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Migraine - Just Not A Headache

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Abstract- Today we are living a world that is moving very fast and has a lot of impact on our health. Headache seems to be a day to day problem - but wait is it headache or Migraine? Let us try to understand migraine in details and how adopting a holistic approach can bring about a positive change in the management of migraine in our lives.

Key word- Migraine, phonophobia, Depression, Hemicrania

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Introduction-

Migraine, the second most common cause of headache, afflicts approximately 15% of women and 6% of men over a one year period. It is usually an episodic headache associated with certain features such as sensitivity to light, sound, or movement; nausea and vomiting often accompany the headache. A

useful description of migraine is a benign and recurring syndrome of headache associated with other symptoms of neurologic dysfunction in varyingadmixtures it is the most common vascular headache which is more common in females. Migraine can often be recognized by its activators, referred to as *triggers*

ACTIVATORS	DEACTIVATORS
hunger	Happiness
Lack of sleep/oversleeping	Sleep
Menstruation	Pregnancy
Flashing of light	
Red wine, chocholate, cheese	
Monosodium glutamate	
Oral contraceptive pills	
Worries	
Unaccustomed exertional activity	
Sustained exertional activity	
Perfumes	

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Types and Clinical Presentation:

1. CLASSICAL MIGRAINE:

It is characterized by weakness and irritability followed by a phase of aura which has neurological manifestation which are mostly Visual aura in the form of scotoma with a central visual field defect. Patient develops motor symptoms such as par aesthesia or motor sensation such as weakness of limbs, dysphagia. Motor symptoms are uncommon.

Phase of aura followed by throbbing headache associated with nausea and vomiting. Classical visual hallucination in migraine is known as Fortification spector which occurs only in 10% cases which appears as paracentralscotoma which develops into C shape luminous angles. It enlarges in periphery and disappears. This episode takes 20-30 minutes which is pathognomic of migraine. In some older patients neurological manifestations in the phase of aura is more prominent feature because they develops only mild headache known as migraine equivalent.

2. COMMON MIGRAINE:

Migraine without aura. It is characterized by moderate to severe headache which is mostly unilateral and has pulsatile quality. Associated with photophobia, phonophobia, nausea, vomiting, scalp tenderness. The attack is progressive which may remain for 4 to 72 hours. This is the most common presentation without any neurological manifestation.

3. BACILLAR MIGRAINE:

It is mainly seen in children, young females and older males. It is characterized by Dysarthria, vertigo, diplopia followed by headache

4. BICKERSTAFF MIGRAINE:

In some female patient this special variety is seen which is characterized by blindness, ataxia, vertigo, dysarthia, perioralparaaesthesia. It remains for 20 to 30 minutes than there is throbbing headache mostly occipital.

5. CAROTIDYNEA:

It is also known as lower half headache or facial migraine. It mainly affects older people. The pain is dull or throbbing in character located in the lower half of face and neck with swelling and tenderness at the site of pain.

6. FAMILIAL HEMIPLEGIC MIGRAINE:

It is uncommon type with genetic origin characterized by Hemiparesis during the phase of aura which remains for 30 to 60 minutes followed by headache.

Simplified Diagnostic Criteria for Migraine

Repeated attacks of headache lasting 4–72 h in patients with a normal physical examination, no other reasonable cause for the headache, and:

At Least 2 of the Following features	Plus at Least1 of the following Features
Unilateral pain Nausea/vomiting	Nausea
Throbbing pain	Vomiting
Aggravation by movement	Photophobia
Moderate or severe intensity	Phonophobia

Once a diagnosis of migraine has been established, it is important To assess the extent of a patient's disease and disability. For this The Migraine Disability Assessment Score (MIDAS) is a well-validated, Easy-to-use tool.

Holistic Approach In Management Of Migraine -

Lifestyle Management:

Most patients benefit by the identification and avoidance of specific headache triggers. A regulated lifestyle is helpful, including a healthful diet, regular exercise, regular sleep patterns, avoidance of excess caffeine and alcohol, and avoidance of acute changes in stress levels. measures that benefit a given individual should be used routinely since they provide a simple, cost effective approach to migraine management. Patients with migraine do not encounter more stress than headache-free individuals; responsiveness to stress appears to be the issue. Since the stresses of everyday living cannot be eliminated; lessen in gene's response to stress by various techniques is helpful for many patients. These may include yoga, transcendental meditation, hypnosis, and conditioning techniques such as Bio-feedback.

Preventive Perspective of Migraine with Homoeopathy:

Homoeopathic medicines not improves immune system but also the mental and emotional states .In fact, homeopaths are trained to look for diseases before they happen. When a homeopath prescribes constitutionally, he or she is prescribing not only for the present ailment but for tendencies which have not yet manifested themselves as medically recognized ailments. The foetus in the womb be treated homeopathically to minimize imbalances inherited from the mother and father. Homeopathic treatment of childhood ailments lessens the risk of the latent weaknesses they cause being activated in later life - infants and children, with their newly minted immune systems, respond excellently to homeopathic treatment. In adults, prompt homeopathic treatment of minor illnesses can often prevent persistent, and sometimes serious. complaints developing in later life. At all

points in the cycle of development, birth, growth and maturity, subtle symptoms of constitutional weakness can be picked up by careful homeopathic analysis and treated before they burgeon into chronic and entrenched disease.

