

Surgery potentially best option for severe migraine headaches

October 26 2009

The disability from migraine headaches is an enormous health burden affecting over 30 million Americans.

In newly released research, 79 migraine sufferers were followed for at least five years after having undergone detection of migraine "trigger sites" and <u>surgery</u>. The new data finds promising outcomes for treating trigger sites surgically for migraine headaches resulting in elimination of pain for those afflicted with the condition.

Since the surgery, 10 of the 79 patients required additional surgeries for newly detected trigger sites and were eliminated from the final analysis. Sixty-one of the remaining 69 patients (88 percent) have maintained the initial positive response to the surgery. Twenty patients (29 percent) reported elimination of migraines entirely, 41 patients (59 percent) noticed a significant decrease, and only eight patients (11 percent) experienced less than 50 percent improvement or no change.

This new data provides strong evidence that surgical manipulation of one or more migraine trigger sites can successfully eliminate (cure) or reduce the frequency, duration, and/or intensity of migraine headaches with lasting results.

Bahman Guyuron, MD, Chairman of Plastic Surgery at University Hospitals Case Medical Center and Case Western Reserve University School of Medicine, and an internationally recognized leader in the field of <u>plastic surgery</u>, will present new five-year research data that could



potentially reveal a cure for migraine headaches on October 24, 2009, at the American Society of Plastic Surgeons annual meeting in Seattle.

"Migraine headaches are extremely disabling and this surgical option offers hope for migraine sufferers," says Dr. Guyuron. "Combined with the previous studies, this new five-year data has provided strong evidence that severe migraine headaches and their painful symptoms can be successfully treated with surgery with lasting results."

The impetus behind Dr. Guyuron's eight <u>migraine headache</u> research projects was his observation close to a decade ago that many patients who had undergone forehead rejuvenation noticed a disappearance in migraine symptoms following surgery.

For patients who suffer frontal migraine headaches, Dr. Guyuron removes the corrugator supercilii (frowning) muscle group in the forehead that is suspected to be a trigger point for headaches, compressing nerves and causing nerve inflammation. Temple migraine headaches are treated by removing a small branch of the trigeminal nerve. For those patients who suffer from occipital (back of the head) migraine headaches, a small piece of muscle encasing the nerve is removed and replace with a soft tissue flap. When the headaches are located behind eyes and are triggered by weather change, he works on the nose septum and surrounding structures. Dr. Guyruon has performed more than 1,000 of these procedures on more than 450 patients, since each patient has 2.5 trigger sites in average. Analysis of more recent results demonstrates a significantly higher elimination rate.

Source: University Hospitals Case Medical Center

Citation: Surgery potentially best option for severe migraine headaches (2009, October 26)



retrieved 19 April 2024 from

https://medicalxpress.com/news/2009-10-surgery-potentially-option-severe-migraine.html

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