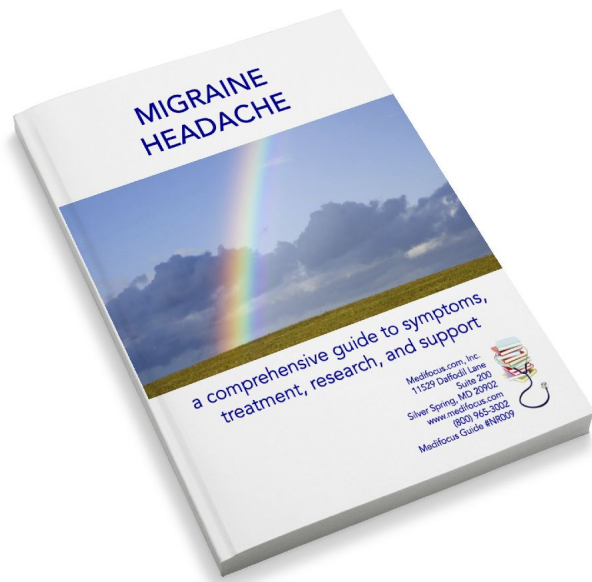


Preview of the Medifocus Guidebook on: Migraine Headache

Updated November 3, 2009



This document is only a SHORT PREVIEW of the **Medifocus Guidebook on Migraine Headache**. It is intended primarily to give you a general overview of the **format and structure** of the Guidebook as well as select pages from each major Guidebook section listed in the Table of Contents.

To purchase the COMPLETE Medifocus Guidebook on Migraine Headache (131 pages; Updated November 3, 2009), please:

- Call us at:
 - 800-965-3002 (United States)
 - 301-649-9300 (Outside the United States)
- Order online through our website:
 - **Printed Version**
 - Mailed to you and bound for easy reading.
 - Includes free online access to the electronic guidebook for one full year.

[Purchase Printed Guidebook](#)

- **Electronic Version**
 - Adobe PDF document that can be viewed or printed on any computer
 - Online updates are included for one full year.

[Purchase Electronic Guidebook](#)

Table of Contents

Background Information	8
Introduction	8
About Your Medifocus Guidebook	10
Ordering Full-Text Articles	13
The Intelligent Patient Overview	15
Guide to the Medical Literature	46
Introduction	46
Recent Literature: What Your Doctor Reads	47
Review Articles	47
General Interest Articles	66
Drug Therapy Articles	74
Surgical Therapy Articles	77
Clinical Trials Articles	79
Centers of Research	98
United States	100
Other Countries	110
Tips on Finding and Choosing a Doctor	121
Directory of Organizations	127

1 - Background Information

Introduction

Chronic or life-threatening illnesses can have a devastating impact on both the patient and the family. In today's new world of medicine, many consumers have come to realize that they are the ones who are primarily responsible for their own health care as well as for the health care of their loved ones.

When facing a chronic or life-threatening illness, you need to become an educated consumer in order to make an informed health care decision. Essentially that means finding out everything about the illness - the treatment options, the doctors, and the hospitals - so that you can become an educated health care consumer and make the tough decisions. In the past, consumers would go to a library and read everything available about a particular illness or medical condition. In today's world, many turn to the Internet for their medical information needs.

The first sites visited are usually the well known health "portals" or disease organizations and support groups which contain a general overview of the condition for the layperson. That's a good start but soon all of the basic information is exhausted and the need for more advanced information still exists. What are the latest "cutting-edge" treatment options? What are the results of the most up-to-date clinical trials? Who are the most notable experts? Where are the top-ranked medical institutions and hospitals?

The best source for authoritative medical information in the United States is the National Library of Medicine's medical database called PubMed®, that indexes citations and abstracts (brief summaries) of over 7 million articles from more than 3,800 medical journals published worldwide. PubMed® was developed for medical professionals and is the primary source utilized by health care providers for keeping up with the latest advances in clinical medicine.

A typical PubMed® search for a specific disease or condition, however, usually retrieves hundreds or even thousands of "hits" of journal article citations. That's an avalanche of information that needs to be evaluated and transformed into truly useful knowledge. What are the most relevant journal articles? Which ones apply to your specific situation? Which articles are considered to be the most authoritative - the ones your physician would rely on in making clinical decisions? This is where *Medifocus.com* provides an effective solution.

