Headache Research Report

Appendix O

Elimination Diets

Considering the significant literature (historical and modern) linking headache to digestive system, it is reasonable to provide an initial assessment to determine whether the headache patient fits the profile for intestinal etiology. A food/symptom diary is a simple tool for evaluating the role of diet in migraine. The patient is instructed to record food and beverage consumption which is compared to migraine episodes. The patient may already be aware of food triggers that can be easily documented in a clinical interview. An elimination diet is another valuable assessment tool.

Egger et al. Elimination Diet

In a double-blind controlled trial of oligoantigenic (limited food) diet, Egger et al. (1983) reported the recovery of 93% of 88 children with severe frequent migraine. The oligoantigenic diet consisted of one meat (lamb or chicken), one carbohydrate (rice or potato), one fruit (banana or apple), one vegetable (brassica), water and vitamin supplements. An optional diet consisting of none of the foods in the first diet was offered to patients who did not respond to the first diet. After 3 or 4 weeks, patients who had no headaches or only one during the last 2 weeks of the diet were reintroduced to excluded foods one at a time in a double-blind format to verify that the foods were causing the migraine. 26 (70%) of 40 patients experienced migraine challenges to the reintroduction of provocative foods. Interestingly, in most of the patients in whom migraine was provoked by non-specific triggers (such as flashing lights), the provocation no longer occurred while they were on the diet. Also, associated symptoms (such as abdominal pain, behavior disorder, asthma, eczema) improved in most patients.

Mansfield et al. Elimination Diet

Mansfield et al. (1985) studied food allergy as a cause of migraine. Skin testing, elimination diets, double-blind challenges, and measurement of plasma histamine were performed on 43 adults with recurrent migraine. Thirteen subjects experienced 66% or greater reduction in headache frequency while on a diet free of milk, egg, corn and wheat. Double-blind challenges in 5 of 7 patients provoked migraine whereas placebo challenges produced none. The authors concluded, "In patients with chronic recurrent migraine, evaluation of the role of foods in causing their disease appears a worthwhile undertaking." (p. 129)

References

Egger J, Carter CM, Wilson J, Turner MW, Soothill JF. Is migraine food allergy? A double-blind controlled trial of oligoantigenic diet treatment. *Lancet*. 1983;8355:865-869.

Mansfield LE, Vaughan TR, Waller SF, Haverly RW, Ting S. Food allergy and adult migraine: Double-blind and mediator confirmation of an allergic etiology. *Annals of Allergy*. 1985; 55:126-129.