



## Efficacy of Homoeopathy in treatment of Migraine

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**Abstract :** Migraine is a primary episodic headache disorder characterized by various combinations of neurological, gastrointestinal and autonomic changes. It is a common disorder and is the major cause of absenteeism from work and avoidance of social and personal activities. Migraine is a manifestation of constitutional disorder and as such it requires constitutional treatment for its cure. Medicines covering symptoms of headache only may give temporary relief from time to time but a complete cure there by may not be possible unless the Homoeopathic constitutional medicine is prescribed in appropriate doses. Homoeopathy is a better mode of treatment in such cases, since it can remove the disease in its whole extent in a reliable and the most harmless way.

**IndexTerms –** Migraine, Homoeopathy, Anti-miasmatic, headache, holistic, Tension headache.

### I. INTRODUCTION

Migraine is a severe headache type and can have a considerable impact on the daily life of sufferers and affects between 17 per cent of women and 6 per cent of men, although estimates vary. Accurate diagnosis of the different presentations of migraine is the foundation of effective prescribing and management.

Diagnostic pointers for migraine.

1. Attacks last from 4 to 72 hours
2. Patients are usually symptom-free between attacks
3. Headache is at least two of the following
  - a. Unilateral (on one side)
  - b. Pulsating
  - c. Moderate to severe
  - d. Aggravated by routine activities
4. Accompanying symptoms may include
  - a. Photophobia (more sensitive to light)
  - b. Phonophobia (more sensitive to noise)
  - c. Nausea and Vomiting

Acute Tension Headache Type:

Muscle Contraction Headache or Acute Tension Headache Type occurs in about 50% of the population on a monthly basis. Typically this headache type is mild to moderate only, non-pulsating and bilateral. Sensory sensitivity to noise or light is more likely to be associated with migraine. Difficulties arise when patients who are suffering from migraine are misdiagnosed as having a tension headache type. Patients often describe the pain as a “feeling of tightness or squeezing”. The causes of tension headache type are not known.

Chronic Daily Headache Type:

Chronic Daily Headache is defined as a headache type which is present on most days i.e. > 15 days a month, typically occurring over a six-month period or longer and it can be daily and unremitting. In some patients, an episode of chronic headache resolves in a much shorter time. It can occur in children and in the very old. Twice as many men have it compared to women. Many different classifications have been used to describe Chronic Daily Headache including medication misuse headache, hemicrania continua and transformed migraine. Chronic Daily Headache Type is characterised by a combination of background, low-grade muscle contraction-type symptoms, often with stiffness in the neck, and superimposed migrainous symptoms

### Cluster Headache Type:

Cluster headache is an excruciating condition that is fortunately rare. It affects 1 in 1000 men and 1 in 6000 women; most are in their twenties or older and many are smokers. It is characterised by frequently recurrent, short lasting headache and autonomic symptoms. The episodic form occurs in bouts (clusters), typically of 6-12 weeks duration once a year or every two years and at the same time of year. Strictly unilateral intense pain around the eye develops once or more daily, commonly at night. This headache type is sudden in onset and lasts between 15 -180 minutes and can occur between once a day to eight times a day. The eye is red and waters, the nose runs or is blocked on that side, and ptosis (droopy eyelid) may occur.

### MIGRAINE

Migraine is characterized by episodic headache, which is typically unilateral and often associated with vomiting and visual disturbances. In many patients, however the headache is bimodal and generalized and there may be no associated focal visual or neurologic disturbance. The single most characteristic feature is episodic nature of headache.<sup>12</sup> Migraine is a primary episodic headache disorder characterized by various combinations of neurological, gastrointestinal and autonomic changes. Many famous and creative individuals have suffered from migraine. Migraine diagnosis is based on the retrospective reporting of headache characteristics and associated symptoms. The physical and neurological examinations, as well as laboratory studies, are usually normal and serve to exclude other, more ominous, causes of headache.<sup>34</sup> The term migraine stems from Galen's usage of hemicrania to describe a periodic disorder consisting of paroxysmal blinding hemicranial pain, vomiting, photophobia, recurrence at regular intervals, and relief by dark surroundings and sleep. Hemicrania was later corrupted into low Latin as hemigranea and migraena; eventually the French cognate, migraine, gained acceptance in the eighteenth century and has prevailed ever since.

**Epidemiology of migraine-** Approximately 10% of the population suffer from migraine (6% males and 15% females) and most do so by the age of 50 years. Males tend to develop it earlier than females, with a preponderance of males over females prior to puberty. However, after puberty approximately three times as many females suffer then men with its prevalence rising to 24% in females around the age of 40.

