

## **TREATMENT STRATEGIES AND OPTIONS FOR CHRONIC DAILY HEADACHE SUFFERERS**

### **Tenets of Therapy:**

- Appropriate diagnosis
- Define co-morbid conditions.
- Support of patient and family.
- Keep a headache diary of medication use, sleeping pattern, eating habits, and diet.

### **Nonpharmacologic Treatment Options:**

- Eat regular breakfast, lunch, and dinner at roughly the same time every day.
- Consider following a “migraine avoidance diet.”
- Institute a diet plan that includes abundant non-citrus fruits and vegetables.
- Maintain regular sleeping habits, even on weekends and holidays.
- Home exercise program that includes general conditioning and neck exercises.
- Avoid excessive noxious sensory input.
- Consider physical therapy including heat, massage, strengthening exercises, and muscle toning.
- Normalize weight if necessary.
- Stress reduction techniques.
- Consider behavioral therapy.
- Stop smoking.
- Decrease alcohol.

### **Pharmacologic Treatment Options:**

- Address sleep intolerance.
- Address depression and anxiety.
- Address unresolved issues, especially anger.
- Add over-the-counter medication or prescriptions as appropriate. Take no single medication more than 2-3 days per week except as a “bridge therapy.”
- Medication for nausea and/or adjuvant pain relief.
- Consider medications for withdrawal symptoms.
- Add preventive agents early.
- Specific abortive treatment.

### **Alternative Therapies:**

- Magnesium therapy (200 to 1,000 mg per day).
- Riboflavin (B2 therapy) (200 to 600 mg per day).
- Relaxation regimen (such as massage, physical therapy, yoga, and meditation).
- Consider trigger point injections.
- Consider biofeedback or hypnosis.
- Consider botulinum toxin/Botox injections.

### **Treatment Chronology:**

- Discontinue the offending medications.
- Analgesic “bridge” therapy for withdrawal period, commonly 2-3 weeks.
- Initiate preventive therapy.
- Appropriate abortive therapy for episodic headache types.