Medifocus.com has developed an extensive library of *MediFocus Guidebooks* covering a wide spectrum of chronic and life threatening diseases. Each *MediFocus Guidebook* is a

high quality, up- to-date digest of "professional-level" medical information consisting of the most relevant citations and abstracts of journal articles published in authoritative, trustworthy medical journals. This information represents the latest advances known to modern medicine for the treatment and management of the condition, including published results from clinical trials. Each *Guidebook* also includes a valuable index of leading authors and medical institutions as well as a directory of disease organizations and support groups. *MediFocus Guidebooks* are reviewed, revised and updated every 4-months to ensure that you receive the latest and most up-to-date information about the specific condition.

About Your MediFocus Guidebook

Introduction

Your *MediFocus Guidebook* is a valuable resource that represents a comprehensive synthesis of the most up-to-date, advanced medical information published about the condition in well-respected, trustworthy medical journals. It is the same type of professional-level information used by physicians and other health-care professionals to keep abreast of the latest developments in biomedical research and clinical medicine. The *Guidebook* is intended for patients who have a need for more advanced, in-depth medical information than is generally available to consumers from a variety of other resources. The primary goal of a *MediFocus Guidebook* is to educate patients and their families about their treatment options so that they can make informed health-care decisions and become active participants in the medical decision making process.

The *Guidebook* production process involves a team of professionals with expertise in diverse areas including experienced medical database researchers and practicing physicians who serve as members of the *Medifocus.com* Medical Advisory Board (MAB). This team approach to the development and production of the *MediFocus Guidebooks* is designed to ensure the accuracy, completeness, and clinical relevance of the information. The *Guidebook* is intended to serve as a basis for more meaningful discussions between patients and their health-care providers in a joint effort to seek the most appropriate course of treatment for the disease.

Guidebook Organization and Content

Section 1 - Background Information

This section provides detailed information about the organization and content of the *Guidebook* including tips and suggestions for conducting additional research about the condition.

Section 2 - The Intelligent Patient Overview

This section of your *MediFocus Guidebook* represents a detailed overview of the disease or condition specifically written from the patient's perspective. It is designed to satisfy the basic informational needs of consumers and their families who are confronted with the illness and are facing difficult choices. Important aspects which are addressed in "The Intelligent Patient" section include:

- The etiology or cause of the disease
- Signs and symptoms
- How the condition is diagnosed
- The current standard of care for the disease

- Treatment options
- New developments
- Important questions to ask your health care provider

Section 3 - Guide to the Medical Literature

This is a roadmap to important and up-to-date medical literature published about the condition from authoritative, trustworthy medical journals. This is the same information that is used by physicians and researchers to keep up with the latest developments and breakthroughs in clinical medicine and biomedical research. A broad spectrum of articles is included in each *MediFocus Guidebook* to provide information about standard treatments, treatment options, new clinical developments, and advances in research. To facilitate your review and analysis of this information, the articles are grouped by specific categories. A typical *MediFocus Guidebook* usually contains one or more of the following article groupings:

- *Review Articles*: Articles included in this category are broad in scope and are intended to provide the reader with a detailed overview of the condition including such important aspects as its cause, diagnosis, treatment, and new advances.
- *General Interest Articles*: These articles are broad in scope and contain supplementary information about the condition that may be of interest to select groups of patients.
- *Drug Therapy*: Articles that provide information about the effectiveness of specific drugs or other biological agents for the treatment of the condition.
- *Surgical Therapy*: Articles that provide information about specific surgical treatments for the condition.
- *Clinical Trials*: Articles in this category summarize studies which compare the safety and efficacy of a new, experimental treatment modality to currently available standard treatments for the condition. In many cases, clinical trials represent the latest advances in the field and may be considered as being on the "cutting edge" of medicine. Some of these experimental treatments may have already been incorporated into clinical practice.

The following information is provided for each of the articles referenced in this section of your *MediFocus Guidebook*:

- Article title
- Author Name(s)
- Institution where the study was done

- Journal reference (Volume, page numbers, year of publication)
- Link to Abstract (brief summary of the actual article)

Linking to Abstracts: Most of the medical journal articles referenced in this section of your *MediFocus Guidebook* include an abstract (brief summary of the actual article) that can be accessed online via the National Library of Medicine's PubMed® database. You can easily access the individual abstracts online via PubMed® from the "electronic" format of your *MediFocus Guidebook* by clicking on the corresponding URL address that is provided for each cited article. If you purchased a printed copy of a *MediFocus Guidebook*, you can still access the article abstracts online by entering the individual URL address for a particular article into your web browser.

