



MUSC Patient Handout  
Patient and Family Education About Migraine Headaches

Changing What's Possible *in Health Care.*



AS AN ACADEMIC MEDICAL CENTER, MUSC offers benefits to the residents of South Carolina and beyond. The highly dedicated, professional team focuses on providing the most effective therapies available while also striving to develop new therapies within a highly active basic and clinical research program. These efforts are backed by facilities with the latest technology. This resource was developed to help patients understand more about their condition, treatment, or procedure. This handout is meant to be used as a guide to supplement your healthcare providers instructions. It is not intended to be used as a substitute for professional medical care. Only your physician can diagnose and treat a medical condition. Please consult your physician if you have any questions.

**CONTACT INFORMATION:**

Comprehensive Epilepsy Center

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## What is a migraine headache?

Migraine headaches are more common in children than people think. A migraine is a recurrent headache that typically lasts 4-72 hours in adults. In children, a migraine attack may last 1-72 hours. In general, migraine headaches are unilateral (on one side) in location, pulsating in quality, moderate to severe in intensity, and associated with nausea and/or sensitivity to light (photophobia) and sound (phonophobia). In general, routine physical activity worsens a migraine headache.

In children, migraines are commonly bilateral (on both sides) and on the front and sides of the head. A patient may or may not have an aura before the migraine occurs. An aura is a warning sign, such as a flashing light or unusual feeling. Pediatric migraine headaches often have a genetic basis. Therefore, a child with migraines will often have a close relative with a history of migraines.

## Abortive Treatment Options

It is important to have an abortive or rescue headache plan in place. This plan is to help you get rid of the pain. These medications are to be taken at the onset of the headache. These medications are not to be used more than 2-3 times per week, as outlined by your health care provider. Your health care provider will recommend which type of abortive to use during a headache. Your health care provider may have to change your abortive medication several times before finding one that works to treat your headaches. Using the correct dosage of the abortive medication is crucial. Examples of abortive medications are acetaminophen and ibuprofen.

## Preventative Treatment Options

These medications are taken daily to reduce the frequency and severity of the headaches. These medications are prescribed when the migraine headaches are frequent and disabling. These medications take time to work, and they are rarely able to completely do away with all of your headaches. The goal of preventative medicine is a 50% reduction in headaches.

## Biobehavioral Management

These approaches to dealing with headaches can be as helpful as medications.

Get 8-10 hours of sleep each night. Stay on a regular sleep schedule, going to bed the same time each night. Do not watch television in bed.

Regular mealtimes are important and should include 3 healthy meals each day.

Regular exercise of moderate intensity for 30 minutes 3-5 days per week.

Stay hydrated and drink at least 2 liters of non-caffeinated liquid daily. Carry a water bottle to class. If needed, your health care provider can write a note to your school to allow you to carry a water bottle to class.

Do not chew gum

Do not carry heavy backpacks

## Integrative Treatment Options

**Biofeedback:** With this technique, an individual is trained to improve his/her health by learning to control certain internal bodily processes such as heart rate, blood pressure, and muscle tension. This type of therapy is often used to help treat migraines, insomnia, and panic disorders. To learn more, visit [www.lifeworkscharleston.com](http://www.lifeworkscharleston.com).

Relaxation Therapy

Physical Therapy

Nutrition Management

## Nonprescription Treatments

These are vitamin supplements to help prevent migraine headaches. These supplements take time to work as well. Speak with your health care provider before starting any of these supplements.

**Magnesium Oxide:** Take with a meal to reduce stomach upset. Take with a full glass of water.

**Riboflavin (Vitamin B2):** Available as a tablet.

**Coenzyme Q10:** Available as a capsule, gelcap, or solution.

**Butterbur Root (Petasites):** Available as a capsule.

**Feverfew:** Available as a capsule.

# Diet and Headaches

Diet can play an important role in headache management. Individuals with headaches may be sensitive to certain foods, beverages, or food additives. In addition, dehydration and skipped meals also trigger headaches. You may want to note which foods you ate around the time of your headache and try eliminating these foods from your diet.

## Common Dietary Triggers for Headaches:

1. Caffeine (coffee, tea, soda)
2. Chocolate
3. MSG and soy products (often found in Asian foods, soups, salty snacks, processed meats, croutons)
4. Nitrite-containing foods (hot dogs, cured meat, ham, bologna, pepperoni, sausage)
5. Some cheeses/dairy (aged cheeses, yogurt, sour cream, buttermilk, whole milk, ice cream)
6. Nuts and nut butter (peanut butter, peanuts)
7. Vinegar and condiments made with vinegar (ketchup, mustard, mayonnaise)
8. Certain fruits/juices (citrus fruit, raisins, raspberries, red plums, papayas, passion fruit, dates, avocados)
9. Certain vegetables (sauerkraut, pea pods, lima beans, fava beans, navy beans, lentils)
10. Fresh yeast in baked goods (sourdough, bagels, doughnuts, pizza dough, soft pretzels, coffee cake)
11. Artificial sweeteners (Saccharin, aspartame)
12. Snack foods (chips, TV dinners)
13. Wine and beer

## Safe Alternative Foods:

1. American or cottage cheese, low-fat milk
2. Rice cereal, potatoes, pasta
3. Lamb, chicken
4. Broccoli, cabbage, cauliflower
5. Apples
6. Jelly, jam, honey, hard candy
7. Sherbet, cookies, gelatin

## Migraine Care at Home

1. Take abortive therapy medication outlined by neurology team (example: Imitrex, Motrin, or Aleve)
2. Sleep or rest in a quiet, dark room
3. Stay hydrated
4. Call pediatric neurology if headache persists longer than 2 days AND
  - a. Is >5/10 on the pain scale AND/OR
  - b. Associated with moderate to severe nausea/vomiting AND/OR
  - c. Associated with photophobia or phonophobia
5. Plan will be to admit or go to the emergency room for status migrainosus if headache persists 3 or more days.

## Headache Diary

This tool will help your health care provider keep track of your headaches. On a calendar, write down the days you get headaches and a description of the headache in as much detail as possible. Include the following components: when the headache began, when it ended, any warning signs it was going to occur, location of the pain, intensity of the pain, other symptoms (nausea, vomiting, sensitivity to light/sound), medications/treatment taken, effects of the treatment, how much sleep you had the night before, what you ate/drank before the headache began, activities you were performing when the headache started, and any stressful events that occurred prior to the headache.

## Helpful Websites

American Headache Society at [www.americanheadachesociety.org](http://www.americanheadachesociety.org)

National Headache Foundation at [www.headaches.org](http://www.headaches.org)

Migraine Awareness Group at [www.migraines.org](http://www.migraines.org)

Migraine 4 Kids at [www.migraine4kids.org.uk](http://www.migraine4kids.org.uk)

Your treatment at this time is as follows:

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