Migraine: still not curable but definitely treatable

K Ravishankar

HE headache is one of the most common medical complaints, but it is still one of the most neglected in day-to-day life. A leg in a plaster cast always receives sympathy, even cuts and bruises command a certain amount of respect and concern, but not so a chronic headache.

People who can treat their own occasional headaches with an Aspirin or two think that severe headache sufferers have a low pain threshold, that is, they are weak individuals who are exaggerating or malingering to escape work and other responsibilities. What goes unrecognised is that researchers now have enough evidence to show that Migraine, which is the commonest cause of chronic headache, has a strong biological basis and there is nothing psychological about it, as is presumed.

Surveys have shown that only a third of chronic headache sufferers consult a doctor. Instead, they rely on over-the-counter analgesics that may actually perpetuate the headache situation. Most people with long-standing recurrent headaches prefer to suffer in silence under the mistaken notion that "Nothing can be done for their headaches and that they have to live with it".

Most of us at sometime or the other have experienced headaches. More than half the general population gets a headache at least once a month. Headaches are also the most common cause of pain seen by family physicians. Although only few headaches are due to a serious disorder, the fear of an underlying serious disease causes a great deal of anxiety, especially among those who have suffered from headaches for a long time.

Headache can be a symptom by itself or may sometimes be an indicator of underlying disease. A headache can occur for many different reasons and needs to be treated according to its cause. If it is due to a major underlying cause like meningitis or stroke it may be dangerous. These headaches require prompt diagnosis and treatment. However, most headaches are not life threatening, they are just painful and annoying but it is important to sort out which kind of headache you have.

Headaches can be categorised as primary and secondary. Primary headache disorders like migraine, tension-type headache and cluster headache account for almost 90 per cent of the headaches seen in practice. Here the clinical examination and investigation, including the CT or MR scan, are also normal but the pain can be just as severe. Secondary headaches are those due to serious underlying causes but are less common. It has to be realised that primary headaches are not only more common and more complex but more complicated too! A normal scan is, therefore, not the end of the road for a headache patient.

Although the vast majority of headaches are not dangerous, very often it becomes difficult to know which is which. Whatever the cause, most headaches are painful, debilitating and frustrating — a real spoil-sport of a complaint interfering with both work and pleasure. Your headaches may not be lethal but they



THAT HEADY FEELING

still hurt. Sometimes doctors reassure their patients that there is nothing seriously wrong and that you only have a tension headache. Unfortunately this does not take the pain away but it leaves one confused, thinking that it is ones own fault that one has got a headache!

Many patients with chronic headache end up suffering and are not always able to get any real, lasting, satisfying help. Most of the time headaches are caused by migraine or mild anxiety and depression. They are puzzled because what seems to trigger off the headache on one occasion does not always trigger it off on another.

Migraine is one of the common causes of recurrent head pain. Inspite of its high prevalence, it is still underestimated, underdiagnosed and undertreated. There are a number of myths and misunderstandings about migraines. It needs to be emphasised that migraines are not just severe headaches in general, but that they are a specific type of headache with special features. Migraine headaches are also not due to an eye problem or tension or acidity in the stomach.

Migraine is a specific disease of the nervous system which mostly produces a one-sided headache, vomiting and sometimes, flashing lights in front of the eyes. The intensity of the headache is about 10 times worse than what one experiences when one has a headache with flu. So migraines can be very severe and they are quite different from ordinary headaches.

Migraine headaches are usually trigger-linked. Methodological studies reveal that common triggers in India are different from the West. Some of these have been listed below

- Heat and harsh sunlight are the main culprits
 Missing meals (generally skipping
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- Hormonal factors (especially menstrually-linked headaches)
- Stress with studies (Class 10 and 12 students are the worst affected)
- Travel stress (crowded suburban trains)
- Odours (perfumes, incense sticks)
- Noise and high light levels

The question most commonly asked is "So, what causes the head pain in migraine?". Until recently, it was thought that dilatation of the blood vessels and muscular contraction were responsible for head pain. But these theories could not explain all the symptoms of migraine. Newer technological advances have shown that migraine pain occurs when chemicals or neuro-transmitters are released from nerve endings around blood vessels in the head, which then dilate and relay pain impulses to the pain perception areas in the brain and the migraineur experiences a severe throbbing pain.

Chronic headaches are never taken seriously and are not considered a major problem. Many headaches which are wrongly attribute to refractive errors or sinus problems or tension eventually turn out to be due to migraine, which can be treated with a specific new anti-migraine drugs called the triptans. Sumatriptan is the only triptan which is now available in India, but with improving awareness the second generation triptans should also be available in the near future.

In the Headache Clinic, a special clinic for headaches at Jaslok and Lilavati in Mumbai, there are other aspects which are also addressed. Drug therapy is the main modality, but besides drug therapy one must also educate the patient. It is not possible to treat all headaches identically because different causes of headache require different types of treatment.

(Dr K Ravishankar is a leading neurologist and is consultant in-charge at The Headache and Migraine Clinic, Jaslok Hospital, Mumbai.)