A little more than a year ago, I used this space to outline my ongoing battle with migraine headaches. Though 27 million Americans are afflicted, I had no idea so many of you read this newspaper.

Reader response was immediate. Women — and a few men — wrote to say my story mirrored theirs. Suggestions for treatment flooded my inbox. I wrote at the time that I’d update readers on new discoveries along my migraine journey, so it’s time to make good on that promise — and to share reader strategies for battling this stubborn condition.

Back in February 2006, I was in search of headache prevention. The medication Maxalt generally banished my migraines once they occurred, but herbs, vitamins, blood pressure medicine and Depakote had all fallen short in the prevention category. My headache diary that month shows 17 entries.

I had applied for acceptance in a research study using Botox injections in the shoulders, neck and forehead to anesthetize the primary muscles involved in migraines. I passed the preliminary phase and was hopeful.

But I wasn’t accepted — because of a technical glitch — and my deep disappointment led me to rethink my long-range strategy.

I dislike being a whiner, especially when it comes to my migraines. I can’t imagine anyone cares to listen to me talk about my aching head, and I’m aware that, to some degree, negative thinking impacts my healing process and may even exacerbate the pain. I can cite lots of reasons not to complain.

Nonetheless, when I’m on my eighth or ninth day of a cycle of migraines, life is grim. I take Maxalt and 24 hours later, the headache bounces right back. If I preemptively take Maxalt 12 hours after the first dose, it only postpones the relapse by 12 hours. My “rescue” meds — Lorcit and antihistamines — don’t

See Rodgers, 6D ♦

20 reader suggestions for fighting migraines, 6D

To read Anne Rodgers’ original column about migraines, see PalmBeachPost.com/charm

charm ♦ The Anti-Aging Panel can’t agree on Olay Regenerist
Eye Derma-Pods, 4D

#20476059
Stepping up to FIGHT MIGRAINES

RODGERS from 1D

always work either.
That's when I feel desperate. I go through
my day on the edge of tears. If someone asks
how I'm doing, it's all I can do to lie and say,
"fine" and move on. Because, honestly, talk-
ing about it brings the despair closer to the
surface. I don't feel comfortable with people's
pity and I'm not in need of advice on another
thing to try or what to do to make this problem
disappear. When suggestions are made, I feel
defeated, like the speaker must think if I'd just
done "whatever" I'd be cured, or at least better.
In my vulnerable state, it feels like I'm being
told that if I'd only manage this disease more
effectively, I wouldn't be suffering.
I realize mostly people are just being help-
ful. But pain makes us all grumpy.

Besides, I am actively managing my dis-
ease. For four years, I've been aggressively
chasing the root cause of my migraines. I've
embraced protocol after protocol, and I've
seen small improvements — and reveled in
them. But I have setbacks and recurrences,
and some days I feel like a personal failure
because of them.

That said, I have — with the help of some
new strategies — located some light at the end of
the tunnel. My neurologist, Dr.
Paul Winner of Palm Beach
Neurology, always has told
me my migraines likely are
tied to hormonal influences,
and that once I pass meno-

dause, they'll dramatically
decrease. A recent test assures me I'm well into
that transition, so I'm sure

incidence of migraines.

Mike Kippenger, DDS, of Jupiter fit me
for mine, and in June I had only six headaches.
What a great month. I notice from my charts
that I was taking a second dose of Maxalt 12
hours after each migraine, as preventive, so
that may have helped, too.

I had no side effects from the NTI, but my
headaches didn't disappear, as Dr Mike and I
had hoped. I had eight in July, nine in August
and eight each in September and October. Few
of these were multi-day headaches, though,
and I felt encouraged.

Then in November, I had 10 headaches, and
decided I'd keep using the NTI, but look for
something to add.

A loving friend had done research on re-
flexology, which is the application of pressure
to the feet to affect corresponding parts of the
body. The idea is that pressure applied to the
feet generates a signal through the peripheral
nervous system. From there, it enters the
central nervous system where it is processed
in the brain and relayed to internal organs. Fi-

nally, a response is fashioned that is sent onto
the motor system.

I know it sounds far-fetched, but pain is a
powerful motivator. On Dec. 4, I began treat-
ment with Nancy Culver, one of the
best-known reflexologists
in the area. I had seven head-
aches that month, including
a nasty three-day one shortly
after my second appointment,

and January was awful. I tried
to convince myself that the
reflexology would bring things
up in a good way, and that
provement was imminent.

Somewhere in that night,
But I "credit: Dr. Approve. "I use with reducing the number of my headaches, and — more dramatically — my recent sessions with a reflexologist, which coincided with a sharp drop in the frequency of my migraines.

I deliberately undertook only one therapy at a time. Starting several at once means you'll never know what worked — plus, there's a substantial amount of psychic energy involved in beginning a treatment. Summoning the enthusiasm and hope you need to tackle yet another "cure" is difficult when you're sick. Most protocols require doctors' appointments or diet changes or research or taking pills, not to mention an outlay of money, time and energy. Believe me, it's hard to summon your faith and gear up for another "sure thing" after years of dead-end treatments.

Still, what choice do you have? Herewith, an outline of my path toward recovery, which by the way, always has included plenty of exercise. Steal anything you think might work for you, but know that no two migraine sufferers suffer alike.

■ Last year, on Feb. 11, I began using PhytoProlief, a progesterone cream by Arbonne suggested by a reader. He predicted results in one to two days, but in March, I recorded 13 headaches, and April brought 15.