Section 4 - Centers of Research

We've compiled a unique directory of doctors, researchers, medical centers, and research institutions with specialized research interest, and in many cases, clinical expertise in the management of the specific medical condition. The "Centers of Research" directory is a valuable resource for quickly identifying and locating leading medical authorities and medical institutions within the United States and other countries that are considered to be at the forefront in clinical research and treatment of the condition.

Inclusion of the names of specific doctors, researchers, hospitals, medical centers, or research institutions in this *Guidebook* does not imply endorsement by Medifocus.com, Inc. or any of its affiliates. Consumers are encouraged to conduct additional research to identify health-care professionals, hospitals, and medical institutions with expertise in providing specific medical advice, guidance, and treatment for this condition.

Section 5 - Tips on Finding and Choosing a Doctor

One of the most important decisions confronting patients who have been diagnosed with a serious medical condition is finding and choosing a qualified physician who will deliver high-level, quality medical care in accordance with currently accepted guidelines and standards of care. Finding the "best" doctor to manage your condition, however, can be a frustrating and time-consuming experience unless you know what you are looking for and how to go about finding it. This section of your *Guidebook* offers important tips for how to find physicians as well as suggestions for how to make informed choices about choosing a doctor who is right for you.

Section 6 - Directory of Organizations

This section of your *Guidebook* is a directory of select disease organizations and support groups that are in the business of helping patients and their families by providing access to information, resources, and services. Many of these organizations can answer your questions, enable you to network with other patients, and help you find a doctor in your geographical area who specializes in managing your condition.

2 - The Intelligent Patient Overview

MIGRAINE HEADACHE

Introduction to Migraine Headache

What is Migraine Headache?

There are two types of headaches that have been identified: *primary headaches* which are not associated with any underlying pathology and include migraine, cluster, and tension headaches and *secondary headaches*, which are attributable to an underlying pathological condition such as tumor, infection, or a vascular condition.

People who suffer from migraine headaches are called *migraineurs*. Migraine headaches are characterized by:

- Pain typically starting around the eyes, on the side of the head (temples), or in the forehead
- Pounding, throbbing, or pulsating pain
- Unilateral (one side of the head) pain but could be bilateral
- Pain duration of 2 hours to three days
- Sensitivity to light and sound during the migraine
- Disabling and incapacitating pain during severe headache
- Presence of an *aura*, a pattern of lines or shadows in front of the eyes, in a minority of patients
- Physical exertion, such as lifting or climbing stairs may intensify the pain
- Nausea, with or without vomiting in approximately 80% of migraineurs
- An almost universal desire to lay down in a dark, quiet room and sleep

The National Headache Foundation (NHF) estimates that approximately 20.5 million people in the U.S. suffer from migraine headaches. Migraines occur most commonly between the ages of 15 and 55 though they are not uncommon in preschoolers and elementary school-age children. Migraines typically peak at 40-50 years of age and subside thereafter in both men and women. Up to 80% of migraineurs have a family history of migraine headache.

The largest subgroup of people who experience migraine headaches is women in their reproductive years. It is estimated that up to 25% of all migraine attacks occur in the perimenstrual period of the menstrual cycle (from two days before up to 3 days after the cycle begins).

It is estimated that less than half the people suffering from migraines receive a correct diagnosis by their physicians. Migraines are severely underdiagnosed and are often misdiagnosed as tension or sinus headaches. When left untreated, a migraine headache can continue for up to 72 hours. They may occur as infrequently as twice a year or as often as daily. For unknown reasons, some

migraineurs spontaneously go into remission and experience an extended period of time (even years) without headaches.

Many migraineurs never even go to a doctor for an official diagnosis for several reasons, including:

- They feel like they can manage their headaches with over-the-counter (OTC) medication or home remedies.
- They may feel that their headache is not serious enough to warrant medical attention.
- They may have been misdiagnosed and when medication didn't help, they assume that there's nothing else available.
- They may have been correctly diagnosed but may have been given incorrect medications or inadequate doses of the appropriate medications.

Because so many people are not receiving proper treatment for their migraine headaches, it is estimated that less than 50% of migraineurs are pain-free two hours after taking medications and up to 30% are not pain-free even after 24 hours after taking medications.

