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WHAT IS MIGRAINE?

Migraine is the most common neurological condition in the developed world. It affects 10% of the U.K. population and is more prevalent than diabetes, epilepsy and asthma combined.

Migraine is more than just a headache. It can be a debilitating condition which has a considerable impact on the quality of life of sufferers and their families. Attacks can be completely disabling, forcing the sufferer to abandon everyday activities for up to 3 days. Even in symptom-free periods, sufferers may live in fear of the next attack.

If you have two or more of the following symptoms during an attack it is probable that you are suffering from migraine

- Neurological disturbances lasting around 15-60 minutes which normally occur before the headache begins; most commonly visual disturbances including blind spots, flashing lights or zig zag patterns; confusion, inability to concentrate, problems with articulation or co-ordination, or tingling, pins and needles or numbness on the affected side. These symptoms, known as aura are most often identified with migraine but in fact only about 10-15% of sufferers experience them. Migraine with aura was formerly known as **classic migraine**.

Although some people experience aura symptoms only, the attack normally proceeds after a short interval in the same way as migraine without aura, formerly called **common migraine**, with some or all of the following symptoms:

- Intense throbbing headache, often on one side of the head only
- Nausea and/or vomiting and/or diarrhoea
- Increased sensitivity to light (photophobia)
- Increased sensitivity to sounds (phonophobia)
- Increased sensitivity to smells (osmophobia)

You may also experience stiffness of the neck and shoulders, tingling or stiffness in the limbs, an inability to concentrate, difficulty in speaking, or in rare cases paralysis or loss of consciousness.

A general rule of thumb is that if a headache and/or other associated symptoms prevents you from continuing with normal daily activities it could be a migraine.

Although headache is the most obvious event during a migraine some migraineurs start to feel "strange" a day or so before the attack begins. These strange feelings, known as the prodrome, are the first signs of the attack and can include cravings for certain foods, excitability, hyperactivity, tiredness, yawning or a change of mood.

Migraine attacks normally last between 4 and 72 hours and sufferers are usually symptom free between attacks

WHAT CAUSES MIGRAINE?

Migraine is believed to be caused by the release of a chemical called serotonin or 5HT into the bloodstream from its storage sites in the body, resulting in changes in the neurotransmitters and blood vessels in the brain. Exactly what causes this to happen is still a subject for research and debate. However certain factors have been identified which can trigger attacks in susceptible people:

- Stress or sometimes the relief of stress
- Lack of food or infrequent meals
- Foods containing monosodium glutamate, caffeine and tyramine
- Certain specific foods like chocolate, citrus fruits, cheese.
- Alcohol, especially red wine
- Overtiredness (physical or mental)
- Changes in sleep patterns (eg late nights or a weekend lie-in)
- Hormonal factors (e.g. monthly periods, the contraceptive pill, HRT or the menopause)
- Extreme emotions (e.g. anger, grief)
- Physical activity
- Environmental factors (e.g. loud noise, bright or flickering lights, strong perfumes, hot stuffy atmosphere, VDUs)
- Climatic conditions (e.g. strong winds, extreme heat or cold)
- High blood pressure
- Toothache or pain in the eyes, sinuses or neck
- Anxiety/Depression
- Travel
- Change of routine (e.g. shift work or holidays)
- Sexual arousal
- Change of climate
- Very hot baths

Migraine triggers are numerous and varied and occur in combinations peculiar to each individual. It should be noted that not all migraineurs will be affected by all of the above triggers and possibly by none of them.

For most people there is not just one trigger but a combination of factors which individually can be tolerated but when several occur together or accumulate a threshold is passed and an attack is triggered. Although it can be helpful to identify and avoid your own personal trigger factors it is important not to become too obsessive.

Everyone has the capacity to suffer from migraine but in some people, most probably because of a genetic predisposition, the threshold at which attacks occur is lower. It has been proven that there is no specific migraine type and sufferers are not, as is sometimes suggested, neurotic perfectionist hypochondriacs who bring all their problems on themselves nor even, as has also been suggested, that they are super intelligent or extra sensitive.

Although twice as many women as men suffer from migraine because of the involvement of hormonal factors, migraineurs come from all walks of life, all areas of the world and ethnic groups, and all social classes.