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Headaches & Migraine: Chiropractic vs. Medication

Effectiveness & Safety

By Mark Studin | October 2010

It was reported in October of 2010 by Wrong Diagnosis that approximately 1 in 6,16.54% or 45 million Americans get headaches yearly, with many people suffering daily. While the statistical numbers vary based upon your source of information, it can be agreed upon that headaches are very common and shared among Americans at an epidemic rate. Taking into account that a single pill for many Americans to treat a headache can cost as much as \$43, according to Consumer Reports Health Best Buy Drugs, the overall cost to our economy totals billions of dollars and we need to focus not on the treatment of the effects, but the root of the cause.

When you suffer from headaches, it affects every facet of your life and you search for immediate answers. Most often it is a medication, either over-the-counter or prescription as evidenced by the amount of money spent as previously reported. One of the first medications recognized for the potential treatment of headaches is amitriptyline, commonly known by brand names such as Elavil, Endep or Amitrol as reported by Robert on About.com in 2006. It is also used as an antidepressant. This medication has made up a large part of the billion dollar industry along with over-the counter-medications. Although in many instances, this drug is indicated, the question that arises is what are the risks of taking this widely used medication?

The potential side effects of this medication targeted for headache sufferers, according to drugs.com (n.d.), are: blurred vision, change in sexual desire or ability, constipation, diarrhea, dizziness, drowsiness; dry mouth, headache, loss of appetite, nausea, tiredness, trouble sleeping, and weakness. Severe allergic reactions can be: rash, hives, itching, difficulty breathing, tightness in the chest, swelling of the mouth, face, lips, or tongue, chest pain, confusion, dark urine, delusions, difficulty speaking or swallowing, fainting, fast or irregular heartbeat, fever, chills, or sore throat; hallucinations, new or worsening agitation, anxiety, panic attacks, aggressiveness, impulsiveness, irritability, hostility, exaggerated feeling of well-being, restlessness, or inability to sit still, numbness or tingling in an arm or leg, one-sided weakness, seizures, severe or persistent dizziness or headache, severe or persistent trouble sleeping, slurred speech, suicidal thoughts or actions, tremor, trouble urinating, uncontrolled muscle movements (such as in the face, tongue, arms or legs), unusual bleeding or bruising, unusual or severe mental or mood changes, vision problems, and yellowing of the skin or eyes. Over the counter remedies of NSAID's or aspirin have a long list of their own of side effects.

The safety of chiropractic, in spite of rhetoric from naysayers, has been documented in clinical trials by Miller and Benfield (2008), who reported on children younger under 3 years old, "the youngest and most vulnerable population..." (p. 420). There was one reaction reports for every 749 adjustments which was typically crying. None were reported to have any serious side effects.

In adults, clinically, the majority of any side effects are soreness that is transient. This is based upon this author's

30 years of clinical experience and teaching doctors of chiropractic who are trained in creating an accurate diagnosis, prognosis and treatment plan. To say that more serious side effects cannot happen is irresponsible. However, they are rare, non-life threatening and usually transient in nature, no different than infants. To ensure the best outcomes, like with any professional, you have to verify the doctor's credentials and experience, which is best accomplished by securing a copy of the doctor's curriculum vitae (his/her academic and professional credentials).

Nelson et. al. (1998) reported on randomized clinical trials that took place over an 8-week course. The results showed there was minor statistical differences in outcomes for improvement during the trial period for chiropractic care, amitriptyline and over-the-counter medications for treating migraine headaches. It was also reported that there was no statistical benefit in combining therapies. However, the major factor is that in the post-treatment follow-up period, **chiropractic was 57% more effective in the reduction of headaches than drug therapy.**

Bryans, et. al. (2011) confirmed Nelson's findings and reported that spinal manipulation (adjusting) is recommended for patients with episodic or chronic migraines with or without aura and patients with cervicogenic headaches. This follow-up study is not a comparison or comment on the use of drugs. It simply demonstrates that chiropractic is a viable solution for many and can save the government and private industry billions in expenditures both in health care coverage, loss of productivity and avoidance of absenteeism in industry creating a new level of cost as sequella to headaches.

Medications and other forms of invasive care are often necessary and it is critical for a trained doctor to perform an accurate history and physical and when indicated, advanced diagnostic testing (CAT scans, MRI's, etc.) to ensure there aren't more serious underlying complications. However, based upon the results of the research provided by Nelson et al. (1998) and Bryans et. al. (2011), **it should be chiropractic first, drugs second and surgery last to render better outcomes with less potential side effects and a quicker return to productivity.**