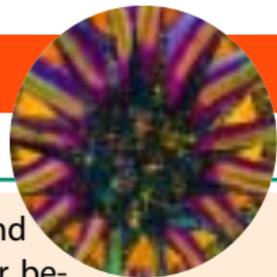


## A Client with a Migraine Headache



Betty Friedman is a 25-year-old grade-school teacher. Her friends and the other teachers regard Ms. Friedman as an enthusiastic person who sets high standards for herself and strives for perfection. During the spring semester, Ms. Friedman begins to miss work and sometimes appears very nervous. One day, another teacher notices Ms. Friedman running down the hall and into the restroom; the teacher finds Ms. Friedman vomiting. As she washes up, Ms. Friedman tells the other teacher that she has been having headaches since she began menstruating, but that they have never been as intense and frequent as during this past year. They even wake her from her sleep. Ms. Friedman agrees to see the nurse practitioner, Jane Schickadanz, at the school clinic for evaluation.

### ASSESSMENT

During her health history, Ms. Friedman relates that each month before her menstrual cycle she becomes nervous and sees flashing lights. She also has difficulty expressing herself and thinking clearly. The next day she develops a “sick headache.” She states

that the headache can last 1 to 2 days and that afterwards she cannot brush her hair because her scalp hurts. Ms. Friedman attributes these symptoms to PMS and adds that she thinks she is allergic to cheese and nuts because she gets very sick after eating them. After assessment, and in consultation with the physician, Ms. Schickadanz diagnoses Ms. Friedman’s problem as a migraine with aura headache. Sumatriptan succinate (Imitrex) injections are prescribed.

### DIAGNOSES

- *Acute pain*, related to vasodilation of cerebral vessels and a decreased serotonin level
- *Deficient knowledge*, pain management
- *Altered role performance*, related to pain

### EXPECTED OUTCOMES

- Experience reduced frequency and duration of pain.
- Identify the available resources for helping with self-management of pain.

(continued)



## Nursing Care Plan

### A Client with a Migraine Headache *(continued)*

#### PLANNING AND IMPLEMENTATION

- Ask to keep a diary of her headaches for the next month, noting times of their occurrence, location and duration of pain, and factors that trigger the onset, such as her menstrual period or certain foods.
- Teach techniques for administering the subcutaneous injection and for disposing of the syringe and guidelines for administration. Teach to take the medication at the first awareness of an impending attack.
- Suggest an appointment with a counselor to learn methods of relaxation and stress relief.
- Request dietary referral for elimination of foods that might precipitate headaches.

#### EVALUATION

Four weeks after beginning medication therapy with Imitrex and relaxation techniques, Ms. Friedman has noted a decrease in the intensity of the headaches. She reports that the medication has

stopped the headaches, which, she has noted, tend to occur more frequently immediately before her menstrual period. She is walking for 30 minutes each day and has made changes in her usual diet. Ms. Friedman states, "I feel good about going to work with my kids at school and knowing I can control my pain."

#### Critical Thinking in the Nursing Process

1. List the questions you would include in a health history that would identify stressors consistent with migraine headaches.
2. Develop a teaching plan for Ms. Friedman that includes methods of reducing fluid retention before her menstrual period, as well as a suggested diet based on the food guide pyramid.
3. Design a plan of care for Ms. Friedman for the nursing diagnosis, *Disturbed sleep pattern*.

See Evaluating Your Response in Appendix C.