



New Concepts for Treating Headaches and Migraine

Causative Factors, Types of Pain, Therapeutic Techniques

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In most cases, headaches continue to be viewed as constituting an independent clinical picture and, correspondingly, are frequently treated on a purely symptomatic basis. However, genuine cures can only be attained when the specific headache causative forms are brought to light and treated purposefully with the appropriate therapeutic technique. Headaches are a syndrome in themselves only in isolated individual cases, and they must therefore in most cases be adjudged as bodily overload symptoms, which the organism uses as an attention-getting pain signal: it attempts in this manner to announce the disturbance of an organ, organ system or its general metabolic state.

Experience has shown that an irregularly and infrequently recurring headache is taken more seriously than permanent and chronic headache forms. Chronic long-term headaches are less frequently taken as a warning, and for this reason are all too often accepted as a clinical picture on their own. As a rule, then, the necessary uncovering of causative factors is neglected and a predominantly symptomatic treatment undertaken - which, however, can only be effective over the short term. Within the scope of this article, only a few of the typical headache types and their triggering factors will be able to be discussed briefly.

Diagnostic classification of specific types of headaches

In clinical practice, it is necessary to be able to classify headaches and migraines quickly and accurately

so as to make possible diagnostic demarcation of the triggering bodily function disorders. For this reason, the therapist should be cognizant of specific indicative symptomatology and headache-relevant disturbance factors, which make it easier to arrive at a diagnosis and come up with an appropriate treatment plan. With this as background, it would also seem to be urgently necessary to conduct a thorough headache-specific patient history, which, accordingly, has a high status in headache diagnosis, since only it can supply useful individualized information for subsequent effective treatment.

A careful patient-history dialogue has proven to be a significant and indispensable factor in this process, via which striking and conspicuous modalities of the individual case can best be brought out into the open and taken into account. On the other hand, a purely physical examination will be able to determine an associated bodily change in only five percent of headache patients - and, although in many individual cases the patients had been complaining of headaches for years, as a rule the lab results seldom yield useful diagnostic indications. This paradoxical state of affairs has long been part of headache symptomatology.

In order to determine and classify each type of headache or migraine, a specifically oriented and largely standardized question list should be used. Asking questions spontaneously and aimlessly, on the other hand, results in a confusing multitude of answers and data that

can greatly impede and hinder arriving at usable findings and drawing up quick and effective treatment plans.

Therefore, when drawing up individualized treatment programs for headaches, certain focal plan points need to be included:

- Basic questions regarding the patient history (background, personal surroundings issues, diet, psychosomatic factors);
- Main points of the physical examination (poor posture and defective position of the spinal column, scars and other disturbance fields, muscle spasms, etc.);
- Symptomatic treatment of acute pains (Treating acute headaches often takes precedence over eliminating the causative factors);
- Determination of other important treatment aspects (discussing dietary guidelines, coming up with suitable relaxation techniques, planning therapeutic measures, etc.)
- Determination of specific effective forms of therapy. (Example: neural therapy, oxygen treatment, hydrotherapy acupuncture, phytotherapy, homeopathy, isopathy, etc.)

Common types of headache and their causative factors

Intoxication headaches

- After taking chemically manufactured medication;
- After staying or living near high-traffic highways (benzene, carbon monoxide);
- Due to environmental pollutants in the air or the home;
- Due to food contaminants.



Ophthalmoplegic headaches:

- Irritation of the conjunctiva (dust particles, fumes, allergens);
- Refractive anomalies in the eye (visual disorders, amblyopia);
- Abuse of non-prescription contraststimulant eyedrops;
- Eye disease (iridocyclitis, etc.).

Headaches associated with intestinal function disorders:

- Dysbiosis of the intestinal mucosa;
- Intestinal mycosis (Candida etc.);
- Intestinal diseases (Crohn's syndrome, ulcerous colitis, etc.);
- Functional or diet-related disorders;
- Malnutrition.

Liver/gallbladder related headaches:

- Overtaxed liver-gallbladder system due to malnutrition (alcohol, fats);
- Medication stress;
- Pollutants and intoxicants;
- Inflammatory diseases of the liver or gallbladder.

Kidney-related headaches:

- Genetically determined kidney insufficiency (reduced filtration, buildup of metabolic waste products);
- Acute or chronic kidney disease conditions (nephritis, diabetic nephropathy, etc.);
- Malnutrition.

Headaches related to metabolic disorders:

- Diminished uric acid metabolism;
- Metabolically stressful diseases such as hyperthyreosis, Addi-

son's disease, Cushing's syndrome, diabetes, anemia, etc.;

- Hormonally determined metabolic disorders;
- Disturbed metabolism due to nutrient deficiency (mineral or vitamin deficiency).