There are several types of migraine headaches including:

- *Classic migraine* also known as *migraine with aura* (appearance of visual disturbance shortly before the start of a migraine headache and may last into the early period of the migraine)
- *Common migraine* also known as *migraine without aura*. Common migraines may start slower than classic migraine headaches, last longer, and interfere more with daily activities.*
- *Status migrainosus* - very severe migraine that lasts longer than 72 hours
- *Basilar migraine* - this type presents with an aura, pain in the back of the head, and may be accompanied by dizziness and/or fluctuating hearing loss. Aura symptoms differ from those accompanying classic migraine and may include ataxia (loss of coordination), abnormal sensations, or deafness. It is associated with a strong family history of migraine headaches.
- *Chronic migraine* - attacks occur at least 15 days a month for 2 months and are often associated with:
 - Frequency of headaches
 - Obesity
 - Medication overuse
 - Stressful life events
 - Snoring
 - Female gender
 - Low education/socioeconomic status
 - Head injury
- *Transformed migraine* - transformation of episodic migraine headaches into daily, chronic, less severe headaches with intermittent typical migraine headaches. The transformation typically happens during the migraineur's 20's and 30's and is often associated with a history of migraines beginning in childhood or adolescence.

Aura in Migraine Headache

An *aura* is a visual disturbance that is experienced by approximately 20% of migraineurs. It appears between 15 minutes and several hours before an attack and may continue into the early period of the headache. An aura may not necessarily occur before every migraine in an individual who experiences them. It is believed that the aura is caused by changes in the activity of specific nerve cells in the brain that are also related to other physiological changes that occur during the migraine headache. Images in an aura may include:

- Sparkling flashes
- Zigzag lines
- Slowly spreading blind spot
- Wavy lines

Some people experience a tingling in their arms or legs or difficulty speaking, though this is not very common.

What Causes Migraine Headache?

In the 1940's and 1950's, migraine headache was thought to be vascular in nature and that vasoconstriction (contraction of blood vessels) was responsible for the aura and that subsequent vasodilation (swelling of blood vessels) caused the pain. However, the latest thinking regarding the cause or mechanism of migraine headaches is a neurovascular theory - i.e. a complex series of neurological and vascular events occur and result in migraine headache. It is known that migraine headache is related to a change in the levels of a neurotransmitter in the brain called *serotonin* which is responsible for transmitting pain messages. While increased serotonin levels causes constriction of the blood vessel walls, decreased levels of serotonin result in dilation of the blood vessel walls which results in the pain of migraine headache.

It appears that there are functional changes in the trigeminal nerve which is a cranial nerve that has many branches that innervate the face, temples, and head. It is also a major pain pathway. Researchers believe that for unknown reasons, the level of serotonin drops and this may cause the trigeminal nerve to release chemicals that cause the blood vessels to dilate (expand). The swollen blood vessels send pain signals to the area of the brain that processes pain (brainstem) which results in pain being felt along the trigeminal pathways, i.e., eyes, temple, face, jaw, sinus, and sometimes the neck. This is why some people are sensitive to anything touching their head during an attack, such as combing or brushing hair.

It is believed that there are numerous *triggers* that can stimulate the chain of events leading to migraine headache.

Triggers and Migraine Headaches

There are several factors, called *triggers* that can set the mechanism causing migraine headache into motion, including:

- Hormones - fluctuation in estrogen levels appears to trigger migraines in women, particularly around the perimenstrual period. Some women experience migraines during pregnancy or menopause, both life changes associated with hormonal changes. It has also been observed that hormonal therapy, such as hormone replacement therapy and contraceptives, makes migraine headaches worse.
- Stress - either being under stress or the cessation of stress
- Changes in sleep patterns - the person may be getting more or less sleep than needed or may be sleeping on an irregular schedule
- Foods - there is an extensive list of foods that may trigger migraines on the website of the American Academy of Family Physicians (AAFP) (<http://www.aafp.org>). The AAFP estimates that approximately 30% of people who suffer from migraines can identify a food that triggers their headaches. Chocolate and cheese are among the most frequently noted food triggers of migraine.
- Fasting or skipping meals
- Sensory stimulation such as a strong odor (good or bad), loud noises, or bright lights
- Physical exertion
- Certain medications
- Environmental changes - includes changes such as altitude, barometric pressure, changes of season, or changes in weather
- Depression or fatigue

Migraine During Pregnancy

Women of child-bearing age represent by far the most predominant epidemiological subgroup of people who suffer from migraine headaches. Among women, about 25% of all migraine attacks occur between the ages when a woman starts to menstruate and the time she reaches menopause. The development of migraines among women of child-bearing age is thought to be related to fluctuations in the levels of female sex hormones (e.g., estrogen and progesterone) in the bloodstream.

