

Options to treat migraines

Time - 40% go away, 40% get better

but 20% get worse within 10 years

Lifestyle and alternative therapies

- keep a migraine diary.
- regular bed and wake times,
- regular exercise and light meals.
- nuts and seeds (contain magnesium), whole grains and spinach. Fibre for breakfast.
- butterbur (supplements or fresh) 75mg x2 a day works in 50% (placebo works in 25%)
- acupuncture 10% better than placebo (headache frequency improves in 60%)
- riboflavin 25- 400mg daily. Said to help 1 in 2
- coenzyme Q10 100mg x3 a day. Helps 1 in 3.

avoid triggers eg certain alcoholic drinks, chocolate, cheese, cured meats and caffeine.

- might cause side effects. Avoid in pregnancy and with certain medications.
- side effects are rare
- 10 sessions in 5-8 weeks
- urine may turn orange or red, diarrhoea
- might cause mild side effects

Treating migraines

Buy over the counter: If you don't have an stomach ulcer: Aspirin 900mg (preferably crushed or chewed) OR ibuprofen 600mg OR naproxen

The most cost effective triptan eg sumatriptan 50-100mg or zolmitriptan 2.5mg (also orodispersible). Buccal or sublingual if vomiting. Repeat after 2 hours if necessary. No more than 2 doses in 24 hours. In combination with Aspirin/ Ibuprofen/ Naproxen.

Non-oral triptans should be considered if vomiting is problematic. e.g. sumatriptan suppositories. Intranasal sumatriptan (20 mg) is not recommended if there is vomiting, as it is absorbed through the oral route. Intranasal zolmitriptan (5 mg) may be a better option as about 30% of the drug is absorbed through the nasal mucosa

Consider domperidone for nausea 10mg tds for no longer than 1 week (also suppositories).

(Avoid in over 60s, or drugs that inhibit CYP3A4 or prolong QT, check ECG for QTc.)

Metoclopramide (no longer than 5 days) or prochlorperazine are alternatives.

Only 10-20% fail to respond to up to 3 courses of triptans. Reconfirm diagnosis.