How to determine which foods trigger migraine

PHILADELPHIA — The relationship between food and migraine exists, but the reasons for it are uncertain, a presenter at the American Academy of Neurology Annual Meeting said.

There are one billion patients with migraine worldwide, and those with the condition can be found in one out of every four households, according to the American Migraine Foundation.

“Up to 10% of the population is sensitive to the food triggers that can cause migraine. [Yet] identifying food as a trigger is so difficult,” Belinda Savage-Edwards, MD, headache specialist and owner of Rehabilitation and Neurological Services in Huntsville, Alabama, told attendees.

“Patients should not give up the foods they think are causing migraine as you try to find out if the food is a migraine trigger,” Savage-Edwards advised. “Instead, have patients remove the foods they think are causing migraine one at a time, for about 2 months, then put it back in their diet. If they get a headache within 24 hours of eating that food, and there is no overlap of other medical situations such as menses, lack of sleep, hunger and thirst from water, you may have found what is triggering their migraine.”

She added that the migraine must occur at least half the time the patient eats the food for it to be classified as a migraine trigger. There also needs to be a strict time relationship between the consumption of the suspected food and migraine onset, which can range from 3 to 24 hours, she added.

Savage-Edwards said these foods and flavor enhancers may induce migraine:
• alcohol;
• artificial sweeteners;
• caffeine;
• cheese and some other dairy products;
• citrus foods;
• hydrolyzed protein;
• monosodium glutamate (MSG);
• processed meats; and
• smoked fish.

Conversely, foods, seasonings and flavors that may ward off migraine, according to Savage-Edwards, include:

• anti-inflammatory foods high in omega-3 fatty acids and lower in omega-6 fatty acids;
• brown rice;
• foods rich in magnesium and vitamin B;
• ginger, garlic and peppermint;
• green, orange and yellow vegetables;
• non-citrus fruits; and
• whole grains.

“This latter group of foods can be great foods in the right population. Remember that each person is different, and that a food that works in one patient will not necessarily work in another,” Savage-Edwards said. – by Janel Miller


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