

Get back to the *life you love!*

Today, there's more hope than ever for a headache-free life. Thanks to treatments and lifestyle changes that really work, many migraine sufferers are enjoying more days without pain. Isn't it time you were one of them?

Imagine a life without throbbing head pain...nausea...blurry vision. Imagine making plans—and being able to stick with them. If you've been battling migraine headaches, you may be happy to hear that “treatment options are greater than they were several years ago,” says Pam Santamaria, MD, a neurologist at the Nebraska Medical Center in Omaha. “There's no reason for people to suffer.”

Take Tina Bracha: The 41-year-old works full-time as a medical assistant, reads at least a dozen books a month and exercises regularly. It's a complete turnaround for the long-time migraine sufferer. What made the difference? Working closely with her doctor to develop a treatment plan that includes both preventive and acute medications. With her migraines dropping from more than 15 per month to just four or five, the Bellevue, NE, resident, says, “I have a new lease on life!”

New avenues to relief

Whether you suffer from episodic migraines (the kind that occur on fewer than 15 days per month) or chronic ones (which strike on 15 or more days per month for at least three

months), partnering with your health-care provider like Tina did is key. It's the best way to find out about the newest treatments and take advantage of the latest learning.

Last year, for the first time in more than a decade, the American Academy of Neurology (AAN) published new guidelines on the prevention of episodic migraines, identifying nearly a dozen effective medications and complementary treatments. What's more, nearly 40% of patients could benefit from such preventive therapies, says Stephen D. Silberstein, MD, professor of neurology and director of the Jefferson Headache Center at Thomas Jefferson University in Philadelphia.

Experts also have a deeper understanding of what triggers migraines and how to find faster relief. A pivotal finding: Treating a migraine quickly helps medication work better.

What you can do

If you're one of the nearly 30 million Americans who suffer from migraine, it's time to take a stand. Start by learning about your headaches—what type you have and what triggers them—and exploring your treatment options. That's where this guide



comes in handy. Get comfortable in your favorite armchair and read on. You'll get tips and real-life inspiration, which will help you turn the tables on migraine, just like Tina. “I finally feel like myself,” she says. “It's a freeing sensation.” ⑩

What kind of headache do

Take this quiz to find out if you might be or something else. Then review the results

Circle the answer that applies to you.

1. Your pain feels like this:

- a. throbbing or pulsating, usually on one side of your head. It may intensify during physical exertion.
- b. a band- or vice-like sensation in your head or neck. The dull, aching pain usually takes hold in your forehead, temples or the back of your neck and/or head. Both sides of your head are affected.
- c. sinus-related pain and tenderness, as well as a deep, dull ache that can worsen with head movements
- d. an intense burning or piercing sensation, especially on one side of your head. The pain may be localized behind one of your eyes and may radiate to your forehead, temple, nose, cheek or upper gum.

2. Your headaches are accompanied by these symptoms:

- a. appetite loss, nausea or vomiting and/or sensitivity to light, sound, odors or touch
- b. none
- c. nasal discharge, ear fullness and facial swelling, plus a fever
- d. the eyelid on the affected side may become swollen or droop, the nostril may become congested, and you may experience facial flushing and excessive sweating

3. The pain lasts this long:

- a. anywhere from 4 to 72 hours—sometimes even longer
- b. from 30 minutes to 7 days
- c. constant—until treated
- d. 30 to 45 minutes, but the headaches may occur frequently for several weeks or months.

4. The trigger may be:

- a. certain foods, hormonal changes, weather and/or stress
- b. stress, anxiety, fatigue or anger
- c. a sinus infection, allergic reaction or tumor
- d. seasonal (your headaches are most likely to occur in the spring or fall)




you have?
suffering from a migraine—
with your healthcare provider.