Migraine attacks during pregnancy are most common during the first trimester, however, they can occur at any time before birth of the infant. Studies suggest that about 65% of women with migraines experience an improvement during pregnancy and in about 20% the migraine attacks completely disappear. Women with pre-existing migraine without aura are most likely to experience an improvement or complete cessation of their headaches during pregnancy. Women who have pre-existing migraine with aura are more likely to continue to have attacks during pregnancy. If migraine has not improved by the end of the first trimester, it is likely to continue for the rest of the pregnancy and even after delivery.

It is very rare for women who have not had migraine attacks before pregnancy to develop migraines for the first time during pregnancy (called "de novo" migraines). Women who develop migraine for the first time during pregnancy should be referred to a neurologist for evaluation of a potentially more serious underlying cause of these "de novo" migraines which may include hypertension, hypothyroidism, stroke, subarachnoid hemorrhage, or venous sinus thrombosis. Neuroimaging studies (e.g., MRI or CAT scan) may be undertaken to rule-out a more serious

cause in women who experience migraine attacks for the first time during pregnancy.

Migraine Headache in Children and Adolescents

Migraine headaches are relatively common in children and adolescents. Twenty percent of migraineurs experienced their first migraine headache before the age of five. Approximately 5% of preschool children, 4-11% of elementary school children, and up to 23% of teenagers and adolescents may experience migraine headaches.

Migraines usually begin earlier in boys (mean age 7.2 years old) than girls (mean age 10.9 years old). Until puberty, boys are equally or slightly more affected than girls. During adolescence and young adulthood, girls are more affected (20-30%) than boys (10-20%) and female predominance continues as they get older.

Typically, children tend to have severe headaches around their eyes, forehead, or temples, frequently accompanied by nausea with or without vomiting, or a sick feeling in their stomach. Like adults, some experience an aura before the headache onset, and loud noises, bright lights, or strong odors may exacerbate the pain. Severe pain is almost always relieved by deep sleep. Migraine headaches strongly impact the quality of life of the child not only socially, but also academically as they may miss classes and often report that they do not think or function well during or right after an attack. Estimates are that 65-80% of children with migraine headaches experience a disruption of normal activities. In addition, many of these children suffer significant anxiety or stress due to their migraines and associated problems. For some children, migraine headaches may become less frequent and intense as they get older.

Some children have many of the signs and symptoms that accompany migraine headaches, such as sensitivity to light and sound, nausea, vomiting, but no head pain. This group of symptoms is called an *abdominal migraine*.

The most common triggers for children include:

- Chocolate
- Cheese
- Nuts
- Shellfish
- Chinese food
- Sugar
- Caffeine
- Alcohol

Facts about Migraine Headache

- In Western countries, migraine headache is estimated to affect 12% of the general population. Migraine is most common in North and South America, less so in Europe and Africa, with the lowest rate in Asia.
- Women suffer from migraines approximately 3 times as often as men - 18% of women vs.

6% of men.

- Prevalence of migraine in the United States has remained stable at approximately 11% over the past five years. It is estimated that migraine headache affects at least one person in every four households.
- Approximately 30 million people in the United States suffer from migraine headaches. The prevalence of migraine headaches is greater than that of asthma and diabetes combined.
- The majority of headache sufferers who consult their primary care physicians have migraine headaches, yet they are usually misdiagnosed and undertreated.
- It is estimated that only 40% of migraineurs use prescription drugs for their headaches.
- Migraine headache places an enormous burden on the individual who is suffering, their family, and society in terms of lost days of work or school, impact on functioning in the family unit, lost productivity, absenteeism, and elevated health care costs.
- It is estimated that the annual cost of lost productivity and absenteeism from migraine headache in the US is \$13 billion and the cost of caring for people suffering from migraine is approximately \$1 billion.
- The World Health Organization (WHO) considers migraine to be one of the 20 most disabling diseases worldwide.

Risk Factors for Migraine Headache

Risk factors for migraine headache include:

- Family history - more than 80% of migraineurs have a history of migraine headaches in the family.
- Female
- Young age
- Pregnancy - some women experience their first migraine headache during pregnancy. Most women report either an exacerbation of already existing headaches in the first trimester, or a general improvement in frequency and intensity of headaches.

