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Migraine Headaches: Providing Relief

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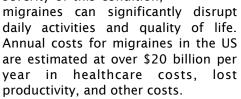
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After reading the newsletter, the nursing assistant should be able to:

- 1. Identify signs and symptoms that commonly occur with migraine headache.
- 2. Discuss common causes and treatment of migraine headache.
- 3. Discuss the needs and care of the patient with migraine headache.

According to the American Migraine Foundation, migraine headaches affect an estimated 36 million people in the US, and one in

four American households. Migraine headache can be an extremely disabling condition. Depending on the frequency and severity of this condition.



Because migraine headache is such a common condition, it is likely that you know of people who suffer from this disorder, including your patients, family members, friends, and even possibly yourself. This newsletter will discuss migraine headaches, including causes, signs and symptoms, common migraine triggers, and medical treatment. Needs and care of the patient experiencing migraine headaches will also be covered.

What Is a Migraine Headache?

Migraine is a neurologic condition in which moderate to severe headaches occur repeatedly. People of any age, including young children, can have migraines. But they occur most commonly in people ages 15—55 years, and often decrease or stop completely in the elderly. Women are much more likely to experience migraines than men, with 75% of migraines occurring in women.

There may be several phases to a migraine headache. The first phase is the prodrome, when certain symptoms may be felt hours or days before the migraine occurs. The person may feel irritable or excited. or may experience yawning, muscle stiffness, frequent urination, or food cravings. A prodrome occurs before 50-60% of migraines. The second phase is the aura, and usually involves changes in vision, including blurred vision, eye pain, blind spots, or seeing wavy lines or zig-zag patterns. Other types of auras include ringing in the ears, smelling certain odors, or changes in taste or touch. Auras usually occur for less than an hour. While it is commonly believed that auras always occur with migraines, this is not the case. Only about 20% of migraines have auras associated with them. The prodrome and aura phases can be helpful, as it allows the person to know that a migraine is coming, so that medication can be taken and/or a change of plans made.

Following the prodrome and aura, migraine pain begins. This is usually a throbbing pain on one side of the head, but pain may also occur on both sides. The pain is often worsened by head movement or physical activity. In addition to the headache, symptoms such as nausea,

vomiting, dizziness, and sensitivity to light and sound often occur. The affected person has a strong

desire to remain very still in a dark, quiet, room. The headache is often relieved by sleep. After the headache ends, there is often a postdrome period for up to 24 hours. The person may feel depressed, fatigued, groggy, and have poor concentration. There may also be a sense of euphoria and relief that the migraine is over. From beginning to end, migraine headaches may last from several hours to several days or longer.

What Causes Migraines?

The cause of migraines is not clearly known. There is a strong genetic factor, as migraines commonly run in families. Brain chemicals, such as serotonin and dopamine, are believed to play a role. One theory regarding the cause of migraine pain is that blood vessels in the brain constrict, then dilate, resulting in headache. Abnormal activity in certain groups of brain cells may also be a factor in migraine pain. The neurologic changes that cause migraine also stimulate other areas of the brain, causing related symptoms such as nausea, vomiting, and sensitivity to light and sound.

Certain situations tend to trigger migraines. These triggers include changes in routine, such as irregular sleep or skipping meals. Stress is also a common trigger. Certain foods may trigger migraines, especially those containing tyramine (aged cheeses, cured meats, sausage, wine, and beer), monosodium glutamate (MSG), nitrates and nitrites. Caffeine, either too much or withdrawing it suddenly, may also trigger migraines. Other triggers include odors, fumes, bright lights, sudden weather changes, or getting too hot or cold. And for women, migraines may be triggered by monthly hormonal changes.

Diagnosis and Treatment

Migraines are usually diagnosed on the basis of the person's history and clinical symptoms. Diagnostic tests may be performed to rule out other causes of head pain, such as other types of headache, brain tumor, and sinus or dental disorders.

There are currently no known cures for migraine headaches. Treatment may be preventive, to prevent migraines from occurring, or abortive, to stop the migraine once signs have started. If there are known triggers, the first mode of treatment is to avoid those triggers, whenever possible. Triggers may be identified when the patient keeps a record of daily activities, including sleep, work, other activities, dietary intake, and stressors. When a migraine occurs, the record should include the time it started, symptoms, how long it lasts, how severe it is, and any attempts to relieve it, with results. Since migraines usually occur within several hours to 2 days following a trigger, a pattern may be identified over time to help determine what the triggers are for an individual.

Several medications are available for use to help prevent migraines, and are taken on a daily basis. These include beta blocker drugs, such as propranolol, and anti-seizure agents, such as

divalproex (Depakote) and topiramate (Topamax). Once a migraine occurs, there are a number of medications approved to treat the migraine. These drugs are taken only when symptoms indicate a migraine is beginning. These include over-the-counter drugs, such as Excedrin Migraine and Motrin Migraine Pain. The most commonly-used prescription drugs to relieve migraines are the triptans, including sumatriptan (Imitrex) and eletriptan (Relpax).

Patient Needs and Care

When a patient suffers from migraine headaches, care must be individualized, and focused on the measures that help that patient to prevent migraines and relieve headaches if they occur.

Prevent migraines: Prevention is a key factor in migraine management. Once triggers for the migraines are identified, these triggers should be avoided, if possible. Of course, there are some triggers that cannot be avoided, such as changes in the weather or hormonal effects. Making healthy lifestyle choices and having a regular, daily routine helps many people to decrease the frequency and severity of their migraines. Regular sleep patterns are important for every day of the week. Getting too little sleep during the week and trying to make up for it on the weekends can lead to increased migraines in those who have them. Eating a healthy diet of vegetables, fruits, whole grains and lean meat is also important. "Junk" and processed foods, as well as caffeine, should be limited. Eating regularly and not delaying or skipping meals is helpful in keeping blood glucose stable, preventing swings that may trigger migraines. Regular exercise is also helpful in promoting general health and in relieving stress that may contribute to migraines. Techniques such as meditation, biofeedback, progressive relaxation, yoga, and/or counseling may help to prevent migraines. Also, patients who take preventive migraine medications should take them regularly and on schedule, exactly as ordered.

Manage pain: At the first sign of a migraine, such as prodrome or aura, the patient should take any medications prescribed to stop the migraine. During a migraine, most people prefer to lie down in a dark, cool, quiet room. Keep voices low and avoid sudden noises and lights, as well as odors. Others may prefer to take a warm or cool bath or shower. For some people, firm scalp massage or applying pressure on the temples may provide relief. A cold cloth, placed over the forehead and/or at the base of the neck, may also help to relieve pain.

Migraine headaches can be very disabling, resulting in reduced activity and quality of life. Your care and understanding can help to provide relief to the patient suffering from migraines.