

# Migraine

## Lifestyle considerations and the SEEDS approach

Migraine is very common and very mysterious. Over 40 genes are associated with it. It is therefore strongly familial. It commonly coincides with other functional disorders such as Irritable Bowel Syndrome, Fibromyalgia, temporomandibular joint dysfunction and chronic neck pain. It is also similar neurologically to (and can be triggered by) concussion.

A migraineur's brain is more sensitive to the environment compared to normal. This explains why there is a vast array of different potential triggers. A 'migraine brain' is also less able to 'reset'. Every person with migraine has different triggers, different symptoms and different root causes but there are common patterns. Cumulative stimuli, stressors, triggers, adverse lifestyle factors and sometimes hormonal fluctuations or even weather changes lead to neurological changes that build up over time and culminate in an acute migraine attack. It seems the migraine brain becomes more and more hyper-stimulated. Prodromal symptoms (nausea, yawning, foggy headedness, tiredness, food cravings and the like) precede the attack by hours or days. They are a clue that the brain is on the verge of a 'meltdown'.

The migraine attack itself usually involves headache, nausea, mental impairment, sensory hypersensitivity (especially to noise and light) and sometimes neurological symptoms and lasts hours to 1-2 days. It is usually similar each time for that person (although this may evolve throughout a person's lifespan). The migraine attack is then followed by a post migraine 'hangover' of more tiredness and mental fogginess and various other symptoms typically lasting another day or two. Less commonly, migraine undulates over weeks rather than the above pattern.

The interaction between lifestyle and migraine is extremely important and too often overlooked. A recent study showing those sufferers who were given education about migraine went on to experience 60% fewer migraines compared with controls. So learn as much as you can. The two best web resources are The American Headache Society (AMS) and the American Migraine Foundation both of which have numerous summary articles. Also consider subscribing to the annual 'Migraine World Summit', a series of interviews with the best and brightest in the field.

The migraine brain thrives on routine and consistency and does not like chaos and change. For example sleeping in on a weekend is not a satisfactory antidote to staying up too late during the week.

A wholistic approach to managing migraine is best summarised in 'SEEDS for success' by Dr. Laurence Newman of the Mayo Clinic (and past president of the AMS);

- **S** - Regular sufficient Sleep is probably the single most important protective factor for migraineurs, sleep being the main process that helps to reset the brain.

- **E** - Eating. Diet can make a big difference. There are innumerable potential chemical and molecular triggers in processed food (high in simple sugars, purified carbohydrates and preservatives). This might happen directly or perhaps through stimulating an inflammatory response or by disturbing the gut microbiome. ...is the commonest trigger both at a molecular level and because it impairs sleep. If in doubt adopt a lowish gluten, zero alcohol, whole foods based diet for a few weeks to a month or longer and see how you go. Don't boom and bust with food - see below under 'drinking'. Ask me for my nutrition handout.

- **E** - Exercise - Regular (daily to most days and consistent) exercise to keep fit.

- **D** - Drinking. 6-8 glasses of water evenly spaced through the day. A prominent neurologist who suffers migraines keeps water and nuts in his office and sets an alarm on

his phone as a reminder to drink water regularly.

- **S - Stress** reduction. Anxiety, stress and migraine are all states of brain hyper-arousal.

It is widely believed the one stimulates the other. Life management is very important.

Avoid taking on too much. Learn the art of doing nothing. Meditation is strongly therapeutic. CBT and other types of counselling can be very useful for some.

The SEEDS approach above becomes the foundation upon which other treatments are trialled. Non pharmaceutical treatments that have a good evidence for migraine prevention are listed below;

- Magnesium, Co Q10, Butterbur root (or, more specifically, the detoxified extract Petadolex (TM)). B2 (Riboflavin) probably works. Feverfew probably does NOT work. Migraine Care by Bioceauticals is a reasonable multi-ingredient product to try.
- Heat packs for neck muscle spasm and cold packs for facial muscle spasm (usually around the angle of the jaw)
- Acupuncture / accu-laser

This discussion has not dealt with important topics such as having a migraine plan (for treating acute attacks) and long term preventative medication therapies and other more advanced treatments like Botox, neuro-modulators and neurofeedback. These can be discussed during appointments.

I hope by now you can see that;

- There are many ways you can act to take better control of your migraines.
- That the more you know the more power you have.
- That careful observation of how your brain changes state over time based on circumstance is the key to this improvement in control.
- That lifestyle is the foundation stone upon which any treatment strategy is based.

Good luck!

Dr Richard Blanch