Migraine Headaches

Migraine is the second most common type of headache after tension-type headache. Migraines can happen as often as every day or as rarely as once every few years. A migraine can strike at any time, but some people notice a pattern. For example, migraines may occur around menstruation or at the end of a stressful week.

During a migraine, the brain and the nerves in your head and neck change, causing pain and other symptoms. The pain from a migraine is often intense, throbbing, or pounding. It can be felt in the forehead, temples, back of the head, around the eyes, or sometimes in the jaw or ear.

Migraine symptoms may include:

- Mild to severe pain on one or both sides of the head
- Avoiding daily activities with a desire to rest
- Nausea or upset stomach
- Sensitivity to light and/or sound

Chronic Migraine
When migraines happen often, it is called chronic migraine. This is the most disabling form of migraine and can be harder to treat. People with chronic migraines often need treatment and lifestyle changes to help reduce how often and how severe their headaches are. If you have chronic migraines, your treatment may include Botox® injections.

Migraine Phases

Early Warning Phase
Some people notice certain symptoms hours or even days before a migraine starts. These can include:

- Mental slowing
- Mood changes
- Drowsiness
- Fatigue
- Retention of fluids
- Neck pain/stiffness
- Food cravings

Neurological Symptoms (Aura)
About one in four people with migraine have temporary neurological symptoms called an **aura**. An aura can last between 5 and 60 minutes and may happen up to an hour before the headache starts. During this time, you might see flashing lights, zigzag lines, or lose part of your vision for a short time. Some people also feel tingling or numbness in their face or hand, or have trouble speaking for a short time.

Headache Phase
The headache phase is often the most intense part of a migraine. You may need to rest in a dark, quiet room to avoid noise, lights, or other triggers. The headache can last from a few hours to several days. In rare cases, the headache lasts all the time.

Recovery Phase
After the headache phase, you may feel tired, weak, or have low energy. These symptoms are like the early warning signs and can last for a couple of days.

Causes
We don't know the exact cause of migraines. Some people may have genes that make them more likely to get migraines.
Your environment or diet can also trigger migraines. Triggers are different for each person. Some people can easily figure out what triggers their migraines, while others may not notice a pattern. A trigger may cause a migraine one time but not another.

Triggers
Some common triggers of migraines include:

- Stress
- Hormonal changes
- Heat/weather changes
- Alcohol
- Smoke
- Odors
- Too much or too little sleep
- Skipping meals

Diet Tips
Eat small, regular meals and try not to skip them. **Avoid** strict diets. Cutting too many foods can make you miss key nutrients. Aim for a balanced diet for good health. Migraines often have more than one cause, not just food.

Sometimes a craving happens before a migraine and looks like a trigger. If a food always causes a migraine, avoid it. Some common food and drink triggers include:

- Alcohol (especially red wine and beer)
- Chocolate
- Aged cheeses
- Cured meats (like salami or pepperoni)
- Smoked fish
- Yeast extracts
- Foods with nitrates or nitrites
- Artificial sweeteners (like aspartame)
- Monosodium glutamate (MSG)

Treatment
There are many treatment options for migraines. Success often involves both lifestyle changes and medicines. The goals of treatment are to:

- Decrease the number and severity of your headaches.
- Allow you to be active, get back control of your life.
- Enjoy life as fully as you can with as few side effects as possible.

Treatment Methods

- Medicines
- Biofeedback training
- Stress management
- Getting rid of certain foods
- Aerobic exercise, such as swimming or walking
- Yoga

Types of Medicines
There are two types of medicines to help with migraines.

- **Preventive medicines;** These reduce the number and strength of the attacks.
- **Abortive medicines:** These treat a headache once it has started.

Caffeine can sometimes help with migraine pain, either by itself or with other medicines.

Preventive Medicines
There's no strict rule for when to start these medicines. We may prescribe medicine if you have four or more headaches a month, if headaches are hard to manage with regular medicine, or if they interfere with daily life.

Most preventive migraine medicines need to be taken daily to work. Others need to be taken once a month or once every three months. It may take several weeks to a few months before you notice progress. It's important to be patient. Common medicines include:

- Verapamil
- Propranolol
- Valproate
- Topiramate
- Gabapentin
- Amitriptyline
- Venlafaxine
- Other medicines

Abortive Medicine
Abortive medicine is used to stop or relieve a migraine when it starts. They usually work best at the start of an attack. Some options include:

- **Triptans**
  - Sumatriptan (Imitrex®
  - Rizatriptan (Maxalt®)
- **Gepants**
  - Ubrogepant (Ubrelvy®)
  - Rimegepant (Nurtec®)

Over-the-counter options include:

- **Aspirin**
- **Acetaminophen** (Tylenol®)
- **Ibuprofen** (Advil®, Motrin®)
- **Naproxen** (Aleve®)

Side Effects
Many headache medicines can have side effects. But like most medicines they are fairly safe when used with care and under your doctor's orders. Make sure you know the side effects of your medicines. Your doctor can help answer any questions.

Medicine Overuse Headaches
Taking migraine medicine too often can cause headaches and make migraines worse over time. The biggest risk comes from opioids (Norco®/Percocet®) and medicines with barbiturates (Fioricet®).

Over-the-counter pain medicine such as aspirin, acetaminophen (Tylenol®), or ibuprofen (Advil®, Motrin®) can also cause headaches if used more than half of the days in a month.

Behavioral Treatment
Behavioral treatments help manage migraines. They work best when used with medicine. These treatments include:

- Cognitive-behavioral therapy (CBT)
- Biofeedback
- Relaxation techniques

Migraine pain can keep your body stressed, which may make headaches worse. Behavioral treatments break this cycle and give you more control. People do best when they use these treatments with preventive medicine.

If you want to try these options, talk with your doctor about what might work for you.

Planning Your Treatment
Your doctor will help you set up a treatment plan for your headaches. Write it down and keep a copy with you.

Resources
National Headache Foundation
1-800-843-2256
www.headaches.org

National Institutes of Health Neurological Institute
1-301-496-5751
www.ninds.nih.gov

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 1/2026. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5355