



# MANAGING YOUR MIGRAINE

## 1 Migraine Tip of the Month: Be Specific

Because migraine is a disorder whose diagnosis relies so heavily on the history provided by the patient, in describing migraine symptoms it's important to avoid using jargon that may promote confusion. *Ocular migraine. Complex migraine. Complicated migraine.* All 3 are examples of jargon used frequently by both migraine patients and their providers, and all 3 are so nonspecific that they usually serve only to hinder effective communication.

"Ocular migraine" is most often used to describe episodes of migraine headache accompanied by visual aura, episodes of visual aura occurring without any temporally associated headache (see *Aura: Migraine's Odd Companion* in this issue) or simply just migraine episodes involving eye pain. The correct term for the first type of episode is migraine with visual aura, and for the second it's migraine aura without headache. Migraine pain is frequently most prominent in or behind the eye, and designating such pain as "ocular migraine" does nothing to assist in diagnosis or treatment.

"Complex migraine" and "complicated migraine" may sound impressive, but neither term does anything to advance the flag of effective migraine management. Both are used to describe migraine episodes involving multiple aura symptoms, particularly vivid aura symptoms, aura that is prolonged beyond 1 hour or aura symptoms accompanied by signs of stroke. More

specific terms are, respectively, migraine with aura, migraine with prolonged aura and migrainous infarction.

## 2 Migraine Treatment of the Month: Magnesium

While in an upcoming issue of *Migraineur* we will be addressing "complementary and alternative supplements" for migraine treatment, the volume of inquiries we receive involving magnesium prompted us to include this brief summary of what is known (and not known) regarding its use in migraine.

The logic supporting magnesium as a treatment for migraine is admittedly compelling. Migraine is believed to reflect genetically-induced brain hypersensitivity. If this is true, and if the molecular basis for that hypersensitivity includes a deficiency of magnesium in brain cells capable of generating head pain, then bringing cellular magnesium levels up to normal via supplementation should assist in reducing migraine.

Unfortunately, research to date has indicated no definite benefit for migraineurs who take a daily magnesium supplement for migraine prevention. On the brighter side, however, intravenous administration of magnesium may be effective for some patients who present with acute, severe migraine headache that has resisted self-administered therapy. Also intriguing, some female migraineurs who experience menstrual aggravation of migraine find that starting an oral

magnesium supplement just prior to the menstrual week and continuing that supplementation throughout the week will suppress their headaches.

## 3 Migraine Myth of the Month: Sumatriptan Allergy

**Myth:** Many migraine patients are allergic to injectable sumatriptan.

**Reality:** Many migraine patients report they are allergic to injectable sumatriptan, but true allergy to the drug is rare. All of the triptans have the potential to cause side effects which may be interpreted as manifestations of allergy and, in some cases, closely mimic the symptoms of an anaphylactic reaction. Common triptan side effects include chest pressure, palpitations (rapid heart rate), and sensations of flushing, "neck squeezing" and "throat closing". Because of the rapidity with which the drug reaches the circulatory system and the relatively high blood levels of the drug achieved via its method of administration, injectable sumatriptan is associated with a higher likelihood of these side effects. When they occur, the side effects are more prominent, and they are especially prominent if the sumatriptan is administered late in the course of the migraine attack.

While these symptoms understandably can be terrifying to the inexperienced user, they are benign. They do not indicate impending heart attack or stroke. And they are not "allergic" in origin.

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