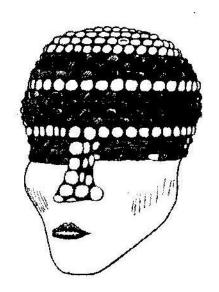
Your doctor will instruct you concerning how to avoid rebound headaches. If you are currently in a medication headache pattern, your doctor will assist you with a plan to manage this often-debilitating headache pattern. Once an analgesic headache pattern is properly treated, daily headaches often return to intermittent migraines that are treatable by acute medication.

HEADACHES MAINTAINED BY MEDICATION



Many medications used to treat migraine may lead to daily headaches. In these instances, the person initially gets relief from the medication but over time finds that more medication is required to keep severe headaches away while suffering a perpetual low grade headache. Without the medication, a severe rebound headache results.

Rebound headaches occur

because the medication damages the communication systems of certain nerve cells. The nerve cells communicate by sending chemical messengers from one cell to another. The communication chemical connects to the next nerve cell by fitting into a receptor, like a plug into a socket. When these sockets are exposed to certain chemicals found in medications for periods of time, damage to the receptors may occur. Because the receptors are damaged, normal communication is disrupted, making the person more vulnerable to risk factors that cause headaches.

The only way to end this vicious cycle is to stop the medication caus-

ing the damage and allow the nerve cells to repair or replace the damaged receptors. Your physician will assist you through this period of time with other medications. However, determination and time are required to free oneself from the rebound headache cycle. Also essential to success is developing a support system with family, friends, and a psychologist. The psychologist provides guidance for avoiding the fears and behaviors that lead to rebound headaches and teaches ways to soothe the nervous system, such as biofeedback. The psychologist and physician work in concert to manage this difficult headache pattern.

THE FAMILY OF SEROTONIN DISORDERS

Another characteristic of migraineurs is that they are often susceptible to conditions other than migraine. Many of these conditions are associated with an imbalance of a brain chemical called serotonin. Serotonin is a communication chemical for the brain and involved in many disorders including migraine, depression, anxiety, sleep difficulties, and irritable bowel syndrome. When serotonin levels are suddenly decreased, migraine may result. However, if the process is more chronic in nature, depression and sleep problems may develop.

The disorders associated with being a migraineur are called co-morbidities. Discussing this concept with your physician is a very important part of headache care. Learning how to manage a migrainous nervous system is the key to successful migraine management as well as preventing these co-morbid conditions.

MANAGING MIGRAINE AS A MIGRAINEUR

Patient-centered stratified care initially focuses on effective control of the acute migraine attack. This promotes confidence and allows you to be part of the decision-making process that ultimately refines your management program.

This approach addresses the variability of migraine attacks and the variety of circumstances and personal needs demanded of treatment.