If your answers are mostly...

a: You may have migraine headaches. Nearly 30 million Americans suffer from these headaches, which strike three times more women than men. The pain may interfere with daily activities. If you experience headaches on 15 or more days a month for at least three months, **you may have chronic migraines.**


b: You may have tension headaches. Tension headaches, which cause mild to moderate band-like pain, are the most common type. They may come and go over a prolonged period, but they don't usually interfere with your daily life.

c: You may have sinus headaches. These are often caused by a sinus infection. You'll probably have a fever, and X-rays or a CT scan will reveal a sinus blockage (one or both nostrils are usually blocked). Be sure to see your doctor because many people who think they're suffering from sinus headaches actually have migraines, says Roger K. Cady, MD, founder and medical director of the Headache Care Center in Springfield, MO.

d: You may have cluster headaches. One of the least common types of headaches, these are almost always one-sided. 

Steer clear of your triggers

For some, skipping a meal sets off a migraine. For others, it's sunlight. In any case, a trigger causes the release of chemicals that irritate nerve endings on blood vessels and the brain's surface. Read on to find out if any of the following are causing your pain:


- **Food/food additives.** You may be sensitive to chemicals in chocolate and aged cheeses, as well as additives like the artificial sweetener aspartame. Other culprits include processed meats and monosodium glutamate (MSG).
- **Skipping a meal.** Migraine sufferers' bodies crave predictability.
- **Alcohol.** Alcohol causes nerve irritation. Also, many sufferers are sensitive to chemicals in red wine, scotch and bourbon.
- **Stress.** Everyday hassles like running late for an appointment or working long can cause nerve irritation and inflammation. Experiencing "letdown" after stress can have the same effect.
- **Odors.** Perfume and/or cleaning products can trigger a headache.
- **Changes in your routine.** Migraine sufferers are sensitive to schedule changes, such as sleeping too much or too little.
- **Cigarette smoke.** It can cause nerve irritation.
- **Hormone changes.** Sixty percent of women who suffer from migraines do so when estrogen levels drop (such as just before menstruation starts).
- **Intense exercise.** It stimulates the release of nitric oxide—a chemical that can cause nerve irritation—into the bloodstream.
- **Glare.** Nearly 90% of all migraine sufferers are sensitive to light. In a study published in *Nature Neuroscience*, researchers discovered a pathway in the brain that links the visual system to that which produces head pain.
- **A change in weather.** Changes in barometric pressure and cold or humid weather can alter your body's chemical balance.
- **A change in altitude.** If you climb mountains or ski, you may develop a migraine at high altitudes.
- **Head trauma.** Experts don't know exactly why this occurs, but headache is one of the most commonly reported symptoms after a traumatic brain injury. 

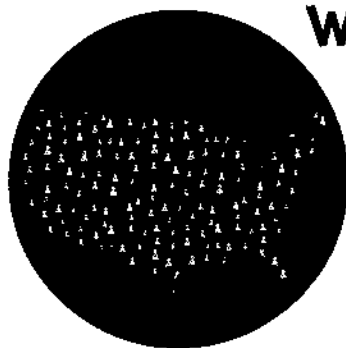


Your healthcare team

It helps to have an expert in your corner when you're battling a condition as challenging as migraine. Consider working with these healthcare providers, who can help you develop the best strategy for overcoming your pain:



- A neurologist specializes in disorders of the brain and nervous system. Look for one who is board-certified in pain or headache medicine.
- A pain specialist can diagnose and treat migraine. Look for one who is board-certified in neurology.
- An internist or family physician with a background in pain or headache medicine can diagnose and treat migraine.
- A nurse practitioner (NP) or physician assistant (PA) can support you during treatment.
- A psychologist or neuropsychologist can help you learn to better manage stress, which often triggers migraine. A psychologist can also help you cope with depression and/or anxiety.
- A physical therapist can teach exercises to reduce neck tension, which is common among migraine patients.
- A nutritionist can help identify your trigger foods.
- A sleep disorders specialist can diagnose any conditions that may be contributing to your migraines. 



