

Migraine Misconceptions

Straight facts on a misunderstood condition

Misconception #1: A migraine is a bad headache.

Migraine is a complex neurological disease with incapacitating symptoms. It usually includes severe throbbing pain, but symptoms may also include visual disturbances, nausea, vomiting, dizziness, extreme sensitivity to light, sound and smell, and heavy fatigue. It's the third most prevalent illness in the world—about 12 percent of the population experience migraine at some point.

Misconception #2: You can just work through it.

The World Health Organization lists migraine among the top ten most disabling diseases around the globe. With four distinct phases, each migraine episode may last from a few hours to a few days. Chronic migraine disease means a person experiences migraine at least 15 days out of the month.

Misconception #3: Control your triggers and you'll be fine.

Because of the complexity of neurological factors and the unique combination of dietary, personal, and environmental factors that can result in an attack—like the weather or someone else's perfume—it's impossible to manage all the factors all the time for complete prevention.

Misconception #4: Over-the-counter medications will do the job.

For the most part, no. In fact, taking more medication as an attack becomes more severe or prolonged, or as attacks become more frequent, can actually make things worse. Yet many patients don't respond to or tolerate prescription options. Hospital emergency departments follow established protocols for breaking intractable attacks.



IMAGE: ADOBE STOCK

Misconception #5: It's just stress.

No. For some people—not all—stress might be one of several factors that contribute to an attack, but the underlying disease is not due to stress. In fact, there's a genetic component. A child with one parent with migraine has a 50 percent chance of having migraine as well, and a 75 percent chance if both parents have migraine.

Misconception #6: No one can help.

Yes, you can help. While there is no cure, empathetic care goes a long way.

- Understand if your friend or loved one with migraine has to cancel plans.
- Be flexible if the person needs an adjustment to the environment, such as lighting or sound, in order to be with you.
- Help with hydration and simple comfort measures during the worst phase of an attack.
- Stay in touch by phone or text. Help your friend not to feel isolated from the faith community because of illness.
- Pray regularly for the migraine sufferer to find hope and wholeness even with a chronic illness.

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