

## Guidelines on the management of nausea and vomiting in migraine

The migraine mid-brain generator and gastric control centre are in close anatomical proximity. During the migraine attack, the action of the stomach is inhibited, and this leads to nausea and vomiting. The important treatment implication is that medication taken orally will not be absorbed as effectively and an anti-emetic will help to facilitate this. For this reason, it is important to take migraine medication as soon as possible in an attack.

In adults the anti-sickness drug of choice is Metoclopramide (10mg). Maximum 4/day, 8 in any attack. It has anti-nausea, prokinetic and analgesic properties due to its anti-dopaminergic action. Prochlorperazine 5mg tabs X 4 tabs repeated with 2 tablets 2 hours later if required and can be used in the buccal formulation to facilitate absorption, 3mg X 2 if vomiting is a problem. (Domperidone is no longer used, due to its' issues with extended the QR interval. This is particularly relevant with Citalopram, Venlafaxine and Verapamil, which are used in headache management).