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rachel@maybeitsmenopausemayhem.com

WELCOME!

This info sheet is part of a menopause symptoms series created alongside my podcast *Maybe it's Menopause Mayhem*.

It's here to share the key headlines in a clear, easy-to-understand way — so you can feel a little more informed, a little less alone, and a lot more supported.

THE FACTS

1: Migraines can worsen during perimenopause

It's all thanks to those **fluctuating oestrogen** levels again! This can trigger more frequent, longer and more severe migraine attacks.

2: Migraines often improve after menopause

The good news is that, although it might take a little while as hormonal levels settle, migraines do often improve. This is particularly the case when they have been linked to your periods.

3. HRT can help!

As HRT is designed to steady oestrogen levels, this can help – but it is better to use patches or gel rather than tablets.

HEADACHE OR MIGRAINE?

Pain



A headache often causes mild to moderate pressure. Migraine pain is usually more intense and may throb or pulse.

Other Symptoms



Migraines can cause nausea and sensitivity to light, sound or smells. A headache usually doesn't.

Daily Life



You can often continue your day with a headache. A migraine may stop you in your tracks and last for hours – or even days.

IMPORTANT

Menopause is just one reason you may experience migraines; please don't just assume – rule out other causes, get it checked out.

TOP TIPS!

Keep a migraine diary: Track attacks, symptoms, periods and possible triggers to identify patterns.

Protect your routine: Regular meals, hydration and sleep may help reduce attacks.

Act early: Use your recommended treatment when the migraine begins and rest somewhere dark and quiet.

Ask for medical support: Don't suffer. Speak to your GP or healthcare provider if migraines are frequent, worsening or disrupting daily life – preventative treatments may help.



NOT ALL MIGRAINES LOOK OR FEEL THE SAME

MIGRAINE WITH AURA

- Visual changes such as flashing lights, zig zags or blind spots.
- May cause tingling, dizziness or difficulty finding words.
- Usually develops gradually and lasts between 5 and 60 minutes.
- Can occur before, during or without head pain.

CLUSTER HEADACHE

- This is actually a separate condition – not a type of migraine.
- Causes extremely severe pain around one eye or temple.
- Attacks last for about 5 minutes to three hours and may happen several times daily.
- May cause a watery eye, drooping eyelid or blocked nose on the affected side.

SPEAK TO YOUR GP IF...

- Your migraines are becoming more frequent or severe
- They regularly disrupt sleep, work or everyday life
- Your usual treatment is no longer working
- You experience new or changing aura symptoms.

OCULAR /RETINAL MIGRAINE

- Rare migraine affecting one eye only.
- May cause flashing lights, blind spots or temporary sight loss.
- **New or sudden visual changes need urgent medical advice.**

MIGRAINE WITHOUT AURA

- No visual or sensory warning beforehand.
- Pain may begin in the temple, forehead, eye, face or neck.
- Often throbbing, moderate to severe and one-sided.
- May include nausea and sensitivity to light, sounds or smells.



Good, reliable reading & support

UK-based migraine charity:

[The Migraine Trust](#)

Offering clear information about migraine types, symptoms, triggers etc.

— The UK National Health Service:

[NHS: Migraine](#)

Straightforward guidance on symptoms, treatment and self-care.

— National Migraine Centre:

[Migraine, menopause & HRT](#)

UK specialist guidance explaining how hormonal changes & HRT can affect migraines.

— US-based Migraine Organisation

[American Migraine Foundation](#)

Information, patient guides & treatment resources.

— Australian Support

[Migraine & Headache Australia](#)

Information on headaches, migraine management and support.

