

Meta-analysis: Psychological interventions beneficial for migraine

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Adults with migraine seem to benefit from psychological interventions,

according to a meta-analysis published online Feb. 5 in *Headache: The Journal of Head and Face Pain*.

Noting that a recently published review showed no strong evidence for [psychological intervention](#) for adults with [migraine](#) but that the review was limited by stringent inclusion criteria, Joanne Dudeney, Ph.D., from Macquarie University in Sydney, and colleagues examined the stability of these findings. After systematically searching databases, 39 randomized controlled trials, with 3,155 participants, were included in the [meta-analysis](#). Thirty-one of the trials included data on migraine only and eight combined data for adults with migraine or tension-type [headache](#).

The researchers found that compared with controls, psychological interventions had a small-to-medium beneficial effect on improving migraine frequency, pain intensity (Cohen's d range, 0.23 to 0.33), and disability at follow-up ($d = 0.44$). No evidence of a beneficial effect on quality-of-life posttreatment was seen, nor on mood at posttreatment or follow-up. In sensitivity analyses on studies with mixed headache populations, for most outcomes, the magnitude of effect was similar (d range, 0.25 to 0.36), except for mood, which yielded a small-to-medium beneficial effect ($d = 0.32$).

"The current results differ from the previous Cochrane Review, which found no beneficial effect of psychological intervention on measured outcomes, except treatment response rate," the authors write. "Our results support the possibility that the stringent study selection criteria of the Cochrane Review may, at least in part, have contributed to the previous null findings, through lack of power."

More information: Joanne Dudeney et al, Are psychological interventions efficacious for adults with migraine? A systematic review and meta-analysis, *Headache: The Journal of Head and Face Pain*

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