

Headache Help:

Get relief from your migraine headaches



Headaches are nearly universal.

"More than 90% of the population suffers from headaches," shares **Mark Lanser, MD, a neurologist and one of the headache specialists from the Riverview Headache Clinic.**

Tension Type Headaches (TTH) – often called "ordinary" headaches – are the most common type of headache. Migraines come next, affecting about 28 million people in the United States alone. Approximately 6% of men and 18% of women suffer from migraine headaches. Yet, more than half of people with migraines never seek medical care.

"Many people consider headaches to be a part of their life and don't seek help," says Dr. Lanser. "Migraines are very common and very treatable. People really don't have to suffer through them anymore."

He urges people who suffer from migraine headaches to talk to their doctors. The goal is to control your headaches so they don't control your life.

In addition, about 15-20% of migraine sufferers experience an aura – most commonly visual – prior to the onset of pain or other symptoms.

What is a Migraine?

There is no conclusive test to identify a migraine. Therefore, the best way to define a migraine is to compare and contrast the symptoms of migraine to a tension headache.

A REGULAR TENSION HEADACHE:

- generally occurs on both sides
- lasts from 30 minutes up to 7 days
- will slow you down, but not completely stop you
- feels like you're wearing a hat that's too tight, with a steady, pressing quality to the pain
- usually presents with mild to moderate intensity

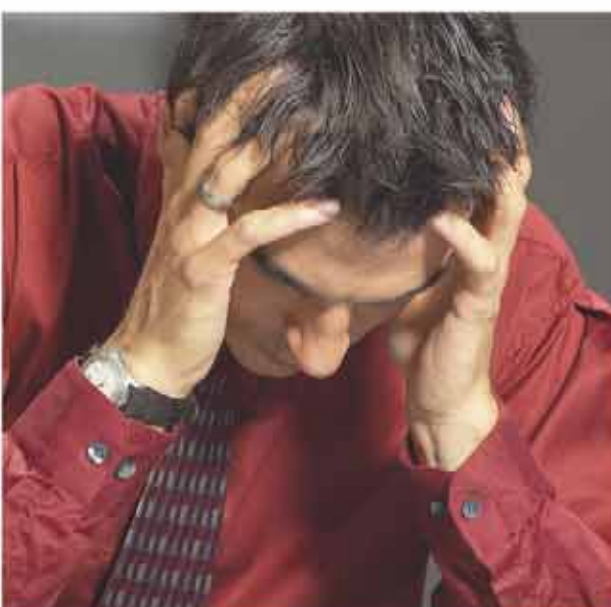
IN CONTRAST, A MIGRAINE IS CHARACTERIZED BY:

- one-sided pain that may spread to both sides
- duration of 4 to 72 hours
- moderate to severe pain intensity
- a pulsating quality, with pain worsened by common physical daily activities
- nausea or vomiting
- light and/or sound sensitivity
- a feeling of total disability during the migraine episode

Who Gets Migraines and Why?

While no one knows exactly why people get headaches, our knowledge and understanding is growing. In the past, we thought the pain came from blood vessels that are dilating in and near the brain. Now we know it's much more complicated than that. A trigger sets off a cascade of events involving blood vessels, nerve endings, and chemicals that activate different portions of the brain and brain stem.

We do know the basic cause is an underlying genetic susceptibility. Add to that the updated concept that all headache types are on a spectrum. He explains that we all have a threshold and that people's threshold for developing migraines is genetically higher or lower.



A few conditions that impact your likelihood of developing migraines include:

- **Gender.** Roughly three out of four people with migraines are women.
- **Age.** People most often (but not always) get their first migraine during puberty. In women, it is uncommon for migraines to continue after menopause.
- **Family History.** 80% of migraine patients have a first-degree relative (parent or sibling) who also gets migraines.

"If a genetically prone individual comes into contact with a common trigger, that person is

much more likely to experience a migraine than someone with no genetic predisposition and a higher threshold," Dr. Lanser relates. "The good news is you can raise your threshold through lifestyle changes or medication, if necessary."

Prevention & Treatment

A trigger is something that will lower your threshold. Some common triggers include stress, caffeine, red wine, aged cheeses, chocolate, and beer. Since it is nearly impossible to avoid or eliminate all triggers – weather fronts or changes in estrogen before menstruation, for instance – Dr. Lanser recommends as much consistency in your daily activities as possible.

"The brain of a migraine sufferer does not like change," he continues. "You need stability, so eat right and don't skip meals, get a good night's sleep, exercise daily, and reduce stress as much as possible."

Beyond these lifestyle changes, medications for migraines have come a long way in the last 15-20 years.

"Without a doubt, the triptan drugs have revolutionized migraine treatment," Dr. Lanser confirms. "The key is early treatment."

Treating a migraine can be likened to putting out a forest fire. It's much easier and more effective to extinguish a fire at the first sign of trouble rather than waiting until the flames are raging out of control.

Dr. Lanser also encourages people to come back repeatedly if their treatment isn't working effectively. "Treating headaches is a process," he claims. "It takes a lot to get this under control so it no longer controls your life, but there's just so much we can do now. You don't have to suffer anymore."

For more information on **migraines or any of our headache specialists**, visit:
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