**We can change
the course of
this disorder**

so little can do so much

**36 million
migraine
campaign**


Join us and make the difference

To learn more, visit us at www.AmericanMigraineFoundation.org

How *medications* can help

Great news: Your chances of getting life-changing relief from migraines are better than ever, thanks to a growing number of treatment options. Now there are proven ways to prevent migraines, according to new guidelines from the American Academy of Neurology. Preventive

therapies calm your hypersensitive nervous system so you experience fewer flare-ups. When a migraine does occur, it is usually less intense. Of course, during an episode, you

can still turn to acute medications to help ease the pain quickly. Ask your healthcare provider about the medications in the chart below and find the right approach for you. 

	MEDICATION	HOW IT IS GIVEN	HOW IT WORKS
PREVENTIVE	Antiepileptic (divalproex sodium, sodium valproate, topiramate)	Pill or syrup	Stabilizes nerve cells in the brain, making them less easily activated
	Antidepressant (amitriptyline, venlafaxine)	Pill	Boosts levels of the brain chemical serotonin, which helps calm the nervous system
	Beta-blocker (metoprolol, propranolol, timolol)	Pill or injection	Blocks the release of stress hormones like epinephrine and adrenaline, which can trigger migraines
	Nonsteroidal anti-inflammatory drug (NSAID) (fenoprofen, ibuprofen, ketoprofen, naproxen)	Pill, oral solution, injection	Relieves inflammation and pain. These medications are often prescribed on a short-term basis to women with menstrual migraines and patients who are suffering from other types of pain, such as back and/or neck
	Onabotulinum toxin A (a purified organic product) * for chronic migraine only	Injection (in a few locations)	Quiets hyperactive nerve cells and blocks the release of inflammatory chemicals involved in migraine pain
	Triptan (frovatriptan for short-term prevention of menstrual migraines)	Injection, nasal spray, pill	Prevents nerves on the surface of the brain from transmitting pain signals
ACUTE	Antinausea (metoclopramide, prochlorperazine)	Pill, liquid, suppository	Relieves nausea and migraine pain
	Dihydroergotamine (DHE)	Injection, nasal spray or orally inhaled (awaiting FDA approval at press time)	Blocks pain, reduces inflammation and shrinks swollen blood vessels
	Nonsteroidal anti-inflammatory drug (NSAID) (acetaminophen, diclofenac, ibuprofen, naproxen)	Pill, oral solution, injection	Relieves inflammation and pain
	Triptan/NSAID combination (sumatriptan and naproxen sodium)	Pill	Relieves inflammation, blocks pain and shrinks swollen blood vessels
	Triptan (almotriptan, frovatriptan, naratriptan, sumatriptan)	Injection, nasal spray, pill	Prevents nerves on the surface of the brain from transmitting pain signals

If frequent migraines are wreaking havoc on your work and family life, take heart: The latest treatments and lifestyle changes can help you feel better than ever.

Take charge of your chronic migraines!

For years, Mira Tzur, 41, would wake up with an unwelcome surprise: a migraine. "I would lie in bed with an ice pack and massage my temples," recalls the actress and producer in New York City. "I couldn't start my day until it was over." Anything from stress and a lack of sleep to hot weather and an extra glass of wine could set off her headaches, which struck two to three times a week. "I was like a walking zombie," recalls Mira, who has a 14-year-old son. "I was going through the motions of being a mom."

What is chronic migraine?

For migraine sufferers like Mira, life-disrupting symptoms like head pain and nausea last indefinitely. The condition is called chronic migraine, and it's diagnosed when you experience head pain on 15 or more days a month for at least three months in a row. It's far more debilitating than an occasional, or episodic, migraine. "An episodic migraine has a beginning and an end," says Roger K. Cady, MD, founder and medical director of the Headache Care Center in Springfield, MO. "When it ends, a person's nervous system returns to normal." With chronic migraine, the nervous system has less time to recover between headaches, so you may never feel completely pain free.

