



Disclaimer: This leaflet provides general information and should not be used as a substitute for professional medical advice. It is essential to consult with a qualified healthcare professional for any health concerns or before making any decisions related to your health or treatment.

Overview

Migraine is a common neurological condition that can cause a variety of symptoms, including severe headaches. It's often misdiagnosed as sinusitis, especially when the pain is focused around the sinuses. However, migraine is a distinct condition with its own set of characteristics. This leaflet aims to provide a clear understanding of migraine, its causes, diagnosis, and management.

Symptoms and Causes

Migraine is more than just a headache. It's a complex neurological event that involves changes in nerve activity within the brain. These changes can lead to a wide range of symptoms, including:

- **Headache:** The headache associated with migraine can vary in intensity from mild to severe. It's often described as throbbing or pulsating and may be felt on one or both sides of the head.
- **Aura:** Some people experience aura before a migraine headache. Aura can involve visual disturbances (e.g., flashing lights, zigzags, blind spots), sensory changes (e.g., tingling, numbness), or speech difficulties.
- **Sensitivity to light, sound, and smell:** Many people with migraine find that light, sound, and smell become bothersome during an attack.
- **Nausea and vomiting:** These are common symptoms of migraine, particularly during severe attacks.
- **Fatigue:** Migraine can be incredibly draining, leaving you feeling tired and washed out.
- **Dizziness and vertigo:** Some people experience feelings of dizziness or spinning during a migraine attack.
- **Mood changes:** Migraine can affect your mood, making you feel irritable, anxious, or depressed.
- **Neck pain:** Neck pain and stiffness are common in migraine and often mistaken as the cause.
- **Other symptoms:** Some less common symptoms include diarrhoea, increased urination, and difficulty concentrating.

The exact cause of migraine isn't fully understood, but it's thought to involve a combination of genetic and environmental factors. Certain triggers can make migraine attacks more likely, such as:

- **Stress:** Stress is a common migraine trigger, both during stressful periods and after stress is relieved.
- **Changes in sleep patterns:** Too much or too little sleep can trigger migraine attacks.
- **Caffeine withdrawal:** Cutting back on caffeine can lead to migraine in regular caffeine users.
- **Menstrual cycle:** Hormonal changes during menstruation can trigger migraine attacks in some women.
- **Certain foods and drinks:** Some people find that certain foods or drinks, such as aged cheese, red wine, or chocolate, can trigger migraine. However, these true food triggers are rare and usually, cravings for these foods are part of the early phases of the attack, often mistaken as the cause of the migraine.
- **Overuse of painkillers:** Ironically, taking painkillers too often for headaches can make migraines worse.

Diagnosis and Investigations

There is no single test to diagnose migraine. The diagnosis is usually based on your symptoms, medical history, and a physical examination. Your doctor will ask you about your headaches, including:

- **How often they occur:** Do you get headaches several times a month, or only occasionally?
- **How severe they are:** Do your headaches make it difficult to carry out your daily activities?

- **What the pain feels like:** Is it throbbing, stabbing, or a dull ache?
- **Where the pain is located:** Is it on one side of your head, or both sides?
- **Whether you experience any other symptoms:** Do you get nausea, vomiting, aura, or sensitivity to light, sound, or smell?

Your doctor may also perform a neurological examination to check for any problems with your nervous system. Sometimes a headache diary is recommended to track your attacks in more detail. Blood tests are occasionally done to rule out other causes, especially if the headache is a new symptom.

Migraine vs Sinus Headache / Sinusitis – Key Differences

Feature	Migraine	Sinus Headache / Sinusitis
Pain location	Often one-sided, but can be both sides	Usually felt in the cheeks, forehead, or around the eyes
Pain type	Throbbing or pulsating	Dull ache or pressure
Associated symptoms	Aura, nausea, vomiting, sensitivity to light, sound, and smell	Nasal congestion, runny nose, facial pressure, fever
Triggers	Stress, caffeine withdrawal, lack of sleep	Viral or bacterial infections
Duration	4-72 hours	7-10 days (acute), or weeks to months (chronic)

Management and Treatment

The treatment for migraine aims to relieve your symptoms and prevent future attacks. Treatment can involve lifestyle changes, medication, and other therapies.

Lifestyle changes:

- **Regular sleep schedule:** Try to go to bed and wake up at the same time each day, even on weekends.
- **Stress management techniques:** Yoga, meditation, or deep breathing exercises can help manage stress levels.
- **Regular meals:** Skipping meals can trigger migraine attacks, so aim to eat regularly throughout the day.
- **Hydration:** Drink plenty of fluids, especially water.
- **Caffeine reduction/elimination:** If caffeine is a trigger for you, consider gradually reducing your intake.

Over-the-counter pain relief:

- Paracetamol (available OTC): Take 1000mg at the onset of pain.
- Ibuprofen (available OTC): Take 400mg at the onset of pain.
- Aspirin (available OTC): Take 900mg at the onset of pain.

Prescription medication:

- **Triptans:** These medications are specifically designed to treat migraine attacks. They work by constricting blood vessels and blocking pain pathways in the brain. Examples of triptans available in the UK include sumatriptan and zolmitriptan (available by prescription).
- **Antiemetics:** These medications can help relieve nausea and vomiting associated with migraine. Domperidone (available by prescription) is often prescribed for this purpose.
- **Preventive medication:** If you experience frequent or severe migraine attacks, your doctor may prescribe preventive medication to reduce the frequency and severity of your attacks. Examples include:

- Propranolol (available by prescription): A beta-blocker that can help reduce the frequency and severity of migraine attacks.
- Topiramate (available by prescription): An anticonvulsant that can help prevent migraine attacks.
- Amitriptyline (available by prescription): A tricyclic antidepressant that can also help prevent migraine attacks.
- Candesartan (available by prescription): A blood pressure medication that can also be effective in preventing migraine.

Other therapies:

- **Cefaly:** This is a handheld device that delivers electrical impulses to the forehead to stimulate the trigeminal nerve, which is involved in migraine pain. It can be used to treat acute attacks and prevent future attacks. It is available to purchase privately, but not on the NHS.
- **Acupuncture:** Some people find acupuncture helpful for migraine relief, but more research is needed to confirm its effectiveness.

Prevention

The best way to prevent migraine attacks is to identify and avoid your triggers. Keeping a headache diary can be helpful for this. Once you know your triggers, you can take steps to avoid them. If lifestyle changes and avoiding your triggers aren't enough to prevent your attacks, preventive medications can be used.

Outlook / Prognosis

While there is no cure for migraine, effective treatment can significantly reduce the frequency, severity, and duration of attacks. Migraine can be a chronic condition, but many people are able to manage their symptoms well and live full and productive lives. Working closely with your doctor and following your treatment plan can greatly improve your quality of life.