### DESCRIPTION OF THE MIGRAINE ATTACK

The migraine attack can be divided into four phases: the prodrome phase, which occurs hours or days before the headache; the aura phase, which immediately precedes the headache; the headache phase itself; and the headache resolution phase.

#### 1.Prodrome (premonitory phenomena)

Premonitory phenomena occur in about 60% of migraineurs, often hours to days before headache onset. Usually patients describe a characteristic change in mood or behaviour which may include psychological, neurological, constitutional or autonomic features. Some people simply report a poorly characterized feeling that a migraine attack is coming. While the prodromal features are quite variable among individuals, they are rather consistent within a individual. The prodrome is common. It occurs in equal frequency in migraine with and without aura.

#### 2.Aura

The migraine aura is a complex of focal neurological symptoms which precedes or accompanies an attack. Most aura symptoms develop over 5-20 minutes and usually less than 60 minutes. The aura can be characterized by visual, sensory, or motor phenomena, and may also involve language or brainstem disturbances Headache usually occurs within 60 minutes from the end of the aura but may not occur for several hours if at all. The headache may begin before or simultaneously with the aura, or the aura may occur alone. Patients can have more than one type of aura, with the progression from one symptom to another.

#### 3.Headache phase

The typical headache phase of migraine is unilateral, throbbing, moderate to marked in severity and aggravated by physical activity. Pain may be bilateral (in 40% cases) or start in one side and become generalized The headache of migraine can occur at any time of the day or night , but it occurs most frequently on arising in the morning. The onset is usually gradual; the pain peaks and then subsides, and usually lasts between 4 to 72 hours in adults and 2 to 48 hours in children. Anorexia is common, although food craving can occur. Nausea occurs in almost 90% of patients, while vomiting occurs in one-third of migraineurs. Many patients experience sensory hyperexcitability manifested by photophobia, Phonophobia and osmophobia, and seek a dark, quiet room. Other systemic symptoms, including blurry vision, nasal stiffness, anorexia, hunger, tenesmus, diarrhoea, abdominal cramps, polyuria (followed by decreased urinary output after the attack), pallor (or, less commonly redness) of the face, sensation of heat or cold, and sweating, may be noted during the headache phase. There may be localized oedema of the scalp, the face or under the eyes, tenderness of the scalp, Unusual prominence of a vein or artery in the temple, or stiffness or tenderness of the neck. Impairment of concentration is common; less often there is memory impairment.

#### 4.Resolution phase.

In the termination phase, the pain wanes. Following the headache, the patient may feel tired, washed out, irritable and listless and may have impaired concentration, scalp tenderness or mood changes. Some people may feel refreshed or euphoric after an attack, while others note depression and malaise.

### Frequency of migraine attack:

Migraine is less common before puberty, but cyclical vomiting & travel sickness are common in children who subsequently develop migraine. The frequency of attacks varies enormously, in a few they may occur two or three times a week, whereas the others may have only one or two attacks in a life time, one or two attacks a month is a common pattern. They may be more frequent at the time of menstruation and commonly diminish in frequency during pregnancy. The general pattern is towards reduction in frequency with age and sometimes the headache disappears leaving only an aura.

## MIGRAINE AND ITS MANAGEMENT IN HOMOEOPATHIC LITERATURE,

## 1. J.Ellis Barker

A considerable number of migraine cases have come my way, and I have been fortunate in the great majority. A vegetarian diet will frequently produce great relief and occasionally a cure in some cases. Migraine is due to coffee which may agree well with the victim who has not the slightest suspicion that it produces these temporary prostrating attacks. In his paper on the effects of coffee, published by Hahnemann in 1803, we read: “ if the quantity of coffee taken by immoderately great and the body very excitable and quiet unused to coffee, there occurs a semi-lateral headache from the upper part of the parietal bone to the base of the brain. Very slight things cause in the coffee-drinking lady migraine, or a frequent often intolerable toothache on one side of the face. The migraine alluded to only appear after some exciting cause, such as vexation, over loading of the stomach, chill etc. and differs entirely from the so called nervous hemicrania. The pain is almost intolerable; in very bad cases I have seen it last 36 hours”

## 2. G.H.G.Jahr, states,

This is a true neurosis like epilepsy, eclampsia and other spasmodic attacks, not proceeding from the stomach like gastric headache, but irritating the stomach after the megrim has reached its height, moreover the course of single paroxysms, independently of differences in their duration, from 24 to 36 hours, is in all cases the same in so far as every attack sets in quite suddenly, after which there is regular increase, vomiting is frequently excited at the point of culmination, after which the attack decreases again with equal regularity and finally disappears with out leaving a trace behind until next paroxysm.

