

To find the effectiveness of Homoeopathic Medicines in Reducing the duration intensity and frequency in attacks of Migraine and assessing the improvement in quality of life in the age group 15-60 years.

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ABSTRACT:

Background: Migraine is a neurological disease which usually causes a pulsating, throbbing headache on one side of the head. The pain may be extremely bad and hurt so much that a person may have a hard time following his routine. Not every person who is diagnosed with migraine suffers with headache. There are different kinds of migraines, and some do not cause a headache but do have symptoms. Most migraines cause headache and nausea and might make the person dizzy or very sensitive to bright lights or loud noises. Some people have "auras" before a migraine starts, which means their vision becomes different. Patients may see funny patterns, have blurry vision, or may not be able to see at all. Other senses can change before or during a migraine, and the patient may sense funny smells or tastes. Migraines can last for a long time. Migraines usually last between four and 72 hours. Modern medicine doesn't know the cause of onset of this disorder hence cannot figure out a curative treatment for the same. **Objectives:** To improve the quality of life of patients suffering from migraine after homoeopathic prescription and to study the efficacy of homoeopathic medicines in cases of migraine. **Materials and methods:** The study is a case series was carried out in 45 patients within the age group of 15 to 60 years suffering from migraine fitting the inclusion criteria were prescribed individualized homoeopathic medicines for migraine and followed for a period of 6 months. The outcome assessment was done by scores before and after treatment. **Result:** At the end of the study it was observed that out of 45 patients, 37 patients improved (82%). The average age of the patients taken into consideration was 28.9 which is mostly the age where people are at their peak of career and need to be as productive as possible. Migraine limits their productivity to a great extent, usually more than 50%. Out of the 45 cases studied, only 12 were males (27%) and 33 patients were females (73%), hence the prevalence was more in females than males. The commonest used medicines were Natrum mur, Ignitia, Pulsatilla, Nux vomica and Arsenic album. **Conclusion:** There is a broad scope of homoeopathy in the treatment of migraine in improvement of quality of life by reducing the intensity, duration, and frequency of episodes. **Keywords:** Homoeopathy, Migraine, Quality of life.

Introduction: Migraine is a type of primary headache. It is most commonly found in high socio-economic population. Migraine is a type of benign headache associated with other neurological symptoms. Migraine has a triad of paroxysmal headache, nausea and/or vomiting, and an 'aura' of focal neurological event (usually visual). According to International Classification of Headache disorders, 3rd edition by International Headache Society, there are six major types of migraine such as Migraine without aura, migraine with aura, chronic migraine, Complications of migraine, Probable migraine and Episodic syndromes that may be associated with migraine which in turn contains so many subtypes. The diagnosis of migraine headache is based entirely on the history.

There are no radiologic studies or blood tests needed. Migraine should be suspected in those that have a family history and usually begins in teen years or early adult-hood ⁽¹⁾.

Activators/Triggers of Migraine- Food items like cheese, chocolates, citrus food, dairy products, onion, seafood, Food additives like nitrates, caffeine, MSG (monosodium glutamate), aspartame , Alcohol - red wine, beer, Hormonal changes as in menstruation, ovulation, Physical exercise causing exertion, fatigue , Visual stimuli like bright light, glare , Auditory stimuli like loud voices/music , Olfactory stimuli which includes perfumes and certain typical odors, Sleeping pattern- too much or too little, Weather changes, Hunger, Head or neck trauma, Mental stress

Deactivators of Migraine – Pregnancy (increased levels of oestrogen during pregnancy reduce the episodes of migraine significantly and a woman hardly has any episodes during gestation), Exhilaration (state of joy or pleasure which releases endorphins, also known as happy hormones, which ultimately help in reduction of episodes of migraine).

Causes of Migraine- Exact cause is still unknown, Genetic predisposition.

Types/Classification of Migraine- Migraine without aura, migraine with aura- with a typical aura- typical aura with headache, typical aura without headache. Migraine with brainstem aura, hemiplegic migraine, familial hemiplegic migraine, sporadic hemiplegic migraine, Retinal migraine, chronic migraine.