Who's at risk?

Anyone who has a family history of chronic migraine or suffers from episodic migraine is at risk. And the more frequent your migraines, the more vulnerable

you are, since they can cause your nervous system to become more sensitive. Gender also plays a role, as the condition is more common among women. Being overweight matters, too—having a body mass index of 30 or above means you have five times the risk of chronic migraine compared to people of normal weight, according to a National Institute of Aging study. Other factors include depression, anxiety and being overly sensitive to pain.

Finding your path to relief

Conquering chronic migraines usually requires a combination of medication and lifestyle changes, such as getting enough shut-eye, limiting caffeine intake to no more than 200 mg (the amount in about 10 ounces of coffee) and monitoring use of pain medications. Sound like a lot to juggle? Take heart! By working closely with your healthcare provider and having patience, you can find the combination that makes a difference for you.

The strategy certainly paid off for Mira, who sought the help of a physician when her usual standbys—over-the-counter and naturopathic remedies—no longer brought relief for her migraines. Making matters worse, her headaches started to occur with alarming frequency. Seeking medical help was the best thing she ever did. Her doctor prescribed an injectable medication that worked wonders. "It changed my life," says Mira, who gets the injections every six months. "Now I only get migraines once in a blue moon."

It helps that she does everything she can to avoid her triggers—especially stress. That means sticking

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*Have loved ones
act as partners
in your migraine
treatment plan,
recommends
Dawn Buse, PhD.*


to a sleep schedule, getting regular massages and going to twice-weekly yoga classes. Research backs up her approach: A recent study published in the *Journal of Pain Management* shows that yoga not only helps ease migraine pain, it also helps you overcome anxiety about any headaches.

Other approaches that have helped Mira keep tension at bay include biofeedback, in which you learn to control your body's response to stress. In one form, you place an electronic probe on your finger to monitor skin temperature. The probe helps you learn how to calm your body. She's also tried acupuncture, an ancient Chinese therapy in which needles are placed in certain areas of the body to restore balance. "It helps relax you," she says. A study published in the *Canadian Medical Association Journal* found that acupuncture cut in half the number of migraines patients experienced.

Getting the most out of life

Strengthening her circle of support has also made a difference for Mira. The more family, friends and co-workers understand about your migraines, the less vulnerable you'll be to feelings of guilt, anxiety and depression, she says.

"Have friends and family members act as partners in the process," recommends Dawn C. Buse, PhD, director of behavioral medicine at the Montefiore Headache Center in New York City. For instance, you can make a pact to take a walk with them three times a week, which may help stave off headaches. Consider bringing a loved one to a medical appointment; your doctor can help legitimize your struggle.

As for Mira, she couldn't be happier. Since starting her new treatment, everything has fallen into place. These days, she says, "I wake up excited for life!" 

Are you a candidate for preventive therapies?

It's possible to short-circuit migraines before they start with preventive therapies. These medications are designed to reduce the frequency and severity of attacks. You might benefit if you fall into any of the following categories:

- You aren't getting relief from acute medications or you can't tolerate them
- Your migraines strike more than once a week or you need to take headache-relieving meds more than a few times per week
- You're getting complicated forms of migraine (with aura)
- Your migraines are interfering with your daily routine

"I conquered my

These five patients feared they'd never find relief from their debilitating headaches. Today, they're working closely with their healthcare providers and thriving. Here are their inspirational stories.



"I treat my headaches early"

Ken still didn't know what was triggering his headaches. One day he was at work and noticed the strong air-conditioning bothered him. Over time, he figured out that cold air was the cause of his headaches, which became worse in the winter. "I wore a hat to bed and in the house, and it helped," says Ken. But he was still getting more than 10 migraines per month. "This was no way to live," he says.

