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Dealing with Migraine: a Doctor's Comprehensive **Medicine Approach**

ProHealth.com by Jacob Teitelbaum, MD October 26, 2011

Dr. Teitelbaum is a leading fatigue and pain specialist who has researched ME/CFS & FM patients' nutritional and therapeutic needs for more than 20 years. This article is reproduced with kind permission* from Dr. Teitelbaum's educational web site at www.Vitality101.com, and is an excerpt from his book Pain Free 1-2-3, [If migraine isn't your problem, see the attached sidebar discussing "Tension and Other Headaches."1

Owing partly to migraine's significant undertreatment, its cost to US employers in days lost averages out to \$3,000 per year per employee.

A Comprehensive Medicine Approach to Migraines

Migraine headaches can be very severe and often leave people crippled for days. They may afflict as many as 28 million Americans. Migraines are often preceded by an "aura," which may consist of visual disturbances such as flashing lights. The headaches are often associated with nausea, sweats, dizziness and slurred speech. Light and sound sensitivity can also be severe.

There is still marked debate over the cause of migraines.

For decades, researchers thought that these occurred because of excessive contraction and expansion of the blood vessels in the brain. Others thought that this blood vessel problem occurred because of inadequate serotonin, the neurotransmitter that controls sleep and mood, which also plays a role in how blood vessels expand. Low serotonin also amplifies pain by increasing the pain neurotransmitter called "substance P". Muscle spasm and nutritional imbalances and deficiencies can also contribute to migraines, as can food sensitivities.

Most likely, it is a common endpoint for many different underlying problems.

Effective migraine treatment is important. Not only are migraines horribly painful for many people, but they are expensive as well. The average amount of work missed by those with migraines is 19.6 days a year, costing employers \$3,000 per year per employee. It is also under-treated, with 31% of migraine patients never having sought treatment.

What Natural Remedies Can I Use to Knock Out an Acute Migraine?

Two natural treatments can knock out an acute migraine.

Butterbur

The first, which you can take at home on your own, is butterbur. This herb can both prevent and eliminate migraines. Take 50 mg 3 times a day for 1 month and then 50 mg twice a day to prevent migraines.

You can take 100 mg every 3 hours to eliminate an acute migraine. Use only high quality brands (e.g. Petadolex by Enzymatic Therapy). Many others that

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Rituximab Clinical Trial Q&A, Developed by the ME Association [more]

Rituximab suggest autoimmune

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the end of the study they had a 67% decrease in migraine attacks as well as a decrease in attack severity. This was later repeated in a placebo-controlled study.(9)

Note that it can take 3 months for the riboflavin to start working.

A recent study suggests that 100 mg a day may be enough to have the same effect, so the amount in the Energy Revitalization System is often adequate for maintenance after 3 to 4 months on the higher amount.

Vitamin B-12

Vitamin B-12 can also decrease migraine frequency. In one study in which patients received 1000 micrograms a day as a nasal spray, migraine frequencies decreased by an average of 43% after 3 months. (The B-complex in the Energy Revitalization System contains 500 micrograms a day).(10)

Feverfew

Feverfew is another helpful herb for migraine prevention.(11) Using Feverfew has resulted in a significant reduction in migraines in one-third of patients. It was also found to be very safe.(12)

However, other treatments are effective enough that I rarely use this anymore.

Butterbur (For Prevention, Too)

Butterbur is a shrub which grows in Europe, Asia, and Africa. The standardized Petadolex extract was used in two double-blind studies. By the third month, those receiving active treatment with 100 mg a day had 60% fewer migraine attacks than the control group.

Although 100 mg a day is effective, 75 mg twice a day with food may be the optimal dose for some.(13) I recommend 50 mg 3x a day of the Petadolex for 1 month. then 2x day.

Fish Oil

Fish oil has also been found to decrease the frequency of migraines. In two placebo-controlled studies of patients with frequent severe migraines that did not respond to medication, fish oil was found to be effective.

Use 1 to 2 tbs a day and give the treatment 6 weeks to see the effect. Then you can decrease it to the lowest dose that maintains benefit. (14,15)

Other Natural Compounds

Other natural compounds that may be helpful include: Glucosamine, 1500 to 2000 mg a day (this compound was found to be helpful in a small study of 10 patients over 4 to 6 weeks); and Coenzyme Q10. Co Q10, 150-200 mg daily, decreased the average number of migraine attacks per month from 4.8 to 2.8 in an open study.(16)

All this Suggests That Many, If Not Most, Migraines Can Be Prevented Naturally.