## 3. John H Clarke about Sick Headache or Migraine. –

This is not due to disorder of stomach but is a constitutional disorder, nausea or vomiting being one of the symptoms depending on disturbances of the nerves and brain

## 4. Richard Hughes states

Megrim is a neurosis like epilepsy, having its periods of incubation and its paroxysms- the latter should be treated with drugs corresponding to their features belladonna, Ignatia, nux vomica, digitalis, cyclamen, niccolum, iris and sangunaria. Sometimes one or other of these will control the morbid tendency; but more frequently we have to deal with by means of deeper acting medicines such as calcaria, sepia, silicea, stannum and zincum which deal with the general disorder of which the paroxysm are but an expression. By the use of both of these classes of remedies in their respective place we are best likely to control the disease.

## 5. Dr. Hahnemann who proved several drugs could not prescribe medicines to his patients without consulting and comparing provings of several drugs. The process was laborious and was consuming lot of his time and talent. Then, he felt the need for some sort of indexing of symptoms and it was to solve the hurdle he thought, “ For convenience of treatment, we require merely to jot down after each symptom all the medicines which can produce such a symptom with tolerable accuracy, expressing them by a few letters (Eg. Ferr, Chin, Rheum, Puls) and also to bear in mind the circumstances under which they occur, that have a determining influence on our choice, and proceed in the same way with all the other symptoms, noting by what medicine each is excited; from the list so prepared we shall be able to perceive which among the medicines homeopathically covers the most of the symptoms present, especially the most peculiar and characteristic ones, and this the remedy sought for ”(Materia Medica pura, Preamble – originally published in 1816) This laid the foundation of the present day repertories.

## 6. Dr.Boenninghausen expresses the need for a repertory in preface to his Therapeutic pocket book as “ there is no doubt that a diligent and comprehensive study of the pure materia medica cannot be accomplished by the use of any repertory whatever. I have not indented to dispense with such a study, but rather have considered all works of such intent positively injurious. Still, it is not to be denied that a homoeopathic physician can only devote himself to such studies in his leisure hours (Which are, indeed, few enough), and that he needs in his practice, to aid his memory, a work which is abridged, easily consulted, and which contains the characteristic symptoms and their combinations, to enable him, in any individual case of sickness, to select from the remedies generally indicated the one suitable and homoeopathic, with out a too great loss of time” he also states that “ it is by far more difficult for the inexperienced homoeopathist to cure patients even with a few symptoms with out a repertory, because many remedies seem to correspond

**HOMOEOPATHIC REMEDIES FOR MIGRAINE**

1. **ARSENICUM ALBUM** Headache relieved by cold, other symptoms are aggravated by cold. Periodical burning pain, with cold skin. Hemicrania(migraine), with an icy feeling on the scalp and great weakness. Head sensitive, in open air. Head is in constant motion. Burning in eyes, with acrid lacrymation. Edema around the eyes. Intense photophobia; better external warmth. Cannot bear the sight or smell of food. Excessive exhaustion from least exertion.
2. **BELLADONNA** Vertigo, with falling to the left side or backwards. Sensitive to least contact. Vertigo when stooping or rising after stooping on every change of position. Severe throbbing and heat.