Ken decided to see a

neurologist at a major medical institution. The doctor advised Ken to start tracking his migraines—to log when he got them, how long they lasted and how severe they were. He also prescribed a triptan medication, which can stop a migraine in its tracks. "I learned I had to treat the headaches early," says Ken. "The faster I treated them, the faster they would go away." Whenever Ken was exposed to cold air and started to get a migraine, he'd take a prescription nonsteroidal anti-inflammatory, and the headache would go away. If it didn't, he would take a triptan.

Today, Ken gets only a few very mild migraines per month. He treats

them so quickly that he rarely needs to take a triptan. Recently, he had to host a work-related dinner for 500 people, and he felt a migraine coming on. He took his medication and was fine. "I feel very fortunate that I've identified my trigger and have a treatment plan that works," he says. "I worked with my doctor to get to the point that migraines don't interfere with my life."

Make Ken's strategies work for you

- **If one medication isn't working, try another.** "You'll need to experiment to find the right one," says Ken.
- **Consider seeing a specialist.** "If your case is difficult or unusual, you may want to see a top headache specialist," says Ken. Consider looking for one at a major medical institution or a local teaching hospital.
- **Be prepared.** "There's not a day I leave the house without my medication," says Ken. He also takes his hat with him wherever he goes. "Being prepared is half the battle," he says.

When Ken Freirich started getting headaches in his early 30s, he didn't know what was causing them. The pain, which started around his temples, would linger for a few days and he'd become nauseated as well. Over time, the headaches became more frequent, striking seven to 10 times a month or more. They became a disruption to his life; he had to cancel social plans and come home from work early. So Ken, a 44-year-old executive in Montvale, NJ, saw his primary care doctor, who diagnosed him with migraines. The doctor prescribed a nonsteroidal anti-inflammatory, but it wasn't enough.

migraines!"



"I took a preventive therapy"

herself snapping at co-workers and family members. "A migraine feels like there's a monster living inside my head," she says. "I became irritable."

Then, about four years ago, Carmella's doctor suggested she try a preventive medication, and the relief was practically immediate: "My headaches dropped from more than 15 days a month to half that, then a quarter," she says. "It was life-changing." She also makes a point of avoiding her triggers, which include extreme stress and insufficient sleep. "I got my life back," she says.

Make Carmella's strategies work for you

- **Don't ditch your treatment plan.** When Carmella tried to go off her medication, her headaches came back with a vengeance.
- **Find out how to manage your headaches at work.** Carmella often needed to shut her office door and dim the lights. Your doctor can help you find a treatment plan that will minimize disruptions to your schedule.

For Carmella Engels, 52, of Phoenix, AZ, migraines appeared like a bolt out of the blue. "Until nine years ago, I didn't really have headaches at all," she says. "Suddenly, I was having them all the time." She saw a neurologist and was diagnosed with chronic migraine.

In the meantime, Carmella found



"I found the right medication"

my husband to take care of our kids, who were only 2 and 5 at the time," says MJ.

Eventually, she was prescribed two different antiseizure drugs and an antidepressant, which she couldn't tolerate. "There wasn't a day I didn't worry that a migraine was coming," she recalls. MJ switched to a new doctor who gave her a prescription nonsteroidal anti-inflammatory drug as a daily preventive therapy. She hasn't had a migraine in a month and is hopeful the headaches won't return. "I'm relieved," she says.

Make MJ's strategies work for you

- **Take control.** Talk regularly with your healthcare provider so you can come up with the best treatment plan for you.
- **Review medications with your healthcare provider.** "Whenever you get a new prescription, tell your doctor about any over-the-counter medications you're taking to make sure everything is compatible," says MJ.

When MJ Boensch turned 40 in 2009, she had a lot to celebrate—two healthy kids and a new home in Upper Saucon Township, PA. Then she started to get migraines. She was prescribed a medication that didn't help. "I'd have to cancel my plans and rely on

Continued on following page



"I went fragrance-free"

For Suzette Jacobs, 53, it was easy to tell what brought on her migraines: strong odors. "Every time I got near a perfume counter or went to the laundry room, I got an instant migraine," says the stay-at-home mom in New York City.