I would begin by taking the Energy Revitalization System vitamin powder, plus 300 mg of Vitamin B-2 in the morning, plus 200 mg of magnesium at night.

If the cost is not prohibitive, I would add butterbur (Petadolex) as well.

Also check for food allergies, as noted below, and follow the advice for hormones if the migraines are predominately around your periods or associated with taking estrogen.

I have seen this approach commonly eliminate frequent and horribly severe migraine problems - but remember that it may take 3 months to see the effect.

What Else Can I Do to Eliminate the Underlying Cause of the Migraines?

Acupuncture

headaches. It results in reduced pain, reduced frequency of headaches, and improved function, energy and health.

In two studies conducted in New York City and London, acupuncture was found to be cost-effective. In a randomized controlled study of 401 patients with

Acupuncture is another option to consider for chronic migraine and tension

chronic headaches (the majority having migraines), patients received up to 12 acupuncture treatments over a 3-month period vs. a control group that

per year, 15% fewer sick days, and 25% fewer visits to the doctor.(17) Food Sensitivity/Allergy Investigation

Food allergies are also very important to consider, Approximately 30% to 50% of migraine patients get marked improvement by avoiding certain foods - and most people with migraines are not aware of what foods are triggering their headaches.

This has now been demonstrated in at least four placebo-controlled studies.

Food sensitivities are an even bigger problem in children with migraines.(18-21) To determine if foods are playing a role in causing your headache, it is helpful to

received standard care. The acupuncture patients had 22 fewer headache days

do an elimination diet. This requires eating a limited diet for five days. The link will give you instructions for a gentler and easier elimination diet. Or you can do a very strict one if you prefer, eating only pears and lamb, and

drink only bottled spring or distilled water. This kind of strict elimination diet will make it easier to tell if food allergies/sensitivities are present and triggering your migraines when you reintroduce foods into your diet. In one study, by avoiding the 10 most common food triggers, subjects exhibited

a dramatic reduction in the number of headaches per month, with 85% becoming headache-free. Additionally, 25% of the patients with high blood pressure also had their blood pressure reduce to normal.

The most common reactive foods were wheat in 78% of patients; oranges in 65%; eggs in 45%; tea and coffee in 40% each; chocolate and milk in 37% each; beef in 35%; and corn, cane sugar, and yeast in 33% each.

Some studies also suggest that the artificial sweetener aspartame

(NutraSweet®) can trigger migraines and other headaches, although this is controversial.(22-23) If you have severe and frequent migraines, it is definitely worth exploring food

sensitivities.(24) But you may find that instead of avoiding foods that trigger your migraines for the rest of your life, you can eliminate the sensitivities/allergies using a powerfully effective acupressure technique called NAET (see www.naet.com/ www.NAET.com).

What Medications Can I Take to Get Rid of an Acute Migraine Headache?

In the U.S., medications in the Imitrex family still remain the first choice that physicians use for the treatment of acute migraines.

Aspirin/Tylenol/Caffeine Combo No one is paying to give them the research showing that the old combo of

Imitrex® Family

aspirin, Tylenol and caffeine (cost, about 20 cents vs. \$10 to \$25 per dose) is equally effective, so don't forget that you can use these if needed (e.g., 1-3 Excedrin Migraine or Excedrin Extra strength). Can take up to 8 spread through the day if the caffeine doesn't make you hyper; the dose recommendations on the bottle are fairly low.

Midrin, which is a prescription mix of three medications, can be effective. Two capsules are taken immediately, followed by 1 capsule every hour until the headache is relieved (to a maximum of 5 capsules within a 12-hour period).

A fascinating study can guide you on when to use Imitrex family medications vs. when to go with other therapies. About 75% of migraine patients get painful sensitivity to normal touch around their eyes (e.g., to wearing eyeglasses).

- . If you use Imitrex before you get the tenderness/pain around the eyes, it will knock out the migraine 93% of the time.
 - . If the pain/tenderness around the eyes had already set in, Imitrex only eliminated the migraine 13% of the time (although it still helped the throbbing).(25)

In other words, if you are one of the lucky ones who does not get pain around the eyes, the Imitrex can knock out your migraine at any time. If you are one of those who do get pain/tenderness around the eyes, it is a race against the clock to take the Imitrov before that pain starts

This means that you should take the Imitrex early in the attack (the first 5 to 20 minutes), before the skin hypersensitivity gets established.

