealing, such as a combination of herbs and exercise versus prescription medication, it is a combination of multiple practices that will most likely reap the best results.

While the purpose of this book is to provide options for readers with episodic and/or chronic headaches, the most valuable tool in shaping a healthy and happy life is the individual; namely their discipline and optimism. This can be extremely difficult as headaches can engulf its victims in depression, leaving them with a constant fear of the next attack, but escaping that state is possible.

It will not happen overnight, and in fact, it may be a long time before the patient and doctor find the right regimen for a mostly headache free life. The important thing to remember is that it is possible. This will take discipline and a willingness to try new things and change lifestyles. Such discipline also demands that patients continue to look towards the future, creating a goal for themselves of a life where they can go months, or even a year, without experiencing the pain of headache.

This future can be achieved. Although, it may take months or years, and the situation may at times seem hopeless, there are ways to lift the pain and anxiety of headaches. Hopefully, in the near future scientists will discover a way to cure people of headaches entirely. Until then, it is up to the individual to pursue a healthier and happier life. With the help of this book and a physician, a life relatively free of headaches can be within anyone’s reach.

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77 Ehrlich, Steven D. “Hypnotherapy.” University of Maryland Medical Center. University of Maryland Medical Center, 6 Nov. 2015. Web. 28 June 2016.