

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting:

<https://reachmd.com/programs/rethinkingmigraine/The-Multimodal-Approach-to-Migraine-Treatment/9971/>

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The Multimodal Approach to Migraine Treatment

Opening Announcer:

This is ReachMD. Welcome to this special series, *Rethinking Migraine*, sponsored by Lilly. On this episode, titled *Personalized Treatment Approaches* we will hear from Dr. Rashmi B. Halker Singh, Assistant Professor of Neurology and director of the Headache Fellowship Program at the Mayo Clinic in Phoenix, Arizona.

Dr. Singh:

Most patients with migraine would benefit from a multi-modal approach to migraine treatment. Pretty much all patients with migraine would benefit from an acute treatment plan to help with their acute migraine attacks. If an individual is having more than two headache days per week or needing to use acute treatment more than once or twice a week on a consistent basis, they'd likely also benefit from a prophylactic treatment to help reduce their headache frequency. In addition, I feel that all patients of migraine would benefit from a discussion about lifestyle modifications that can be helpful in reducing their headache frequency. I like to talk to my patients about their "SEEDS to headache success."

So SEEDS, S-E-E-D-S. The first "S" stands for sleep. Are they having sleep problems? Are they snoring? Should we be screening them for sleep apnea? Do they have insomnia? I ask my patients all these questions and if they say "yes" to any of them, we get them on the right treatment plan.

The first "E" stands for exercise. We all know that regular exercise can be a part of a healthy treatment

plan for headache, as well as other health issues.

The next “E” stands for eating. I talk to my patients about their diet and make sure that they’re eating regular healthy meals, and also avoiding caffeine if they’re suffering from frequent headaches.

The “D” stands for headache diary. It’s important to keep track of how often someone is having headaches, because sometimes change is not that obvious, until you keep track of it. It’s also important to keep track of how often someone is needing to use acute treatment. Because if they need to use acute treatment more than 10 days per month, those medications can actually contribute to their headache frequency. And it’s also important in case the patient has a headache trigger that they’ve not yet identified.

The final “S” stands for stress reduction. So if someone is experiencing quite a bit of stress, using tools to help reduce stress can actually help with headaches as well. And if a patient of mine is endorsing symptoms suggestive of stress, I will refer them for biofeedback

Closing Announcer:

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