## **Editorial Note on Migraine Pain**

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Received date: 01 December, 2021; Accepted date: 15 December, 2021; Published date: 22 December, 2021

## **Description**

A migraine is a headache that causes severe pulsing feeling or a throbbing pain, usually on one side of the head. It's often accompanied by vomiting, nausea, and extreme sensitivity to sound and light. Migraine pain can last for hours to days, and the pain can be very severe that it interferes with our regular activities.

For some people, a warning indication known as an aura occurs with or before the headache. An aura can contains visual disturbances, such as blind spots or flashes of light, or other disturbances, such as tingling on one side of the face or in an arm or leg and people can suffer difficulty in speaking. Auras are reversible signs of the nervous system. Each symptom commonly initiates gradually, builds up over several minutes and can last up to 60 minutes.

Migraine headaches can be disturbing and make it impossible to go to work or experience other daily activities. Fortunately, there are some ways to probably stop a migraine and other ways to help us to manage and endure the symptoms.

Medications can help the affected person to prevent some migraines and make them less painful. Lifestyle changes, the right medicines and combined with self-help remedies might help to prevent this disorder.

Migraines can also affect children and teenagers as well as adults, can develop through four stages: prodrome, aura, attack and post-drome. Not everyone who is having migraines goes through all stages. Before one or two days of migraine we might notice subtle changes that warn of an upcoming migraine such as constipation, food cravings, neck stiffness, increased urination, fluid retention, frequent yawning, mood changes, from depression to euphoria

Examples of migraine auras include:

 Visual phenomena, such as seeing various shapes, bright spots or flashes of light

- Vision loss
- ·Pins and needles sensations in an arm or leg
- ·Weakness or numbness in the face or one side of the body
- Difficulty speaking

A migraine usually lasts from 4 to 72 hours if untreated. How often migraines occur varies from one person to another. Migraines might occur rarely or strike several times a month. During a migraine, we might have some troubles:

- ·Pain usually on one side of your head, but often on both sides
- ·Pain that throbs or pulses
- ·Sensitivity to light, sound, and sometimes smell and touch
- ·Nausea and vomiting

After a migraine attack, we might feel exhausted, confused and washed out for up to a day. Some people feel ecstatic. Sudden head movement might bring on the pain again. Migraines are often undetected and untreated. If regularly anyone has signs and symptoms of migraine, he/she should keep a record of the attacks and how they treated them. Then they should discuss with their health providers about this problem. The doctor should know about the pattern of changes.

However migraine causes aren't fully understood, genetics and environmental factors seem to play a role. Changes in the brainstem and its connections with the trigeminal nerve, a major pain pathway, might be involved. So might inequities in brain chemicals including serotonin, which helps to control pain in our nervous system.

Now researchers are studying the role of serotonin in migraines. Other neurotransmitters play a role in the pain of migraine, including Calcitonin Gene-Related Peptide (CGRP). Taking painkillers too often can activate serious medication-overuse headaches. The risk seems to be highest with acetaminophen, aspirin, and caffeine combinations. Overuse headaches may also occur if we take aspirin or ibuprofen for more than 14 days a month or triptans, sumatriptan (Imitrex, Tosymra) or rizatriptan (Maxalt, Maxalt-MLT) for more than nine days a month.

## Conclusion

When medications stop relieving pain and begin to cause headaches. You then use more pain medication, which continues the cycle.

Migraines tend to run in families. Four out of five people with migraines have a family history. If one parent has a history of migraines, their child has a 50% chance of having them. If both parents have a history of migraines, the risk jumps to 75%. Again, up to 80% of people with migraines have a first-degree relative with the disease.