Comorbidities and Migraine Headache

Comorbidity is a term that describes two medical conditions occurring together at a rate that is greater than what would be expected in the general population. This co-occurrence implies that the two conditions may in some way be related. Some of the comorbid conditions that occur with migraine headache include:

- Depression
- Anxiety
- Stroke
- Irritable bowel syndrome
- Epilepsy
- Hypertension

The **Intelligent Patient Overview** in the complete **Medifocus Guidebook on Migraine Headache** also includes the following additional sections:

- **Diagnosis of Migraine Headache**
- **Treatment Options for Migraine Headache**
- **Role of Complementary and Alternative Medicine for Treatment of Migraine Headache**
- **Quality of Life and Migraine Headache**
- **New Developments in Migraine Headache**
- **Questions to Ask your Doctor about Migraine Headache**

To Order the Complete **Guidebook on Migraine Headache** [Click Here](#)
Or Call 800-965-3002 (USA) or 301-649-9300 (Outside USA)

3 - Guide to the Medical Literature

Introduction

This section of your *MediFocus Guidebook* is a comprehensive bibliography of important recent medical literature published about the condition from authoritative, trustworthy medical journals. This is the same information that is used by physicians and researchers to keep up with the latest advances in clinical medicine and biomedical research. A broad spectrum of articles is included in each *MediFocus Guidebook* to provide information about standard treatments, treatment options, new developments, and advances in research.

To facilitate your review and analysis of this information, the articles in this *MediFocus Guidebook* are grouped in the following categories:

- Review Articles - 74 Articles
- General Interest Articles - 27 Articles
- Drug Therapy Articles - 11 Articles
- Surgical Therapy Articles - 6 Articles
- Clinical Trials Articles - 58 Articles

The following information is provided for each of the articles referenced in this section of your *MediFocus Guidebook*:

- Title of the article
- Name of the authors
- Institution where the study was done
- Journal reference (Volume, page numbers, year of publication)
- Link to Abstract (brief summary of the actual article)

Linking to Abstracts: Most of the medical journal articles referenced in this section of your *MediFocus Guidebook* include an abstract (brief summary of the actual article) that can be accessed online via the National Library of Medicine's PubMed® database. You can easily access the individual abstracts online via PubMed® from the "electronic" format of your *MediFocus Guidebook* by clicking on the URI that is provided for each cited article. If you purchased a printed copy of the *MediFocus Guidebook*, you can still access the abstracts online by entering the individual URI for a particular abstract into your computer's web browser.

Recent Literature: What Your Doctor Reads

Database: PubMed <September 2007 to November 2009>

Review Articles

1.

Migraine in the triptan era: lessons from epidemiology, pathophysiology, and clinical science.

Authors: Bigal ME; Ferrari M; Silberstein SD; Lipton RB; Goadsby PJ
Institution: Global Director for Scientific Affairs-Neuroscience; Merck Research Laboratories, Whitehouse Station, NJ, USA.
Journal: Headache. 2009 Feb;49 Suppl 1:S21-33.
Abstract Link: <http://www.medifocus.com/abstracts.php?gid=NR009&ID=19161562>

2.

What predicts the change from episodic to chronic migraine?

Authors: Bigal ME; Lipton RB
Institution: Merck Research Laboratories, Merck, Inc., Whitehouse Station, New Jersey, USA. marcelo_bigal@merck.com
Journal: Curr Opin Neurol. 2009 Jun;22(3):269-76.
Abstract Link: <http://www.medifocus.com/abstracts.php?gid=NR009&ID=19381087>

3.

The impact of migraine and the effect of migraine treatment on workplace productivity in the United States and suggestions for future research.

Authors: Burton WN; Landy SH; Downs KE; Runken MC
Institution: Department of Environmental and Occupational Sciences, University of Illinois at Chicago and the Feinberg School of Medicine, Northwestern University, Chicago, IL, USA.
Journal: Mayo Clin Proc. 2009 May;84(5):436-45.
Abstract Link: <http://www.medifocus.com/abstracts.php?gid=NR009&ID=19411440>

The **Guide to the Medical Literature** in the complete **Medifocus Guidebook on Migraine Headache** includes the following sections:

- Review Articles - 74 Articles
- General Interest Articles - 27 Articles
- Drug Therapy Articles - 11 Articles
- Surgical Therapy Articles - 6 Articles
- Clinical Trials Articles - 58 Articles

To Order the Complete **Guidebook on Migraine Headache** [Click Here](#)
Or Call 800-965-3002 (USA) or 301-649-9300 (Outside USA)

4 - Centers of Research

This section of your *MediFocus Guidebook* is a unique directory of doctors, researchers, medical centers, and research institutions with specialized research interest, and in many cases, clinical expertise in the management of this specific medical condition. The *Centers of Research* directory is a valuable resource for quickly identifying and locating leading medical authorities and medical institutions within the United States and other countries that are considered to be at the forefront in clinical research and treatment of this disorder.