■ On May 17, I first used an NTI, which stands for nociceptive trigeminal inhibitor, but who can remember that? It's basically a bite guard, but not the kind of bite guard that keeps you from grinding your teeth. (I already had one of those, and had been wearing it for almost 8 years.)

This one is quite small and though it sits in the front of your mouth, it's designed to keep your back teeth from even touching, which in turn prevents the trigeminal nerve from engaging. (Put a pencil between your teeth and bite. Feel that pulsing place in your temples? That's the seat of the trigeminal muscle, thought to be the No. 1 trigger for migraines.) If you keep it unengaged, it often reduces the body and to address the stress that I know exacerbates my headaches.

■ This month, I was accepted for a migraine mediation study through Dr. Winner's office. I decided to apply for it because there was no placebo (I need medicine when I get migraines) and the promising product being tested was being compared to Maxalt. So, I'm either taking what I'd already use or some wonder drug; I couldn't lose.

"There's a revolution and evolution taking place simultaneously in treatment for migraines," Dr. Winner said. "The revolution is with MK-0974 (the wonder drug I might be taking in my blind test), which will replace triptans. The evolution is in the development of new triptans, some of which are available now and some in a few years."

Dr. Winner describes migraines as "a genetically inherited disease influenced by the environment to significant degree," but he firmly believes you can "modulate acute and preventive aspects of this disease."

— He told me that adults should have control of their headaches within two hours and should have no more than three or four per month. "If you're not staying within those boundaries, seek out help."

One last tip from the doctor. He recommends www.americanheadachesociety.org for the information hungry.

"It's a peer-reviewed Web site that's professionally controlled," he said. "You can trust what's on there."

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20 ways to treat migraines

When I first wrote about migraines, readers were more than generous with suggestions and tips. They shared stories and offered warm sympathy. Here's a partial list of their migraine-fighting ideas, some of which should definitely be run past your doctor before you try them.

**Amitriptyline**
This drug is classed as an antidepressant, but it has an anti-migraine action separate from its antidepressant effect. It is not clear how it works, but one reader said it cured his wife of migraines.

**Caffeine**
"Have you tried caffeine to pre-empt and then to alleviate?" one reader asked me. "I hate to admit it, but I've taken to drinking caffeine soda straight thing in morning since coffee can put me over the edge, and believe it or not it helps with those darn blood vessels." This is easy, and I tried it, and it occasionally has worked to stave off a headache.

**Vitamin B6**
Try 100 milligrams a day.

**Celiac treatment**
Ask your doctor to check you for celiac disease or gluten intolerance; if you have it, get off gluten. The test for it is called tissue transglutaminase (tTG, IGA). A number of people who are gluten-intolerant have no symptoms or only neurological symptoms such as migraines. A good book on this subject is *Dangerous Crains* by Dr. James Braly. Visit Celiac.com for more info.

**Nikken products**
Nikken is a company which markets Asian alternative health products in the United States.

**Yoga**
Reduces stress, a factor in many migraines, and facilitates deep breathing, which is effective in pain management.

**Topamax**
Believed to help calm overexcitable nerves in the brain that cause migraines. Some sufferers swear by it, others say the side effects are too disruptive.

**Mangosteen juice**
A brand name for this is Xango and it's quite expensive, but you only need 1 ounce twice per day. A reader asked why migraine sufferers would take drugs when this food — with certain powerful phytonutrients — can balance the body's systems and eliminate headaches naturally? I have a bottle of this on my counter but haven't yet opened it. I'm sure it works for some people, I'm just as sure it won't cure all 27 million Americans with migraines.

**Rutian ll Juice**
This is made from the fruit of the Morinda citrifolia (noni) tree. It's said to have strong antioxidant, anti-inflammatory and cancer properties.
**Phillip Stein teslar watch**

This watch was one of Oprah's favorite things a few years ago, and a reader bought it for her insomnia. (Her nonmedical opinion is that her migraines, insomnia and motion sickness are all tied together.) Though her insomnia didn't improve, this woman's migraines disappeared. And she experienced no nausea on a subsequent cruise. When she sent the watch back for a chip, her migraines came back with a vengeance.

**Cranial sacral therapy**

One reader noted that the Upledger Institute in Palm Beach Gardens, which deals with pain management, offers this. It's a noninvasive massage technique that can alter blood flow restrictions or blockages.

**Axe Brand Medicated Oil**

You put a dot on your forehead right in the middle, on each side of your temple and on your chin. Found at Asian food stores.

**Reliv**


**CoQ10**

A lack of cell energy in the brain may be a cause of migraine. CoQ10 is a nutritional supplement and natural compound that might give a boost to those cells and help prevent migraine. I talked to several people who have used this to good effect.

**Magnesium**

Minerals affect blood vessel spasticity and, therefore, pain. Many people don't get enough magnesium, according to one reader, who takes the recommended daily allowance via tablets, up to 1,000 milligrams.

**ACE inhibitors**

Angiotensin-converting enzyme (ACE) inhibitors are commonly used for treating high blood pressure. They block the production of the protein angiotensin, which constricts blood vessels and might be involved in migraines.

**Christian Body Migraine Defense**

I asked my neurologist about this herbal supplement, which one reader swore by. He said there's no scientific research to support it, but that doesn't mean it doesn't work. Find it online.

**MigraGard by Solaray**

The main ingredient in this supplement is feverfew. You can get it at most health food stores. One reader, a retired R.N. who said she's careful about what she puts in her body, takes it every day and hasn't had a migraine in six years.

**Feverfew** — An herbal cure in its pure form. See above.

**Chiropractic treatment**

— Some chiropractors specialize in treating migraine patients.

— Anne Rodgers