Luckily, between avoiding troublesome scents and using triptans to head off attacks, Suzette has slashed her migraine attacks from near constant to just one headache every few months. "Now I notice natural smells much more," says Suzette.

Make Suzette's strategies work for you

• **Order online.** "I order Seventh Generation Natural Hand Wash in Just Clean Unscented and Method Laundry Detergent in Free + Clear in bulk so I don't run out."

• **Look for these words:** fragrance-free! There's a difference between unscented and fragrance-free products, Suzette warns. Some unscented products contain fragrance maskers.

• **Filter offensive odors.** Suzette tucks coffee beans in a zip-lock bag and carries them wherever she goes. A sniff helps mask offensive odors. She also carries a charcoal filter mask, which filters respiratory irritants. Charcoal filter masks are available via Amazon.com.



"I got rid of the glare"

For Jan Melara, migraines have been a 24-year struggle. She first noticed glare was a problem when she was in her 30s. "I remember squinting into the sun one day and feeling my right shoulder tighten up the way it does when a headache is starting," says Jan, 57, a former nurse

ing supervisor in Laurens, SC. "I had a headache that evening." That helped explain why she had gotten so many headaches at work: "The hospital had fluorescent lighting, and it bothered my eyes."

Today, she stays away from overhead lights whenever possible and wears sunglasses whenever she's outside or near a window. "I try to avoid situations in which I'll be exposed to glare, such as kayaking into the setting sun," she says. She also avoids stress as much as possible. Now, she gets only three migraines per month, down from 15 or more. "I can actually be myself now," she says. "It's as if a curtain has opened to reveal a lovely new life!"

Make Jan's strategies work for you

• **Always have shades on hand.** "When I buy prescription glasses, I always get photochromic lenses [the kind that darken automatically]," says Jan. "But since they don't darken enough when I'm inside a car, I wear dark sunglasses instead."

• **Pick the right lighting.** "Overhead lighting, especially fluorescent, contributes to my headaches, so I use lamps whenever possible," says Jan. She purchases daylight-spectrum bulbs for places where overhead lighting is unavoidable, like the bathroom. 10

Get the most from your meds

Is medication part of your migraine treatment plan?
Take it as prescribed for the best benefit.

Forgot to take a pill...or two? Missed your injection appointment? You're not alone! According to a study published in the journal *Pain Practice*, around 70% of patients prescribed medications to stave off their migraines stopped taking them six months later. Be sure to tell your healthcare provider if you're having trouble following your treatment plan. Then, try these tips for staying on track:

- **Forgetful? Remind yourself—every way you can!**

Put sticky notes on your fridge or bathroom mirror. Set an alarm on your watch or phone. Ask your kids to remind you. And if you've been prescribed injections, jot down your appointments in all of your calendars.

- **Hate the side effects? Speak up!** Whether it's weight gain, drowsiness or dry mouth, tell your healthcare provider. The answer may be as simple as adjusting

your dose or the time you take the med, says Roger K. Cady, MD, founder and medical director of the Headache Care Center in Springfield, MO

- **Can't afford them? Lower the cost!** Some pharmaceutical companies have low-cost programs for patients who qualify. Be sure to ask your healthcare provider or pharmacist if you might be eligible. Or contact the Partnership for Prescription Assistance (pparx.org).