Use the *Centers of Research* directory to contact, consult, or network with leading experts in the field and to locate a hospital or medical center that can help you.

The following information is provided in the *Centers of Research* directory:

- **Geographic Location**

- United States: the information is divided by individual states listed in alphabetical order. Not all states may be included.
- Other Countries: information is presented for select countries worldwide listed in alphabetical order. Not all countries may be included.

- **Names of Authors**

- Select names of individual authors (doctors, researchers, or other health-care professionals) with specialized research interest, and in many cases, clinical expertise in the management of this specific medical condition, who have recently published articles in leading medical journals about the condition.
- E-mail addresses for individual authors, if listed on their specific publications, is also provided.

- **Institutional Affiliations**

- Next to each individual author's name is their **institutional affiliation** (hospital, medical center, or research institution) where the study was conducted as listed in their publication(s).
- In many cases, information about the specific **department** within the medical institution where the individual author was located at the time the study was conducted is also provided.

Centers of Research

United States

AL - Alabama

Name of Author

Morey V

Institutional Affiliation

Department of Neurology, University of South Alabama, Mobile, AL, USA.

Rothrock JF

Department of Neurology, University of South Alabama, Mobile, AL, USA.

AZ - Arizona

Name of Author

Dodick DW

Institutional Affiliation

Mayo Clinic Hospital, Phoenix, Arizona 85054, USA.
dodick.david@mayo.edu

Hulihan J

Mayo Clinic Hospital, Phoenix, Arizona 85054, USA.
dodick.david@mayo.edu

CA - California

Name of Author

Carpay J

Institutional Affiliation

Center for Neurobehavioral Genetics, Semel Institute for Neuroscience and Human Behavior, University of California at Los Angeles, Los Angeles, California, USA. j.luykx@umcutrecht.nl

Charles A

Department of Neurology, David Geffen School of Medicine at University of California-Los Angeles, 635 Charles Young Drive, Los Angeles, CA 90095, USA. acharles@ucla.edu

Goadsby PJ

Headache Group, Department of Neurology, University of California, San Francisco, San Francisco, CA, USA.
peter.goadsby@ucsf.edu

Hutchinson SL

Orange County Migraine and Headache Center, University of California, Irvine, CA, USA.

Luykx J

Center for Neurobehavioral Genetics, Semel Institute for Neuroscience and Human Behavior, University of California at Los Angeles, Los Angeles, California, USA. j.luykx@umcutrecht.nl

The **Centers of Research** in the complete **Medifocus Guidebook on Migraine Headache** includes the following sections:

- Centers of Research for relevant states in the United States
- Centers of Research listed for relevant countries outside the United States

To Order the Complete **Guidebook on Migraine Headache** [Click Here](#)
Or Call 800-965-3002 (USA) or 301-649-9300 (Outside USA)

5 - Tips on Finding and Choosing a Doctor

Introduction

One of the most important decisions confronting patients who have been diagnosed with a serious medical condition is finding and choosing a qualified physician who will deliver a high level and quality of medical care in accordance with currently accepted guidelines and standards of care. Finding the "best" doctor to manage your condition, however, can be a frustrating and time-consuming experience unless you know what you are looking for and how to go about finding it.

The process of finding and choosing a physician to manage your specific illness or condition is, in some respects, analogous to the process of making a decision about whether or not to invest in a particular stock or mutual fund. After all, you wouldn't invest your hard earned money in a stock or mutual fund without first doing exhaustive research about the stock or fund's past performance, current financial status, and projected future earnings. More than likely you would spend a considerable amount of time and energy doing your own research and consulting with your stock broker before making an informed decision about investing. The same general principle applies to the process of finding and choosing a physician. Although the process requires a considerable investment in terms of both time and energy, the potential payoff can be well worth it--after all, what can be more important than your health and well-being?

This section of your Guidebook offers important tips for how to find physicians as well as suggestions for how to make informed choices about choosing a doctor who is right for you.

Tips for Finding Physicians

Finding a highly qualified, competent, and compassionate physician to manage your specific illness or condition takes a lot of hard work and energy but is an investment that is well-worth the effort. It is important to keep in mind that you are not looking for just any general physician but rather for a physician who has expertise in the treatment and management of your specific illness or condition. Here are some suggestions for where you can turn to identify and locate physicians who specialize in managing your disorder:

- **Your Doctor** - Your family physician (family medicine or internal medicine specialist) is a good starting point for finding a physician who specializes in your illness. Chances are that your doctor already knows several specialists in your geographic area who specialize in your illness and can recommend several names to you. Your doctor can also provide you with information about their qualifications, training, and hospital affiliations.

