

May 2007

## HEADquarters Migraine Management Newsletter

*Empowering headache sufferers to help themselves*

*Our mission is to promote the patient-centered care of headache and migraine, to promote migraine awareness, and to remove barriers to the self-management of migraine as a life-long disorder.*

### Migraine and Cardiovascular Risk--Update



#### *Latest Research Findings*

In the last newsletter, we looked at the research done by Dr. Tobias Kurth and his team at the Harvard Medical School division of preventative medicine. Their work has demonstrated that women with migraine with aura have an increased risk of cardiovascular disease.

At the recent meeting of the American Academy of Neurology, Dr. Kurth presented additional data from his study. Blood samples of 27,

626 women over age 45 who had answered questions about their migraine history were analyzed. Several biomarkers for cardiovascular disease were measured.

While four of these (11 were tested) were mildly elevated in what is called a "statistically significant basis", which means it is significant in terms of research, it was not clinically significant. Because so many women were tested, small variations do not matter overall. And the four markers that were elevated were not traditional risk factors for cardiovascular disease. Once the data were adjusted for the traditional cardiac risk factors, migraine with aura was not associated with any of the elevated biomarkers.

What does this mean? It means that it is likely that the association of migraine to heart disease and stroke is not due to the traditional risk factors for heart disease and stroke. It is due to something else related to migraine.

This is underscored by the findings of Dr. Cheryl Bushnell at Duke University. Dr. Bushnell analyzed an inpatient care database that held pregnancy-related discharge records of more than 18 million women from 2000 to 2003. This yielded 33,956 pregnant women with a migraine diagnosis during a pregnancy-related admission. A strong link was found between peripartum migraine and cardiovascular disorders,

including heart disease, heart attack, clotting disorders, and stroke.

An association was also found between the pregnant migraineur and cardiac risk factors such as high blood pressure, smoking, diabetes, gestational diabetes, and pre-eclampsia. No relationship was found, however, between migraine in pregnancy and hemorrhage, infection, pneumonia, or the need for transfusion.

Since this study was done using database information, further studies for confirmation are necessary. However, all existing evidence points us to the conclusion that migraine itself **may** increase cardiovascular risk.

## National Headache Awareness Week

### *June 3-9, 2007*

June 3-9 is National Headache Awareness Week. While each of us is pretty well aware of our own headaches (ha!), this is a great time to explain to a non-headache sufferer that headaches are not a trivial matter for many people. You can't always just take a pill and "get over it".

According to a new study which has reviewed the world's data on headache disorders, 42% of the world's population suffer from tension-type headache, and 11% of the world's adults have migraine. This makes headache disorders one of the world's top ten most disabling conditions. I think that's something to be aware of.

## More on Chocolate and Polyphenols

### *Cocoa and Blood Pressure?*

Ten studies were compared; five of tea intake and five of cocoa intake. In the cocoa studies, 64% of the subjects were men and 36% women; 34% of all subjects had high blood pressure. In the tea studies, 71% were men, 29% were women, and 49% had high blood pressure. (Four studies used black tea, and one used green tea.)

None of the tea studies reported any significant alterations in blood pressure. In the cocoa studies, four of five reported a reduction of both systolic and diastolic blood pressure after cocoa consumption. The study reporting no change utilized the lowest dose of cocoa. Blood pressure was most likely to be reduced in young individuals with mild essential hypertension.

The authors concluded that "the magnitude of the hypotensive effects of cocoa is clinically noteworthy; it is in the range that is usually achieved with monotherapy of beta-blockers or angiotensin- converting enzyme inhibitors." They also emphasized the importance of dark chocolate, noting that milk products inhibit the absorption of the polyphenols.

Excuse me, won't you? It's time for my next dose of chocolate.

## Do you suffer from headaches?



*If you suffer from headache or migraine, please visit our companion website, [migrainesurvival.com](http://migrainesurvival.com) for more information regarding types of*

*headache, trigger avoidance, treatment of headache, and other topics of interest to the headache sufferer.*

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