

information such as light, sound and odors. The thinking process slows down. Muscles become tight and tender, blocking the message from the brain to relax. Ultimately, blood vessels lose their regulation, swell and become inflamed, producing the headache associated with migraine. Interestingly, the Center for Disease Control has reported that over the past ten years, the prevalence of migraine has increased by almost 60%.

### The Migraine Attack

The changes from a balanced nervous system to one destined for an attack of migraine often unfolds in a predictable manner. This process occurs in five different phases: prodrome, aura, headache, resolution, and postdrome. Keeping a diary helps you recognize the progress of these phases in your particular headache pattern. By intervening early, the migraine attack may be diverted completely. Sometimes by simply removing yourself from a stressful situation or by nurturing the nervous system with a nap, the impending attack of migraine may be avoided.

The first phase of a migraine attack is called a **prodrome**. This is an

*“I’m constantly afraid that a migraine will spoil my plans.”*

awareness that a migraine is looming out there in the near future. Identifying the subtle changes of a prodrome is a first step in exercising control over the impending migraine. A prodrome precedes about 50-80% of migraine attacks. Common prodromal changes may include mood variations, such as irritability, depression, or elation. Other prodromes may involve alterations in mental processing. Light may appear too bright or halos may surround streetlights. Yawning and fluid retention are also common. Food craving, especially for chocolate, is frequently reported and may be confused as a migraine trigger.

The second phase of migraine is called an **aura** and occurs in about

15% of migraine attacks. Auras are disruptions of nervous system function that last several minutes up to one hour (it is rare for auras to last longer than this). They usually happen before the headache of migraine begins but the symptoms may occur during the headache too. Auras are best thought of as short circuits in the electrical connections of the brain caused by the changing chemical balance associated with an attack of migraine.

The most common auras are changes in vision. Frequently there is a

*“I really resent my migraines.”*

light show consisting of flashes of light or a blind spot in the field of vision, encircled by jagged, shimmering light. Other aura symptoms may include numbness of the fingers, hands, and lips. At times, auras can be spectacular involving changes in perception of time and space. The most comforting aspect of an aura is that it is brief. If auras persist beyond the headache, then it is important to discuss this with your physician.



Scientists used to think that auras happened when too little blood flowed to an area of the brain. Without enough blood, there was a lack of oxygen, causing the brain cells to misfire. While minor changes in blood flow occur during a migraine attack, today we recognize auras as an electrical phenomenon that occur in response to chemical disruption. Generally auras are not treated with medicine unless they are particularly disruptive.

The third phase of migraine is called the **headache phase**. Usually the most dramatic symptom, the headache may begin in different ways even in the same migraineur. For many, the headache may be on one side of the head, pounding in nature, moderate to severe in