Role of Rehabilitation for Migraines

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- OT – lifestyle-based intervention to prioritize nervous system regulation, trigger identification, action plan development for intervention, and treatment adherence; relaxation routine training; sleep intervention; body-mechanics and ergonomics; advocacy and self-advocacy including accessing accommodations
- PT – muscle stability and strengthening; muscle tension balance; muscle relaxation; body-mechanics and ergonomics
- SLP – addressing cognitive deficits including difficulty with communication due to cognitive symptoms

Evaluation

- What is typically evaluated re: rehab
    - Patient insight re: pathophysiology and exacerbating/alleviating factors,
    - Functional deficits including task/routine engagement being impacted by symptoms or causing symptom exacerbation due to trigger exposure
    - Body mechanics and musculoskeletal needs to guide client specific treatment pan including minimizing trigger exposure and increasing baseline level of activity tolerance

Treatment

- Common interventions/emphasis of treatment
    - Pharmacology including preventative and abortive medication, supplementation routine, trigger point injections, nerve blocks, and Botox injections
    - Nerve stimulators
    - OT, PT, and SLP if needed
    - CBT and therapeutic intervention
    - Action plan and intervention development to support recovery when flared