

# Taking Charge of Your Life: Understanding Migraine

Perhaps only a fellow sufferer can ever really understand what it's like to live with migraine. Much worse than an ordinary headache, migraine is an illness that takes its toll on family and relationships; it affects your work, your quality of life, even your ability to function.

There is good news for many patients, however. This information will arm you with an understanding of migraine's realities, because with understanding comes the strength to adapt, to cope, to help yourself.

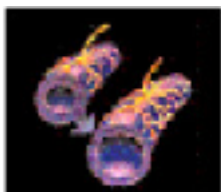
## What You're Going Through

As a migraine sufferer, you have more company than you may expect: About 28 million people suffer from migraines in the United States alone.<sup>1</sup> Here are a few fast facts:

- Migraine is most prevalent in people between the ages of 25 and 55<sup>2</sup> years and is less common after middle age
- Women sufferers outnumber men 3 to 1<sup>1</sup>

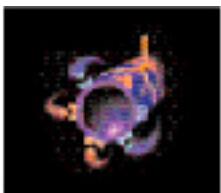
## Taking a Closer Look at Migraine

### Swelling of Blood Vessels in the Brain



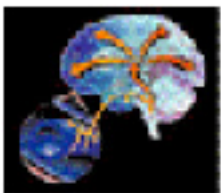
The blood vessels on the outside of the brain, called the meningeal arteries, are one of the key players in migraine. When blood vessels swell, they irritate the nerves surrounding them. This activates the nerves, which send pain signals to the base of the brain.

### Release of Chemicals That Cause Swelling



The nerves that surround the meningeal arteries on the outside of the brain can make migraine worse. These nerves release chemicals that make the blood vessels swell even more, which triggers additional pain signals, and leads to a cycle of intensifying migraine pain.

### Transmission of Pain Signals in the Brain



The nerves surrounding the meningeal arteries send pain signals to an area in the brainstem called the trigeminal nucleus caudalis. Nerves in this area of the brain then send signals through the thalamus to other areas of the brain. These pain pathways are thought to contribute to the worsening of migraine pain, as well as the associated symptoms of nausea and light and sound sensitivity. These pathways also transmit pain signals to higher brain centers where migraine pain comes to conscious awareness.

Scientists are currently looking at genetics as a factor in some forms of migraine. As evidence that heredity does play an important role, note that 70% to 80% of sufferers have a family history of the disease.<sup>3</sup>

Although no one knows the exact cause, migraine may be a response to triggers (such as certain foods, hormones, or environmental factors) that cause blood vessels in the brain to overreact, which may lead to a migraine.

## What Are the Symptoms?

In some patients, migraine pain may be preceded by symptoms such as food craving, irritability, mood changes, and yawning.

There are many types of migraine. The most common type of migraine occurs with and without aura. About 15% to 20% of sufferers experience aura, usually before the onset of headache.<sup>3</sup> The aura develops during a period of 5 to 20 minutes, usually lasts less than an hour, and may include<sup>3</sup>:

- Visual blind spots
- Flashing lights and zigzag lines
- Visual distortion of shapes and sizes
- Tingling or numbness around one side of the mouth

## Is Headache the Only Thing You Feel When You Have a Migraine?

Although most sufferers may experience up to 72 hours of throbbing pain on one side of the head, migraine usually is accompanied by one or more of these symptoms<sup>3</sup>:

- Nausea, vomiting
- Sensitivity to light, sound, or odors
- Worsening of pain with physical activity

## Migraine Has an Impact on Your Life

Migraine is a neurological disease that may affect your ability to function. Migraine is often underdiagnosed and undertreated. Migraine may affect sufferers in different ways at different times: a mere inconvenience during one attack, an incapacitating assault the next.

More than half of people with migraine miss 2.2 days of work a month.<sup>4</sup> In addition, many are obliged to restrict their activities—or even remain bedridden—a significant number of days each year,<sup>2</sup> little wonder that so many sufferers report feeling isolated and misunderstood.

It is all the more important, then, to remember that about 28 million other people throughout the United States are going through the same thing.<sup>1</sup>

## It's Important to See Your Doctor

Many migraine sufferers are uncertain when—or if—they should see a physician about their problem, but that's where the real relief begins. You should see your doctor if ...

- Headaches are interfering with your life
- You find yourself taking a lot of pain relievers—or if pain relievers have stopped being effective
- You find yourself missing work or limiting your activities—even those you most enjoy
- Your headache is accompanied by nausea or vomiting
- Your headache is always on the same side
- Your headache changes in severity or character

## Migraine Myths

Migraine may be one of the world's most misunderstood ailments. Here are just a few of its myths:

**Myth:** Migraine isn't serious—it's just a bad headache.

**Reality:** Migraine is a disease—and headache is only one of its many symptoms. At its worst, migraine can disable the sufferer for days at a time.

**Myth:** Only women get migraines.

**Reality:** Although women sufferers do outnumber men three to one—possibly because of hormonal causes—both men and women get migraines.<sup>1</sup>

**Myth:** Migraine is a sign of emotional weakness.

**Reality:** Migraine is a neurological disease. In no way is migraine a sign of emotional weakness or an inability to cope.

**Myth:** Migraine doesn't interfere with people's lives.

**Reality:** It does—more often than not, and more profoundly than you may expect. Migraine sufferers rank their quality of life lower than patients with hypertension or diabetes.<sup>5</sup>

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2. Lipton RB, Stewart WF. Migraine headaches: epidemiology and comorbidity. *Clin Neurosci*. 1998;5:2–9.
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5. Solomon GD, Skobieranda FG, Gragg LA. Quality of life and well-being of headache patients: measurement by the Medical Outcomes Study instrument. *Headache*. 1993;33(7):351–358.

