

PATIENT INFORMATION

Chronic Migraine

Chronic migraine is a disabling neurologic condition that affects 2% of the general population.

Patients with chronic migraine have headaches on at least 15 days a month. In addition to frequent headaches, patients can experience hypersensitivity to light, sounds, and smells, and nausea and vomiting.

In addition, some patients with chronic migraine present with other complaints (e.g. chronic fatigue, neck or back pain, generalised body pains and tenderness, dizziness, vertigo, poor memory and forgetfulness, numbness or pins and needles down one side of the face or body, exacerbation of irritable bowel symptoms, depression, irritability, etc.). Appropriate treatment of this condition may provide significant relief of these symptoms.

A headache is typically described as “migrainous” if it has *any* associated features, e.g. nausea, throbbing, worsening by movement, or some degree of sensitivity to noise, light, or smell. Pain may occur *anywhere* in the head or face. It may also occur in the neck. A small number of patients experience “aura” before or with their migraine. This may include visual disturbance, odd sensations, or difficulties with normal speech.

Most often chronic migraine starts as individual (“episodic”) attacks of migraine, which gradually become more frequent over time. They may or may not become more severe. Typically the gaps between severe headaches fill in with milder intermittent migrainous headaches until there become relatively few days of the month where the head feels “crystal clear” (with no pressure, tightness, aching, discomfort or throbbing all day long).

Certain things may trigger a change from acute to chronic migraine and include hormonal changes, viral illness, stress, head injury etc. We often cannot identify a particular cause in individual cases. However, despite the initial trigger, it can be the intake of painkillers and other “episodic” attack medications and/or caffeine that keep it going. Regularly taking these medications on more than 2 to 3 days a week is likely to stop chronic migraine getting better.

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

Working with you, for you