- **Expecting too much? Check your perspective!** Stopped taking your meds because you still get migraines? "Meds decrease the frequency of attacks, but don't prevent all of them," says Stephen Silberstein, MD, professor of neurology and director of the Jefferson Headache Center at Thomas Jefferson University in Philadelphia. Talk to your healthcare provider if you're still getting too many. ☞

WE KNOW HEADACHES

At the **National Headache Foundation** our mission is to help you. We reach out to patients, caregivers, and the physicians and many healthcare professionals who treat them. Check out our resources—they're easy to get your head around:

- **WEBSITE** – the most comprehensive collection of information on migraine and headache on the web with the ability to help find a headache specialist near you. (www.headaches.org)
- **NHF CHAT ROOMS** – bi-monthly Q&A webinars which are an opportunity for anyone experiencing or interested in headache to have questions answered online with an expert. (See "Our Community" on the website.)
- **NHF FACEBOOK PAGE** – provides relevant news, discussions, and a place to connect with others who experience migraines and headaches. (Search "National Headache Foundation" on Facebook.)
- **CALL-IN LINE** – speak with staff members who are caring, polite, and knowledgeable to get guidance on next steps. 888-NHF-5552

WE CAN HELP

NATIONAL
HEADACHE
FOUNDATION



Migraine-proof



A few easy and remarkably effective strategies can help you fend off migraines at home, at work and on the road.

BY KAREN ASP

AT HOME

• Do something you love every day—whether it's reading to your kids, playing with your dog or making dinner with your partner. "Building in these little breaks will restore your nervous system and help your brain make 'feel-good' chemicals like serotonin and beta endorphins, which can protect against migraines," says Roger K. Cady, MD, founder and medical director of the Headache Care Center in Springfield, MO.

• Hit the sheets regularly. Aim for seven to eight hours of shut-eye each night, and go to bed and wake up at the same time every day. If you have any sleep problems, see your healthcare provider. Studies have found a relationship between disturbed sleep (for instance, waking up frequently throughout the night) and more frequent or severe migraines.

• Eat on a schedule. Be consistent, since skipping meals can trigger migraines. Make sure, too, that you're getting protein and complex carbohydrates at each meal. Protein will prevent blood sugar fluctuations, which can trigger migraines, while complex carbs will prevent your blood sugar from dropping. A migraine-friendly breakfast could include eggs with turkey sausage, fresh fruit and yogurt, or peanut butter on whole-wheat toast.

• Get moving. Aim for 30 minutes of exercise daily. Doing housework and walking your dog both count! A recent study found that when migraine sufferers did aerobic exercise for 40 minutes three times a week for three months, the frequency of attacks was reduced by 25% on average. Exercise can also improve sleep and reduce stress, both of which can help ward off migraines.

your life!

ON THE ROAD

• **Pretreat.** Travel can be difficult for migraine sufferers, since any change in your usual schedule can be a trigger. If travel sets off your headaches, ask your healthcare provider about pretreating with a triptan. Take it about an hour before you leave and perhaps for one to two days afterward, recommends Dr. Cady. If that works, do the same thing on your way home.


• **Acclimate to altitude.** A change in altitude can cause a migraine, so avoid exercise when you arrive and stay hydrated, says Stephen Silberstein, MD, professor of neurology at Thomas Jefferson University in Philadelphia.

AT WORK

• **Get comfortable.** Is your desk not the right height for you? Are your feet dangling instead of planted on the floor? If so, make some changes. "If one part of your body hurts, your whole body will hurt, which could bring on a migraine," says Dr. Silberstein.

• **Cut down on glare.** The light on your computer screen could trigger a migraine. Consider installing an anti-glare screen on your computer.

• **Create a focal point.** Put a photograph, small object or something that holds meaning to you in your office. Make a point of looking at it several times a day. Take a few deep breaths, which will decrease your stress level and help you avoid migraines, says Dr. Cady.

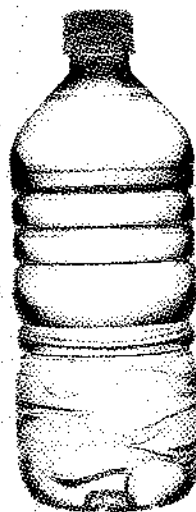
• **Check the lighting.** Flashing or fluorescent lights can be a pain, literally. If the lighting in your office can't be changed, consider wearing shades with polarized lenses, says Dr. Silberstein. And if you're sitting near a window, you'll need to lower the blinds or wear sunglasses. 

