## Otolaryngology Vestibular Migraine

Vestibular migraine can cause vertigo, imbalance, nausea/vomiting, and sensitivity to light/sound and may or may not involve headaches. It is the most common cause of dizziness in adults. There is usually a family history of migraines or personal history of migraines or motion sensitivity (car sickness). It is estimated that 50% of people who suffer from migraines are never diagnosed. Most people who suffer from vestibular migraines will have normal hearing exams, vestibular testing, and MRI scans.

Dizziness symptoms are episodic in nature and can last minutes to hours. Women are more commonly affected and symptoms may get worse around menstruation.

Common migraine triggers are food additives, alcohol, artificial sweeteners (aspartame), caffeine, chocolate, dehydration, skipping meals, soft cheeses, menstruation, odors (perfumes), red wine, sleep apnea, stress, tobacco, and weather changes

## Your physician has diagnosed vestibular migraines and recommends the following treatment:

- Conservative therapy can involve limiting migraine triggers, proper diet, exercise, stress management, hydration, and adequate sleep. If conservative therapy is not enough, daily medications may be needed
- Natural supplements include Riboflavin 400 mg daily, Feverfew 50-300 mg twice daily, Coenzyme Q10 100 mg three times a day, Vitamin D3 1000-4000 units daily, Melatonin 3 mg before bed, and Magnesium oxide 400-600 mg daily.
- 3. Medications for migraines prevention include beta-blockers (Propranolol, Metoprolol), anti-epileptics (Depakote, Topamax), antidepressants (Venlafaxine), and calcium-channel blockers (Nicardipine).
- 4. Rescue therapy include triptans (Sumatriptan), NSAIDs (Ibuprofen), antiemetics (Zofran), antihistamines (Meclizine, Dramamine), and benzodiazepines (Diazepam, Lorazepam).

Please feel free to contact us if you have any questions or concerns.

