

Hormonal Migraine Checklist



Menstrual or hormonal migraine affects most women with migraine. Hormonally related migraine attacks are often more severe and more likely to be unresponsive to traditional treatment. The best strategy is prevention. Below are a few tips to help you prevent hormonal migraine attacks:

- Keep A Diary:** Knowing when attacks are triggered each month will inform targeted medicinal or HRT treatments. You need ideally 3 or more cycles recorded.
- Consistency:** Take into account how predictable and regular your cycle is. This will play an important role in your treatment strategy.
- Is Contraception Required?** This is another important consideration factor that will inform your best treatment strategy.
- Menstrual Symptoms:** Understand if there significant symptoms or a menstrual disorder (eg. hypothyroidism) that may also be playing a role?
- Acute Treatment:** Refer to the table of acute treatments for the treatments listed as effective in migraine attacks. Discuss your treatment strategy with your doctor.
- Prevention or Perimenstrual Prevention:** Consider if daily prevention or perimenstrual prevention is appropriate to limit the number and severity of attacks during your cycle.
- Manage Your Diet:** Modern diets high in processed foods can manipulate hormones which are sensitive to small changes. Avoid highly processed foods and go for fresh food, vegetables, fruits and produce.
- Move:** Movement and exercise are a natural hormone balancing activities that also reduce stress and stress hormones.
- Sleep:** Sleep quality, consistency and duration are essential ingredients to help maintain optimal health and brain function.
- Hydrate:** Staying hydrated regularly, especially during the high risk week or so of your cycle may help prevent more attacks.
- Magnesium:** Magnesium is a natural way to help relax muscles in the body and improve sleep. Around half of migraine patients have been found deficient in magnesium. Use a chelated form of magnesium such as magnesium glycinate. Suggested starting dose is 200 mg morning and night (400 mg per day).
- Hysterectomy For Menstrual Migraine Is NOT The Answer.** It has been shown to make migraine worse and is not advised for the treatment or prevention of migraine.