Your migraine tool kit

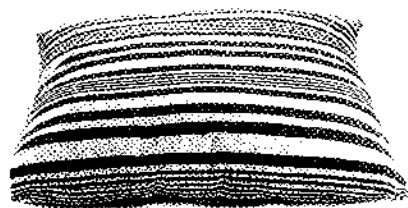
If you suffer from migraines, create a personalized migraine kit, which can come to your aid if a severe headache strikes unexpectedly. Here's a list of what it could include:



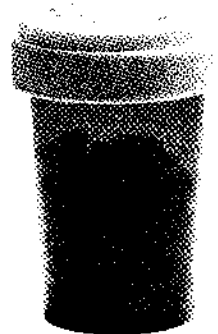
An eye mask
to shield your eyes from light



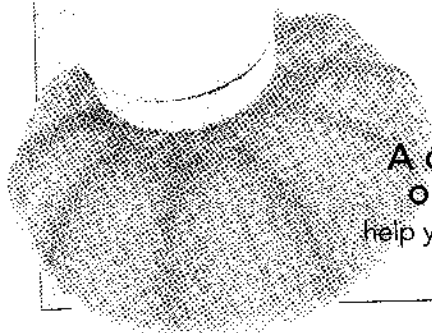
A bottle of water
Dehydration can lead to headaches; you'll also need it to take your migraine medication.



A small pillow,
which could come in handy for resting



Medication
can treat a headache ASAP



A cold compress or pack, which can help your throbbing head

10 questions for your next exam

Good communication is the key to effective treatment for your migraine. Get started by asking these questions.

1. Could my headache be a migraine?

2. What's the best way to identify my triggers?

3. Could any of my medications be making my headaches worse?

4. Which treatment do you recommend and why?

5. Should I expect any side effects? What can I do to minimize them?

6. How can I tell when a migraine is coming on, and at what point should I start taking medication?

7. Could I benefit from preventive therapies?

8. What lifestyle changes can I make to reduce the frequency of my headaches?

9. If I get daily headaches, could I have chronic migraine?

10. When should I come back to see you?

Resources you need...

Looking for more info on migraines? Hoping to connect with others who understand you? These organizations offer the answers you want and the support you need, and you can visit them all with a click by logging onto HealthMonitor.com/MigraineResources



The American Migraine Foundation (AMF) supports innovative research and education that will lead to improvement in the lives of those who suffer from migraine and other related disorders.



American Chronic Pain Association

The American Chronic Pain Association (ACPA) facilitates peer support and education for people with chronic pain and their families so that they may live a fuller life. ACPA also raises awareness of issues associated with chronic pain.



The National Headache Foundation enhances the health of those with migraine by providing educational and informational resources, supporting headache research and advocating for the understanding of headache as a legitimate neurobiological disease.



NATIONAL FIBROMYALGIA & CHRONIC PAIN ASSOCIATION. Migraines and chronic pain are a challenge to manage. Join the National Fibromyalgia & Chronic Pain Association (NFMCPA) at FMCpaware.org for education, research information and important advocacy programs to improve your healthcare and protect your access to care.



Academy of Pain Management is a nonprofit professional organization serving clinicians who treat people with pain. The largest pain management organization in the nation, it is the only one that embraces an integrative model of care. It also offers continuing education, publications and advocacy.



American Pain Association is currently working on the education of medical personnel and the public they serve, research, media resources, product development, institutional pain program development and accreditation. We help to create awareness and support patients.



The Migraine Research Foundation (MRF) raises money to fund innovative research grants to further the understanding of migraine's causes, develop improved treatment targets, and find the cure. MRF also assists sufferers by providing information and support.