**Semenenko E**., assistant of [The Department of Public Health and Healthcare Management](http://knmu.edu.ua/index.php?option=com_content&view=article&id=232%3A2011-05-19-08-08-34&catid=7%3A2011-05-05-09-09-08&Itemid=27&lang=en)

**Salam L.**, [the VI Faculty for International Students of KhNMU Education and Research Institute for Foreign Nationals](http://knmu.edu.ua/index.php?option=com_content&view=article&id=77%3A6-&catid=6%3A2011-05-05-08-49-25&Itemid=28&lang=en), 1st year, group 18

Kharkiv National Medical University, Kharkiv, Ukraine.

**TREATMENTS OF MIGRAINE IN THE MIDDLE AGES**

‘It feels as if there is hammering and pounding in the head. Sound or talking is unbearable, as is light or glare. The pain arises from hot, choleric fumes, together with windiness. And so one feels piercing, burning and ringing.’

Centuries have passed since these descriptions, nevertheless, today’s migraine patients can still relate to it. Despite it affecting 1 in every 7 people, thus more than epilepsy, diabetes and asthma combined and has a rate as high as 30% of all neurological patients, it still remains to this day under-treated, unacknowledged by many and its sufferers are still often overlooked.

Migraines, or ‘hemicrania’ meaning half-skull, was first named so by Galen and may be traced all the way back to 1200 B.C.E ancient Egypt. Migraine is a severe headache, often accompanied by blurred vision, aura, nausea, fatigue and light/sound sensitivity, affecting usually, but not necessarily, half of the head. Causes of migraines in the middle ages were considered as rather superstitious or inaccurate to say the least. They ranged from supposedly being due to cold or heat, repeating Galen’s and Aretaeus views, all the way to it being due to retained viscous humors in the brain. I

t is commonly believed that trepanning, the act of boring a hole in the skull, as fetal as it was, was used to release the evil spirits and the noises of the ‘jingling bells of the fairies’ or to simply release pressure out of the skull along with treating epilepsy and other mental disorders the same way. Many others, nonetheless, treated migraines by holding a hot iron to the scalp or through herbs by putting garlic in an incision made in the skull. Adding vinegar on the scalp was also commonly practiced. It was believed that opening the pores of the scalp allowed more absorption of the remedies. Given the lack of proper anatomical knowledge and anesthesia, it was absolutely painful to perform such treatments and, if the patients did survive the infections, blood loss and the traumatizing experience, most would still continue to suffer from migraines.

The renowned scientist and philosopher Ibn Sina (980-1037 A.D.) wrote about its symptoms in his book ‘On Medicine’ and classified migraines as being frontal, occipital or general. St.Thomas Aquinas has also discussed migraines and recommended arnoglasse as a treatment. Many over the years gave compelling arguments as to why the pain mostly only seizes half of the head. Most famously remembered however was that it is so excoriatingly painful, that if it to seize the whole head, the pain would be simply unimaginable.

All of these troubling methods of treatment are way behind us now. Since then, more convincing vascular or neural theories arose as to why migraines appear. Although migraines have taken a very surprising turn by the 18th century and went from supposedly being one of the oldest diseases suffered by mankind to being ridiculed as ‘just a headache’ and then back again to being classified as a disease. Knowledge of migraines and its causes were flawed in the past, but the end, though unsuccessful, was to relief the patients from their suffering. Recent researches now show that certain neurotransmitters (CGRP) that control vasodilation of blood flow has been noticed to increase significantly before and during migraine attacks and are related to it, thus, many trials for monoclonal antibodies that can counteract the action of these neurotransmitters are being held in hopes of an effective, new drug.

And so, the conundrum of migraines still persists to this day with perhaps explanations to its causes but with no solid treatment to relieve all of its sufferers. It is crucial for us to shed some light, reflect and observe the advancements established in medicine, especially in neurology, since then. Otherwise, history might as well repeat itself all over again.

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