Headaches due to electromagnetic pollution:

- Strong electromagnetic fields at home or the workplace;
- Electrosensitivity due to georadiation or allergies;
- Use of radiotelephones, radio-synchronized clocks, etc.

Headaches due to psychogenic tension:

- Psychosomatic constriction of the head vessels;
- Poor stress management;
- Emotional blocks;
- Various other forms of psychological dysregulation.

Cervical headaches:

- Diseases and functional disorders of the cervical spine;
- Postural damage, pelvic obliquity, scoliosis;
- Myalgia in the neck musculature;
- Myogelosis in the neck region.

A survey of therapeutic techniques

There are enough holistically oriented headache therapy techniques at the therapist's disposal:

Elimination and diversion procedures: intestinal diversion, cupping, air-puncture treatment, etc.;

Acupuncture: ear acupuncture, acupressure, trigger points;

Energetic and fine-material therapies: aroma therapy, flowers therapy, color therapy;

Relaxation methods: biofeedback, Yoga, autogenic training, breath therapy;

Nutritional medicine: nutritional guidelines, nutrient therapy, etc.;

Homeopathy: compound remedies, biochemical substances, nosodes;

Hydrotherapy: wraps, packs, effusions, etc.;

Manual therapy: chiropractic, gentle mobilization, vertebral column-spine method;

Massage and reflex zone therapy: lymph drainage, stimulation of the reflex zones;

Neural therapy: disturbance field search, elimination of active disturbance fields; usage forms, plant prescriptions, etc.;

Psychotherapeutic pain management: patient history, conducting discussions, etc.;

Oxygen and ozone therapy: usage descriptions.

Isopathy in the Headache Clinic

Because of the chronic aspect of many headache and migraine cases, the body's reactivity is often diminished. Many therapeutic efforts are defeated by this circumstance, and, in the meanwhile, a lot of time can have gone by before an effective method that



is suited to the patient is found, which also comprehensibly leads to a perceptible reduction of the headaches. At this point, the application of isopathic, apathogenic bacterial substances and isopathic fungal preparations is a very helpful method of choice. Some of them are directly and specifically effective against headaches, others trigger endogenous corrective stimuli in headache cases by means of their effect on the organism as a whole.

SANUKEHL Myc 6X (drops)

The homeopathic haptens of the pathogen *Mycobacterium bovis* effect in the human organism - as also do other bacterial polysaccharide components - generally and superordinately, a stimulation and activation of immunological processes. The pathogen haptens in SANUKEHL Myc work via the absorption of the bacterial toxins, and are distinguished by a characteristic indication bandwidth whose sphere of activity also encompasses most headache types. The drops have a relaxing effect and improve blood circulation in the cranial vessels. The vasoconstriction of the vessels typical of headaches is thus averted; this relieves the vascular pain receptors and thereby reduces pain conditions in the head.

USNEABASAN (drops)

These drops contain the basic tincture of the beard ringworm

Usnea barbata, which has long been considered to be one of the most important healing substances against congestive headaches. The main active substance of beard ringworm is usnic acid, which - besides its strongly antibiotic effect on pathogenic germs - is also distinguished by a markedly vasodilatory effect on the cranial vessels. Application of the drops, therefore, very quickly leads to pressure relief of the pain receptors in the cranial region, and to a perceptible symptomatic alleviation of headaches.

USTILAKEHL 5X (drops, suppositories)

This homeopathic dilution of the fungal parasite *Ustilago zaeae*, also known as corn smut, has a clear activity focus on hormone-related headaches. Therefore, menstruation-dependent migraine and headache types are primarily included here. However, application of the drops is very effective for other kinds of headache as well, and should thus be tried, at least on a trial basis, in these cases as well.

QUENTAKEHL (drops, capsules, suppositories, ampules)

The active substance of this preparation consists of the apathogenic, homeopathic chondritins of the fungus *Penicillium glabrum* (syn.: *P. frequentans*), which produce no penicillanic acid and thus do not provoke any typical

side effects, such as disturbance of the intestinal microflora or liver damage. This remedy has proven effective especially in cases of migraine and infection - or inflammation-related headaches (infectious sinusitis, tonsillar abscesses, dental processes, intestinal tract infections, etc.). In headache therapy, QUENTAKEHL should be regarded and applied primarily as an activity multiplier and effect amplifier for other fungal preparations already being used. This remedy's important therapeutic stimulant role should therefore be utilized and included in any headache-specific treatment plan.

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