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Study On Effect Of Anger In Migraine: Effect Of Psychological Intervention

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Abstract - The scores on perceived intensity of pain and perceived frequency of attack scale were taken as baseline scores. For the second phase of the study a sample of seventy five patients was selected. Only those patients having at least two attacks in a fortnight period and scored three or more on a five point scale on the perceived intensity of pain scale were selected for psychological intervention. But some patients were dropped out in between and only sixty patients were remaining for intervention. These sixty patients were randomly assigned to the three groups. Thus, there were twenty participants in each of the three groups. The three groups were randomly assigned to three treatment condition. One group was given Jacobson progressive muscular relaxation training (JPMR). The second group was given EMG-biofeedback training and the third group was taken as the control group. The participants in the JPMR relaxation group were given relaxation training as designed above in every alternative day for fifteen days. Similarly, the participants in EMG-biofeedback group were also given training for every alternative day for fifteen days.

Key words; psychological intervention, biofeedback, relaxation

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INTRODUCTION

Many people who suffer from headaches either treat themselves or attempt to ignore their headaches. Headaches have an extraordinary impact and can seriously undermine the quality of life. For most of us, it is an infrequent and relatively minor inconvenience but for a substantial minority, recurrent or persistent headache is a serious disability and handicap. Some significant consequences occur for the wider community in terms of time lost from work and treatment costs due to headache. The headache disorder is mainly classified in two types- (i) primary headache disorders and (ii) secondary headache disorder. Primary headache disorders are again classified as migraine headache, tension-type headache and cluster headache. Migraine is a painful neurological condition and its symptoms are intense, throbbing and disabling episodic pain.

REVIEW F LITERATURE

It is less prevalent but still common in Asia (3% of men and 10% of women) (Scher, 1999). Thus from all this discussion we can realize that migraine is a major problem and it affects people in every walk of their life. Several kind of physiological or neurological causes play an important role in migraine. But there are several evidence which suggested that along physiological factors several kinds of psychological factors, which are also responsible in the causation in migraine headache. Among other things, stress and anger expression play an important role in the causation of migraine. Life is full of stress and different stressors of life may lead to migraine. These include marital and family status, education and occupational stress, outside interests, friendships and major life changes, such as marriage, divorce, separation, a new job, retirement or a birth or death in the family. Employment provides many stressors. All these are stressors of daily life may induce headache. Similarly a person's expression of anger also plays an important role in migraine. Whether a person expresses his/her anger outwardly or suppress this anger. It also plays an important role in migraine. Thus migraine is a psychophysiological problem for which psychological help can also be provided along with pharmacological treatment.

MATERIAL AND METHOD

The study was conducted in two phases. In the first phase of the study two hundred diagnosed patients of migraine were selected and measures of presumptive stressful life events and Spielberger's anger expression scale and specially designed perceived intensity of pain on five points scale and frequency of attack on four point scale, was administered all the patients. The scores on perceived intensity of pain and perceived frequency of attack scale were taken as baseline scores. For the second phase of the study a sample of seventy five patients was selected. Only

those patients having at least two attacks in a fortnight period and scored three or more on a five point scale on the perceived intensity of pain scale were selected for psychological intervention. But some patients were dropped out in between and only sixty patients were remaining for intervention. These sixty patients were randomly assigned to the three groups. Thus, there were twenty participants in each of the three groups. The three groups were randomly assigned to three treatment condition. One group was given Jacobson progressive muscular relaxation training (JPMR). The second group was given EMG-biofeedback training and the third group was taken as the control group. The participants in the JPMR relaxation group were given relaxation training as designed above in every alternative day for fifteen days. Similarly, the participants in EMG-biofeedback group were also given training for every alternative day for fifteen days. The patients were also taking medication during psychological intervention. All the patients were retested on perceived intensity of pain and severity of attack scale after the end of the psychological intervention.

- There was non-significant difference as far as the perceived intensity of migraine pain is concerned in male and female patients. However, females were found to have significantly more number of migraine attacks than males in a fortnight period.

- For total sample (N=200) personal stressful events, impersonal stressful events, undesirable stressful events and ambiguous stressful events correlated positively and significantly with perceived intensity of migraine pain. As far as the frequency of migraine attack is concerned the personal events, impersonal events undesirable events and ambiguous events were also significantly and positively correlated with perceived frequency of migraine attack. However desirable events were not found to be significantly associated with either perceived intensity of migraine pain and perceived frequency of migraine attack.

- For males (n=108) personal stressful events, impersonal events, undesirable events and ambiguous events were found to be significantly and positively correlated with perceived intensity of migraine pain. As far as the frequency of migraine attack is concerned the personal stressful events, undesirable events and ambiguous events were found to be significantly and positively correlated with perceived frequency of migraine attack. However, desirable events were not found to be significantly associated with either perceived intensity of migraine pain or frequency of migraine attack.

- In case of females, (n=92), personal stressful events, impersonal stressful events and undesirable stressful events were also found to be significantly and positively correlated with perceived intensity of migraine pain. As far as the frequency of migraine attack is concerned the personal stressful events, impersonal events and undesirable events were found to be significantly and positively correlated with perceived frequency of migraine attack. However, desirable events and ambiguous events were not correlated with either perceived intensity or frequency of migraine attack.

CONCLUSION

- Suppression of outward expression of anger was turned out to be the significant predictor and control of outward expression of anger was turned out to be the negative predictor of perceived frequency of migraine attack whereas, total anger expression and impersonal stressful events of life were turned significant predictors of perceived intensity of migraine pain for the total sample.

- Suppression of outward expression of anger was turned out to be the significant predictor of perceived frequency of migraine attack total anger expression was turned as the significant predictors of perceived intensity of migraine pain in males.

- Suppression of outward expression of anger was turned out to be the significant predictor of perceived frequency of migraine attack whereas impersonal stressful events and outward expression of anger were turned as significant predictors of perceived intensity of migraine pain in females.

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