Description of Migraine Attack The migraine attack can be divided into four phases: The prodrome phase, which occurs hours/days before the headache. The aura phase, which immediately precedes the headache. The headache phase itself 6.4 The headache resolution phase. Prodrome Phase- Premonitory phenomenon occurs in about 60% of migraine, often hours to days before headache onset, may include psychological, neurological, constitutional, or autonomic features, the prodrome phase is common. It occurs in equal frequency in migraine with and without aura. ⁽²⁾

Life style modification management: Individuals who have migraines can play a significant role in managing their headache frequency and severity. Patients should monitor the time of onset, the interval between two attacks, duration of pain, triggering factors, and symptoms. These can help to identify patterns that precede a migraine and help identify factors that contribute to the development of the headache. Once the patient understands the contributing factors, lifestyle modifications can lessen their impact. Maintaining a routine for sleeping and eating, avoiding those foods that might trigger a migraine. Exercise regularly: Some people find that exercises that promote muscle relaxation can help manage migraines' pain. Examples of types of mind-body practices that can help encourage relaxation are: Yoga, Meditation, Progressive muscle relaxation ⁽³⁾

Materials and methods:

a) **Type of study design:** A case series.

b) **Setting (Location):** Motiwala (National) Homoeopathic Medical College and Hospital OPD. c)

Duration of study: 6 months

d) **Method of study:** Convenient random technique of 45 patients was done with the help of case recording format, pain scale⁽⁵⁾ and migraine specific questionnaire⁽⁴⁾, Case taking according to the case format, Repertorization using Synthesis repertory (RADAR) and complete repertory (CARA).

Selection of individualized homoeopathic medicine referring to Organon of medicine⁽⁸⁾ and Homoeopathic material medica⁽⁷⁾, Follow up based on scales and questionnaire.

Total number of participants: 63.

Total number of participants with inconsistencies in data: 18.

Total number of participants with consistency in follow ups: 45.

Total number of participants who gave consent: 45.

Average age of the 45 patients: 28.9 years. e)

Method of selection of study subject:

i) Inclusion criteria:

- People with chronic unilateral headache.
- In the age of 15 to 60 years.
- Both sexes.
- Patients willing to give informed consent.

ii) Exclusion criteria:

- Patients with other neurological disorders.
- Pregnant & lactating females.

Procedure: The study was conducted over a period of 6 months. Screening and convenient sampling was conducted. Written informed consent was taken from patients. Case taking was done according to predesigned CRF for 45 patients. Details of migraine in terms of intensity, duration, frequency, aggravating and ameliorating factors, etc were recorded. On the basis of totality of symptoms, individualized homoeopathic medicines were prescribed. All the collected data of the cases and follow ups was systematically maintained.

Statistical Analysis: At the end of the study, it was observed out of 45 patients that 37(82%) patients improved. The average age of the affected patients was 28.9. It affected more females (73%) than males(27%).

The commonest prescribed medicines were Natrum mur, Ignitia, Pulsatilla, Nux vomica and Arsenic Album.

Result: Homoeopathic medicines are effective in cases of migraine when prescribed on the basis of individualization and totality of symptoms.

Improved: 37/45 patients.

Not improved: 8/45 patients.

Discussion:

Migraine is a chronic form of unilateral headache which is extremely severe in intensity and the duration of which varies from few hours to few days. It restricts the patient in performing the routine and reduces the productivity in all sectors of life. It limits the patient to a great extent which usually leads to anxiety, depression and underconfidence in the life of the patient. A screening of 45 patients was conducted with the help of predesigned CRF and Migraine specific questionnaire at Motiwala National Homoeopathic Medical College and Hospital, Nashik. According to the data, it was observed that females suffered more than males due to migraine. The most commonly found triggering factors in our study were found to be exposure to sunlight, stress related to various things, loss of sleep and fasting or missing the time of meals. Medicines were prescribed on the basis of individualization and totality of symptoms. Most commonly prescribed medicines were Natrum mur, Ignitia,

Pulsatilla, Nux vomica, Arsenic album. During the course of the study, we not only observed improvement in the complaints of migraine in terms of intensity, duration and frequency of episodes but also in the accompanying symptoms like hyperacidity, fissure in ano, anorexia, anxiety, etc. There was marked improvement in the quality of life of patients which was assessed with the Migraine Specific Quality of Life Questionnaire which also helped in the improvement in the confidence levels of the patients.

NRS Comparison- before and after the study:

