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Patient information: Migraine headaches in adults (Beyond the Basics)

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MIGRAINE HEADACHE OVERVIEW

Headaches can be quite debilitating, although the vast majority are **not** due to life-threatening disorders. Approximately 90 percent of headaches are caused by one of three syndromes ([table 1](#)):

- Migraine headache
- Tension-type headaches
- Cluster headaches

This article discusses migraine headaches in adults. Other types of headaches are discussed separately. (See "[Patient information: Headache causes and diagnosis in adults \(Beyond the Basics\)](#)" and "[Patient information: Headache treatment in adults \(Beyond the Basics\)](#)".)

MIGRAINE HEADACHE SYMPTOMS

Between 12 and 16 percent of people in the United States experience migraine headaches, making it the second most common type of headache.

Pain — The pain of a migraine headache usually begins gradually, intensifies over minutes to one or more hours, and resolves gradually at the end of the attack. The headache is typically dull, deep, and steady when mild to moderate in severity; it becomes throbbing or pulsatile when severe.

Migraine headaches are worsened by light, sneezing, straining, constant motion, moving the head rapidly, or physical activity. Many migraine sufferers try to get relief by lying down in a darkened, quiet room. In 60 to 70 percent of people, the pain occurs on only one side of the head. In adults, a migraine headache usually lasts a few hours, although it can last from four to 72 hours.

Other symptoms — Migraine headaches are often accompanied by nausea and vomiting, as well as sensitivity to light and noise. Between 10 and 20 percent of people with migraines also experience nasal stuffiness and runny nose, or teary eyes.

The symptoms of a migraine attack may be severe and alarming, but in most cases there are no lasting health effects when the attack ends.

Aura — About 20 percent of people with migraines experience symptoms before the headache; this is called an aura. The aura may include flashing lights or bright spots, zigzag lines, changes in vision, or

numbness or tingling in the fingers of one hand, lips, tongue, or lower face. You may have one or more of these aura symptoms.

Auras may also involve other senses and can occasionally cause temporary muscle weakness or changes in speech; these symptoms can be frightening.

Aura symptoms typically last five to 20 minutes and rarely last more than 60 minutes. The headache occurs soon after the aura stops. Muscle-related auras may last longer.

MIGRAINE HEADACHE TRIGGERS

Migraines can be triggered by stress, worry, menstrual periods, birth control pills, physical exertion, fatigue, lack of sleep, hunger, head trauma, and certain foods or drinks that contain chemicals such as nitrites, glutamate, aspartate, tyramine. A partial list of potential triggers appears in the table ([table 2](#)).

Certain medications and chemicals can also trigger a migraine, including nitroglycerin (used to treat chest pain), estrogens, hydralazine (used to treat high blood pressure), perfumes, smoke, and organic solvents with a strong odor.

Headache diary — People who have frequent or severe headaches may benefit from keeping a headache diary over the course of one month. This can be used to determine what triggers the migraines and what makes them better. A sample diary is included here ([figure 1](#)).

MIGRAINE HEADACHE TREATMENT TYPES

Migraine headache treatment depends upon the frequency, severity, and symptoms of your headache.

- Acute treatment refers to medicines you can take when you have a headache to relieve the pain immediately.
- Preventive treatment refers to medicines you can take on a regular (usually daily) basis to prevent headaches in the future.

Acute treatment — The pain of migraines can be tough to get rid of. Treatment is most likely to work if you take it at the first sign of an attack (eg, at the first sign of aura if one occurs, or when pain begins).

In some people, an aura occurs before the migraine (see '[Aura](#)' above). Therefore, an aura can serve as a reliable warning that a migraine headache is on the way, and should be the signal to take migraine medication. (See "[Acute treatment of migraine in adults](#)".)

Pain relievers — Mild migraine attacks may respond to pain relievers, some of which are available without a prescription. These drugs include:

- Aspirin
- Acetaminophen (sold as Tylenol®)
- Nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (sold as Motrin® or Advil®), indomethacin, or naproxen (sold as Naprosyn® or Aleve®).
- Indomethacin is a prescription medicine that comes in a rectal suppository, which may be useful for people who have nausea during their headaches.

Pain relievers are also available in combination with caffeine, which enhances their antimigraine effect. As an example, some pain relievers contain a combination of acetaminophen, aspirin, and caffeine.