The **Tips on Finding and Choosing a Doctor** in the complete **Medifocus Guidebook on Migraine Headache** includes additional information that will assist you in locating a highly qualified and competent physician to manage your specific illness.

To Order the Complete **Guidebook on Migraine Headache** [Click Here](#)
Or Call 800-965-3002 (USA) or 301-649-9300 (Outside USA)

6 - Directory of Organizations

American Academy of Neurology

1080 Montreal Avenue; St. Paul MN 55116

800.879.1960; 651.695.2717

memberservices@aan.com

www.aan.com

American Academy of Orofacial Pain

19 Mantua Road; Mt. Royal, NJ 08061

856.423.3629

aaopco@talley.com

www.aaop.org

American Academy of Pain Management

13947 Mono Way #A; Sonora, CA 95370

209.533.9744

www.aapainmanage.org

American Chronic Pain Association

POB 850; Rocklin, CA 95677

800.553.3231

theacpa.org

American Council for Headache Education

19 Mantua Road; Mt. Royal, NJ 08061

800-255-2243

achehq@talley.com

www.achenet.org

American Pain Foundation

201 North Charles Street; Suite 710; Baltimore, MD 21201-4111

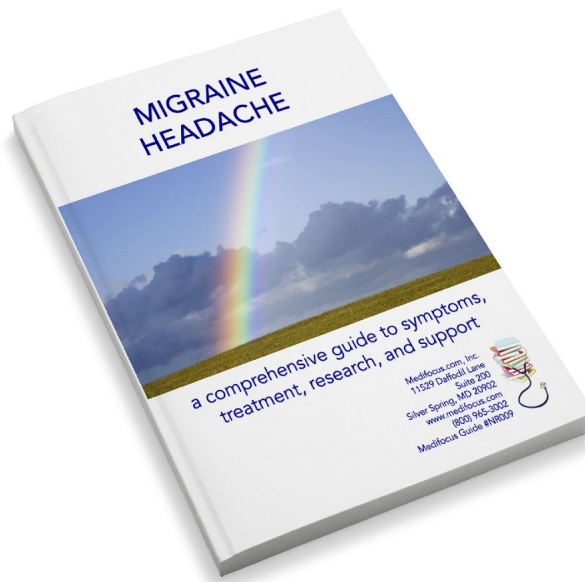
888.615.7246

info@painfoundation.org

www.painfoundation.org

The **Directory of Organizations** in the complete **Medifocus Guidebook on Migraine Headache** includes a list of selected disease organizations and support groups that are helping people diagnosed with Migraine Headache.

To Order the Complete **Guidebook on Migraine Headache** [Click Here](#)
Or Call 800-965-3002 (USA) or 301-649-9300 (Outside USA)



This document is only a SHORT PREVIEW of the **Medifocus Guidebook on Migraine Headache**. It is intended primarily to give you a general overview of the **format and structure** of the Guidebook as well as select pages from each major Guidebook section listed in the Table of Contents.

To purchase the COMPLETE Medifocus Guidebook on Migraine Headache (131 pages; Updated November 3, 2009), please:

- Call us at:
 - 800-965-3002 (United States)
 - 301-649-9300 (Outside the United States)
- Order online through our website:
 - **Printed Version**
 - Mailed to you and bound for easy reading.
 - Includes free online access to the electronic guidebook for one full year.

[Purchase Printed Guidebook](#)

- **Electronic Version**
 - Adobe PDF document that can be viewed or printed on any computer
 - Online updates are included for one full year.

[Purchase Electronic Guidebook](#)

Disclaimer

Medifocus.com, Inc. serves only as a clearinghouse for medical health information and does not directly or indirectly practice medicine. Any information provided by *Medifocus.com, Inc.* is intended solely for educating our clients and should not be construed as medical advice or guidance, which should always be obtained from a licensed physician or other health-care professional. As such, the client assumes full responsibility for the appropriate use of the medical and health information contained in the Guidebook and agrees to hold *Medifocus.com, Inc.* and any of its third-party providers harmless from any and all claims or actions arising from the clients' use or reliance on the information contained in this Guidebook. Although *Medifocus.com, Inc.* makes every reasonable attempt to conduct a thorough search of the published medical literature, the possibility always exists that some significant articles may be missed.

Copyright

© Copyright 2009, *Medifocus.com, Inc.* All rights reserved as to the selection, arrangement, formatting, and presentation of the information contained in this report, including our background and introductory information.