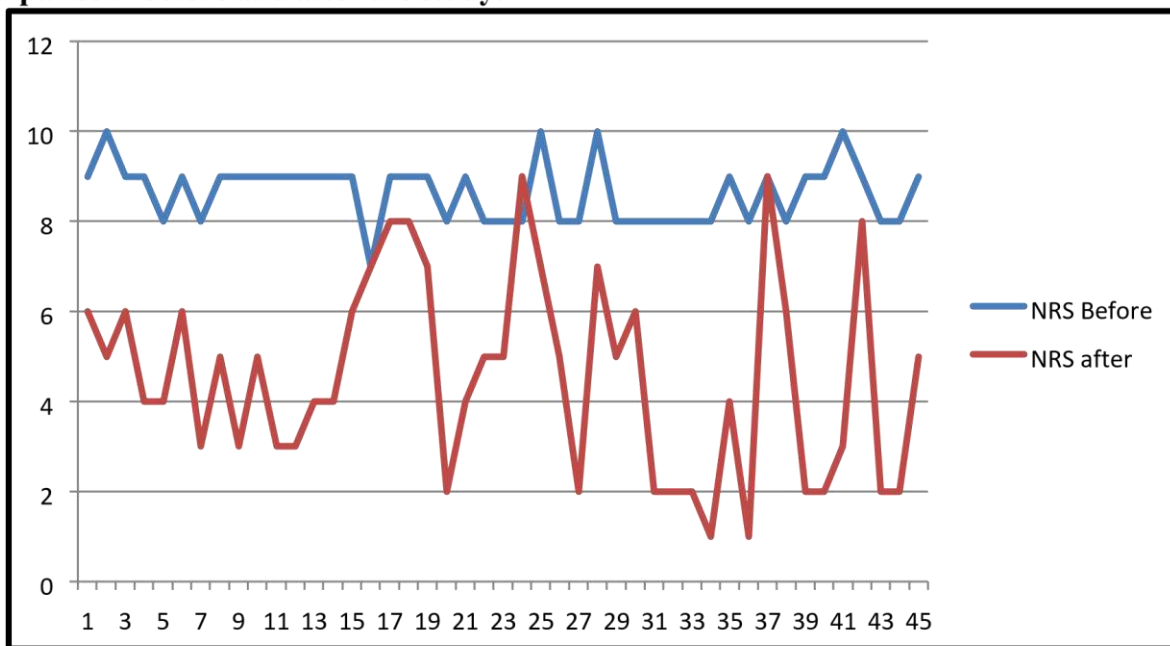


Fig. 01- NRS Comparison

In Fig. 1 we have shown a graphical representation in the change of intensity of pain of the episode of migraine before and after the study. It was observed that the average NRS score for 45 cases before the treatment was found to be 8.64 and after the treatment it significantly reduced to 4.56.

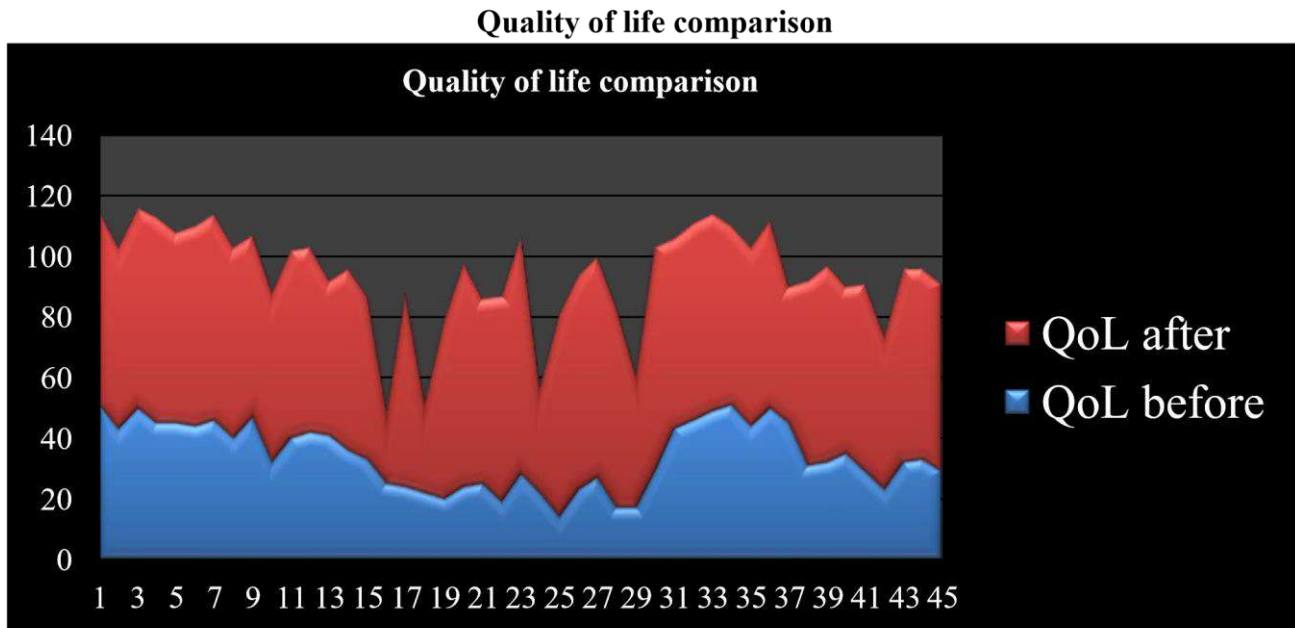


Fig. 02: Quality of life comparison

Quality of life was measured with a migraine specific quality of life questionnaire. The minimum score which symbolized worst quality of life was 14 and the maximum score which symbolized best quality of life was 84. In our study the average value of quality of life of patients before prescription was found to be 34.29 and after the prescription was found to be 60.27. Thus, we can say that the quality of life was improved significantly.

