

## Migraine: A Devitalizing CNS Disorder

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Migraine is defined as a condition characterized by recurring headache with intense pain that typically begins on one side of the head but may spread to both sides. It is often accompanied by nausea, vomiting, and even includes sensitivity to light or sound. Sometimes, it is preceded by an [aura](#) which is nothing but temporary visual or other disturbances. It has been classified into 10 types based on its symptoms. The worldwide prevalence of headache due to tension is approximately 40% and migraine 10%. Most commonly migraine occurs between 25 and 55 years age and it is 3 times more common in females than males.

Both environmental and genetic factors are implicated in the pathogenesis of migraine. According to the trigeminal nerve vascular theory, activation of trigeminal nerve causes release of vasoactive peptides, which contributes to dilation of blood vessels and neurogenic inflammation of the duramater. Among the released substances, calcitonin gene-related pep-tide (CGRP), nitric oxide (NO), substance P, and endothelin (ET). Cortical spreading depression that occurs due to reduced cerebral blood flow switches on the migraine generator. Aura symptoms may appear when cerebral blood flow falls below a critical value in patients.

Physical exam, imaging studies and differential techniques are employed to diagnose the condition. Lifestyle and trigger management, acute treatments (i.e. medicines taken during attacks), and preventive treatments (interventions designed to decrease the attacks) are three broad approaches for managing chronic migraine. Regular meals, proper hydration, sleep and keeping stress at bay is always helpful in reducing the chances of migraines. Triptans should be used in case of ineffectiveness of simple analgesics and it is better to avoid opiates in this situation. Non-invasive techniques

such as transcranial magnetic stimulation and vagal nerve stimulation came into practice recently. In spite of lack of evidence, alternative therapies are often acceptable to patients because of less side effects. Chronic use of large doses of vitamin B2 and magnesium might be useful in migraine. Manipulative therapies may be as effective as amitriptyline for treating migraine headaches and can reduce the frequency and intensity of pain. Homeopathy is not effective in controlling migraine whereas acupuncture probably has only an short term analgesic effect. Early diagnosis coupled with strict adherence to proper treatment will help to keep the condition at bay.

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