Homoeopathic Therapeutics:

Research studies have clearly demonstrated that homeopathy treatment for migraine has significant help to offer to patients in terms of reduced frequency of migraine headaches, reduced intensity of the attacks and improvement in quality of life after commencing treatment.

- 1. Aconite: Sunstroke, especially from sleeping in the sun's rays; burning headache, as if the brain were agitated by boiling water, fullness and heavy feeling as if everything would push out of forehead, vision obscured, pressing and contracting pains in the upper part of forehead, face swollen, pale
by light, noise, motion>by lying quietly in the dark room, by nosebleed, by copious urination.
- 2. Asarum Europ: Intense compressive headache in left temple and behind ears, when< walking, or shaking head,>When sitting: pressure over greater part of brain from without inward; stupid feeling in head, no desire to do anything; sensation of coldness at a small spot on left side of head; hair does not bear combing from tension of scalp; mental dullness, dizziness, feels as if he were drunk.
- 3. Ailanthus Glan.: Passive congestive headache and dizziness, face red and hot,>by nosebleed(Arn.);head burning hot with piercing pains, followed by drowsiness the whole day with no inclination to think or to act.
- **4. Ammonium Brom:** Frontal headaches; tinnitus aurium from congestion on labyrinth; sensation as if band were tied around the head.
- **5. Antimonium Crud:** Stupefying dull headache in the forehead, so violent that sweat breaks out from anxiety when

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walking the fresh air; violent headache after bathing in the river with weakness in the limbs and aversion to food; dull headache and vertigo, increased by ascending stairs.

- **6. Argentum Nit:** Migraine; headache with sensation as if the head were enormously large; vertigo with debility and trembling from nervous weakness> after dinner, wine, pressure < coffee, mental labor. Sensation as if the bones of the scull separated.
- 7. Arsenicum: Hemicrania, severe exhausting pain over left eye, intense frontal headache with vertigo > by cold water on head, by walking up < wrapping head up warm,By lying with head low during windy weather.
- **8. Belladonna:** Violent hyperaemia, with throbbing carotids, red face, intolerance of least jar, noise or light; hemiopia, retinal blindness, slight paralysis of tongue, even transitory hemiplegia >afternoon or evening, before or during menses < dark room, noise.
- **9. Cocculus:** Migraine with vertigo and nausea, pain specially in frontal region > eating, drinking, walking in fresh air, riding in a carriage, boat, train or cars
- **10.** Colocynthis: Hemicrania from anger with indignation, after suppression of menses, pain extending towards forehead and left side of head with nausea vomiting or diarrhea.
- **11. Gelsemium:** Hemicrania with dim sight or double vision, or preceded by great sensitiveness to noise, coming on suddenly with vertigo, semi stuper, dull. >when sitting, by reclining head high.
by exertion or study; par oxysm ends with profuse urination.
- **12. Glonoinum:** Hemicrania from excessive use of wine; nausea, is obliged to sit down, dimness before eyes, followed by most violent headache, > by vomiting
- **13. Nox Vomica:** Gouty and haemorrhoidal patients. Attacts set in the morning when awaking, getting worse during the day;

nausea and vomiting during attack; drawing, aching feeling as of a nail driven into the head. <from mental exercise, by motion and by rest, from stimulants; patient irritable with his abdominal plethora.

- **14. Sanguinaria:** Migraine in women who menstruate freely; excessive pains with bilious vomiting attack begin in the morning and gets worse during the day, right sided; attack every seventh day; the veins of the suffering temple full of blood and sensitive to touch.
- 15. Spigelia: Terrible pain in globe of eye as if it were torn out; dilatation and immobility of the pupil; temporal blindness; boring, tearing, stitching pain < from touchor after washing, but > while washing it.
- **16. Theridion:** Flickering before eyes; nausea aggrevated by closing eyes and by the noise; extreme hyperaesthesia of acoustic nerve; throbbing over left eye and across forehead, sick stomach, < on rising from lying; desire for stimulants.

Reportorial Representation

Boericke's repertory

HEAD- Migraine(megrim, nervous)-anac, arg n, bell, calc ac, can ind, dm, coco, coff, eye/, epiph, gels, guar, ign, iris, kali c, lac deft,lach, meli, menisp, nuxvom, onos, puts, sang, scutel, sep

Concise Repertory- Phathak

MIGRAINE-chio, gels, ipec, kalibi, lac defl, natmur, natsul, onos,psor. lob, sang, spig, sil, ther

Knerr repertory

Inner head-hemicrania(megrim, migraine)- Cham, sil, apis, argnit,am, ars, asar. bar c, bry. calc, caps, clem, chin, cocc, cornus, gels,indigo, kali bi, kreos, lach, lac defl, syph, ver

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BOGER'S REPERTORY

Head internal – Migraine – Colo., Puls., Nuxvom, Sang., Sep.

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