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Beyond the Pain: Rethinking Migraine Care with the RELIEF PLAN Approach

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Recent articles in this issue of *Headache and Pain Research* have shed light on the complex nature of migraine, highlighting the need for a multifaceted approach to its understanding and management.¹ Migraine affects approximately 1.1 billion people worldwide and continues to be one of the most disabling neurological conditions. The Global Burden of Disease studies have highlighted its substantial impact, ranking it as the second highest contributor to years lived with disability, with a particularly significant effect on women in their prime working years.²

Despite its significant contribution to disability-adjusted life years, especially among women and young adults, migraine frequently fails to receive the recognition given to other chronic conditions. This leads to its widespread trivialization and misunderstanding. The lack of awareness highlights the urgent need for improved public health initiatives aimed at enhancing understanding and recognition of the true impact of migraine.

The articles explore several dimensions of migraine pathology, treatment, and public perceptions. One study discusses the genetic, biological, and environmental factors contributing to migraine, supporting the view that migraine is not merely a headache but a complex disorder requiring a biopsychosocial approach for effective management. This aligns with the growing body of evidence linking potentially traumatic experiences occurring before the age of 18, including abuse, neglect, or household dysfunction, with the development of chronic migraines.³

Another contribution examines the evolution of migraine treatment, moving from the vascular theory to recognizing neural circuit dysfunction as the primary factor. The discovery of key players, such as calcitonin gene-related peptide, in migraine mechanisms has transformed therapeutic strategies, emphasizing the need for early detection and intervention to prevent progression to chronic or medication-overuse headaches.

In Korea, cultural and linguistic barriers complicate the recognition of migraines. An article addresses the term "편 두통" (one-sided headache), which contributes to widespread misunderstandings about the nature of migraines. It cites a survey that shows a significant portion of the population harbors misconceptions about the characteristics and treatment of migraines, underscoring the need for improved public education.⁴

To address these issues, I propose the "RELIEF PLAN" approach to migraine management:

- R Recognize adverse childhood events: Acknowledge the role of early trauma.³
- E Educate the family: To change perceptions and provide support.⁴
- L Lifestyle modifications: Incorporate non-pharmacological interventions.⁴

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- I Identify triggers: Tailor trigger management to the individual.⁴
- E Early detection and intervention: Prevent chronicity through timely action.⁴
- F Foster regular visits: Ensure ongoing care and research participation.⁴
- P Plan for the future: Develop strategies to reduce societal burden.⁴

This editorial advocates for a future in which migraines are treated with the complexity and attention they deserve. It is informed by the latest research published in this issue, which calls for a holistic approach to care, education, and policy.

AVAILABILITY OF DATA AND MATERIAL

Not applicable.

AUTHOR CONTRIBUTIONS

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CONFLICT OF INTEREST

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