When All Else Fails

For the few of you where all else fails, the following prescription medications can reduce the number of headache days per month by an average of 50%.(24) These include Neurontin®, beta-blockers (Inderal® - avoid this if you have asthma or fatigue), calcium channel blockers, Depakote®, Topamax®, Elavil® and Doxepin®.

The good news, though, is that migraines can be prevented naturally in most cases.

* * * *

Sidebar: TENSION & OTHER HEADACHES

Tension Headaches

Tension Headaches cause moderate pain on both sides of and across the forehead, tend to both start and fade away gradually, and are the result of muscle tightness in the sterno-cleidomastoid muscles of the neck. If the pain is coming from the suboccipital muscles at the base of the skull, the pain is often behind the eyes and/or on top of the head.

Because tension headaches are muscular,... treatments ... that cause your muscles to relax will often eliminate the recurrence of these headaches. Paying attention to structural factors can also help.

Many medications can be used to prevent chronic tension headaches. These include anti-depressants such as Remeron®, 15 to 30 mg, or Elavil®, 10 to 50 mg at bedtime.

To treat the acute pain of headaches, begin with herbal remedies such as the End Pain formula, which contains willow bark, boswellia, and cherry. This can be helpful for acute attacks, but it takes 2 to 6 weeks to fully kick in.

A physical therapy technique called *Spray and Stretch*, which approximately 10% of physical therapists are familiar with, is also an excellent and pain-free way to release your muscles and eliminate a tension headache. [Dubbed "the workhorse of myofascial therapy," this involves manual stretching of taut muscle bands that have been cooled/relaxed by an evaporating spray.]

In addition, there are the old standbys of Tylenol® and Motrin®/Advil®. Other medications that can be quite helpful include Midrin® and Ultram®. I would begin with the natural therapies first, however, as I think these are both more effective and safer.

Sinus Headaches

Sinusitis is another common cause of headaches. It is usually associated with pain and tenderness over the sinuses, by the cheeks, or above the eyes. Nasal congestion, often with yellow/green nasal mucus, is also common.

Interestingly, we have found that most cases of chronic sinusitis are caused by fungal (yeast) overgrowth in your body, especially your bowels, which can then cause gas, bloating, diarrhea, or constipation.

Chronic sinusitis routinely resolves when we treat it with Diflucan® and the other yeast/anti-fungal therapies.

It is also helpful to use a special prescription nose spray that contains anti-bacterials and anti-fungals. Your doctor can order it by calling Cape Apothecary at 410-757-3522. Use 1 to 2 sprays in each nostril twice a day. Silver spray taken with it can also be effective.

Caffeine Withdrawal Headaches

Caffeine withdrawal headaches are common in people who drink a lot of coffee. It is especially common in the morning before people get their coffee "fix" and often occurs approximately 18 hours after the last cup of coffee. Weaning off excess caffeine is the solution.

Cluster Headaches

Cluster headaches occur as a repeating series of headaches that can each last 30 to 90 minutes and are very severe. They cause excruciating, piercing pain on

one side of the head (often centered around one eye) and are much more common in men.

Many medications can help. These include anti-seizure medications like Valproic Acid, 500 to 1000 mg a day, or Topamax®, 50 to 100 mg a day. These often start to work in 1 to 2 weeks.

Trigeminal Neuralgia

Trigeminal Neuralgia is characterized by excruciating attacks of stabbing, shooting pain in the lips, gums, cheek, or chin that last for a few seconds to minutes. It occurs almost exclusively in the middle-aged and elderly. It often responds well to treatment with the medications Tegretol® and/or Neurontin®.

TMJ Dysfunction

Temporo Mandibular (Jaw) Joint Dysfunction (TMJ/TMD) is a common cause of facial pain and headaches. Although classically considered to come from the jaw joint (the area just in front of your ears), in many cases the pain is actually coming from tightness of the Masseter muscles http://en.wikipedia.org /wiki/Masseter_muscle [used for chewing]. Following the principles discussed above for myofascial / muscle pain... will often make this pain go away.

These statements have not been evaluated by the Food and Drug Administration. These products are not intended to diagnose, treat, cure, or prevent any disease.

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