- palpitation reverbate in the headwith labored breathing. Pain; fullness, especially in the forehead, occiput and temples. Rush of blood to head and face. Headache from suppressed catarrhal flow. Sudden outcries. Pain worse light, noise,jar, lying down and in the afternoon; better by pressure and in a semierect position. Boring of head in the pillow; drawn backwards and rolls from side to side. Headache worse on the right side and on lying down; ill effects,cold etc., from having a hair cut.
3. **CALCAREA CARBONICUM** Sensation of weight on top of the head. Headache, with cold hands and feet. Vertigo on ascending and on turning the head. Headache from over lifting, from mental exertion, with nausea. Head feels hot and heavy with pale face. Icy coldness in, and on the head, especially right side. Head enlarged; much perspiration, wets the pillow. Itching of the scalp. Scratches the head on waking. Sensitive to light(photophobia).
  4. **CALCAREA PHOSPHORICA** Headache, worse near the region of sutures, from change of weather, in school children around pubertal age. Headache of school girls. Cranial bones soft and thin. Headache with abdominal flatulence(sick headache). Head hot, with smarting in the roots of hair.
  5. **LYCOPodium CLAVATUM** Shakes head without any apparent cause. Twists face and mouth. Pressing headache on the vertex; worse from 4 to 8 p.m. and from lying down or stooping, if not eating regularly. Throbbing headache after every paroxysm of cough. Headaches over the eyes in severe colds; better uncovering. Vertigo in the morning on rising. Pain in the temples, as if they were screwed together. Tearing pain in the occiput; better, fresh air.
  6. **NATRUM MURIATICUM** Throbs. Blinding headache. Aches as if thousand little hammers were knocking on the brain, in the morning on awakening, after menstruation, from sunrise to sunset. Feels too large; cold. Headache; beginning with blindness; with zig-zag dazzling like lightning in eyes, ushering in a throbbing headache; from eye strain. Anemic headache of school girls; nervous, discouraged, broken down. Chronic head ache, semi-lateral, congestive, from sunshine to sunset, with pale face, nausea, vomiting; periodical eyestrain; menstrual, before attack, numbness and tingling in lips, tongue and nose, relieved by sleep.
  7. **NUX VOMICA** Headache in the occiput or over the eyes, with vertigo; brain feels as if turning in a circle. Over sensitiveness. Vertigo with momentary loss of consciousness. Intoxicated feeling; worse morning, mental exertion, tobacco, alcohol, coffee, open air. Pressing pain in the vertex, as if nail was driven in. Vertigo in the morning and after dinner. Frontal headache, with desire to press the head against something. Congestive headache, associated with haemorrhoids. Headache in the sunshine (sunstroke). Feels distended and sore within, after a debauch.
  8. **PULSATILLA PRATENSIS** Wandering stitches around the head; pain extends to the face and teeth; vertigo; better in open air. Frontal and supra- orbital pain. Neuralgia pain, commencing in the right temporal region (migraine), with scalding lachrymation from the affected side. Headache from overwork. Pressure on vertex.
  9. **SANGUINARIA CANADENSIS** Worse right side, sun headache. Periodical sick headache. Pain begins in the occiput, spreads upwards and settles over the eyes, especially right (migraine). Pain begins in morning, increases during the day, lasts until evening; head feels as if it would burst, or as if eye would be pressed out; relieved by sleep. Veins in the temples are distended. Pain better lying down and sleep. Headaches return at climacteric; every seventh day. Pain in a small spot over the upper left parietal bone. Burning in eyes. Pain in the back of head "like a flash of lightening".
  10. **SEPIA OFFICINALIS** Vertigo, with sensation of something rolling round in head. Prodromal symptoms of apoplexy. Stinging pain from within outward and upward mostly left, or in forehead, with nausea, vomiting; worse indoors and when lying on painful side. Jerking of head backwards and forwards. Coldness of vertex. Headache in terrible shocks at menstrual nisis, with scanty flow. < motion, stooping, mental labor, > external pressure, continued hard motion.
  11. **SILICEA TERRA** Aches from fasting. Vertigo from looking up; better, wrapping up warmly; when lying on left side. Profuse sweat on head, offensive, and extends to the neck. Pain begins in the occiput and spreads all over the head and settles over the eyes. Chronic sick headache, since some severe disease of youth; ascending from nape of neck to the vertex, as if coming from the spine and locating in one eye especially the right ; pressure and wrapping up warmly; > profuse urination.
  12. **SPIGELIA** Pain beneath frontal eminence and temples, extending to eyes. Semi-lateral, involving left eye; pain violent, throbbing; worse making false step. Nervous headache; beginning in morning at base of brain, spreading over the head and locating in eye, orbit at temple of left side; pain pulsating violent, throbbing. Headache; at sunrise, asits heightat noon, declines till sunset. Pain as if a band around head. Vertigo, hearing exalted. Eyes feels too large; pressive pain on turning them. Pupils dilated; rheumatic

ophthalmia. Severe pain in and around eyes, extending deep into socket. Ciliary neuralgia, a true neuritis.

13. STAPHYSAGRIA Stupefying headache; passes off with yawning. Brain feels squeezed. Sensation of a ball of lead in forehead. Itching eruption above and behind ears. Heat in eyeballs, dims spectacles. Bursting pain in eye-balls of syphilitic iritis.

#### CONCLUSION :

Many homoeopathic medicines had produced symptoms similar to that of migraine during proving and these medicines will be useful in reducing the intensity and frequency when administered according to symptom similarity. Research studies have clearly demonstrated that Homoeopathy has significant help to offer to patients in terms of reduced frequency of migraine headaches, reduced intensity of the attacks and improvement in quality of life after commencing the treatment.

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