Frequently used medicines:

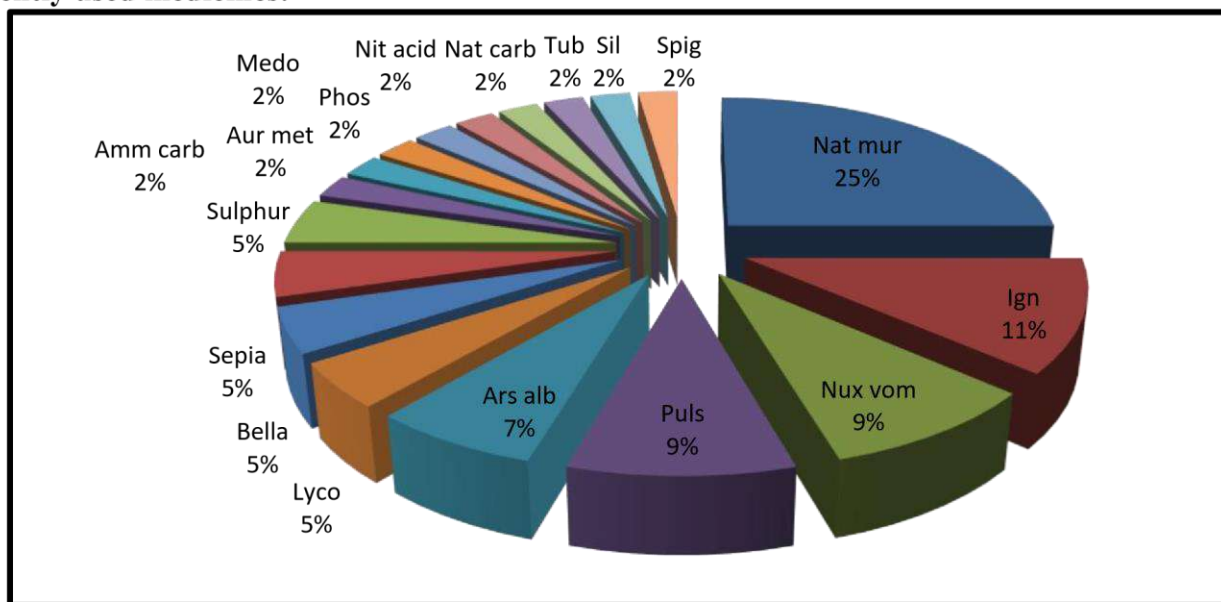


Fig. 03 Frequently used medicines.

The given pie chart (fig 03) is the graphical representation of the most frequently used medicines in our study. We found that most people got relieved by Natrum muriaticum. All these medicines were prescribed on the basis of symptom similarity and reportorial totality.

Conclusion: After the careful study of 45 cases we would like to conclude on the basis of our study that homoeopathic medicines are effective in the treatment of migraine by reducing the intensity, duration and frequency of episodes thus, improving the quality of life of patients suffering from migraine.

Bibliography:

1. Dr. Krishneswari RS. Role of homoeopathic medicines in the treatment of migraine. *Int J Hom Sci* 2021;5(1):229-233. DOI: 10.33545/26164485.2021.v5.i1d.320
2. Dr. Rakesh Gohel, Dr. Rachita Joshi, Dr. Akanksha Barot, Dr. Kirti Katiyar, Dr. Rushabh Shah. Efficacy of homoeopathy in management of migraine. *Int J Hom Sci* 2021;5(4):388-392. DOI: 10.33545/26164485.2021.v5.i4f.501
3. Dr. Subhasish Sarkar, Dr. Asif Sardar. Role of homoeopathy in migraine: A review. *Int J Hom Sci* 2021;5(1):415-418. DOI: 10.33545/26164485.2021.v5.i1g.345
4. <https://capeneuro.wpenginepowered.com/wp-content/uploads/2020/01/Migraine-Questionnaire.pdf>
5. <https://www.sralab.org/sites/default/files/2017-07/Numeric%20Pain%20Rating%20Scale%20Instructions.pdf>
6. Dugashvili, Giorgi & Van den Berghe, Linda & Menabde, Giorgi & Janelidze, Marina & Marks Prof. dr, Luc. (2016). Use of the universal pain assessment tool for evaluating pain associated with TMD in youngsters with an intellectual disability. *Medicina Oral Patología Oral y Cirugía Bucal*. 22. 10.4317/medoral.21584.
7. William B, *New Manual Of Homoeopathic Materia Medica with Repertory*, New Delhi, B. Jain Publishers, 1901.
8. Samuel H, *Organon of Medicine*, 6th Edition, Paris, Richard Haehl, 1921.