

questions which need to be answered, and to consider in what ways an attempt can be made to provide valid and relevant answers.

We are fortunate in having as our first speaker Lady Snow who will discuss from the consumer's point of view, as it were, the problems of migraine. This is undoubtedly a most important aspect and one which is often overlooked. I happened to be with two colleagues from Bart's yesterday. We had been invited to the annual inspection of the River Thames. I mentioned this symposium. Both happen to suffer from migraine. It was most interesting and valuable to me to hear their personal experiences, which revealed a multiplicity of factors which can operate in migraine and also the very interesting variety of phenomena which can be observed.

## THE CONSUMER'S END

*Lady Snow (London)*

It will be obvious to you that I would not be holding my office in the British Migraine Association had I not been a life-long sufferer from this repellent complaint. The one thing I thought I might do for the Association when they kindly asked me to be president, was to change the name to the "Anti-Migraine Association", so that we should not be suspected of wishing to perpetuate this horror. I wrote a book some time ago called "The Humbler Creation". In it, I described a migraine attack in all its repulsiveness; the description was largely subjective, and I cannot pretend to speak for everyone. I was surprised at the response. Not only have I had floods of letters saying "This is me", but I have scarcely been to a party where someone has not observed—"No one has said this before". The thing I brought out which interested people, was the personal humiliation of the complaint. This is an aspect which sufferers will hesitate to disclose to you.

It humiliates for two reasons. The first reason is that sufferers may think migraine is psychosomatic, and feel, quite rationally, that this means a weakness on their part. That they ought somehow

to be able to control a nervous nature and get rid of the thing by an act of will. When an attack comes, they go in for moral exercises under an appalling strain—" I will get rid of it; I must *will* it away, otherwise I am a kind of moral weakling". I am not saying that this is sensible, for it makes the attack worse; but you would be surprised how many people do it.

Again, sufferers will try to *conceal* and *deny* an attack because of its effect upon others. When one has been suffering from migraine for a long time, and has observed the effect upon husband and children and friends one knows that one is going to be a nuisance to them, however sympathetic they may be. A maddening thing is that whenever you have something important to do, or whenever there is something to which you are particularly looking forward, migraine may most likely rob you of the capacity to carry out your task or to get pleasure out of the treat.

The result of this is that your family, when you are waiting together to go to the function so eagerly anticipated, cannot fail to remark the terrible strain upon your face. The strain which says—" I have migraine coming, but I shan't admit it ". They know what is happening as plainly as if you told them outright. So the sufferer goes on pretending that he has not got this revolting thing, until finally he has to give in and lie down. In my case, it is often impossible to conceal the pain, because one eye is streaming tears.

I began my attacks at the age of eleven, in the days when people said that little girls could not have headaches. They occupied one half of my face. That, of course, is another horrible aspect; one half of you is as fit as a fiddle, while the other half is suffering. I used to keep saying " I can make this side as well as the other, if I only try hard enough ". These attacks grew steadily as I grew older until, in my early 30s, they were such a misery that I suppose I did not expect to get through three weeks without one; and when it occurred, it would last for something like five days of slowly diminishing pain and general misery.

During that very bad period, if I went into the street feeling perfectly well—sometimes an extreme sense of well-being would herald an attack—the word " migraine " would come to my mind, and that would be sufficient; I knew then that it was coming on again. I went the usual round of doctors, only to meet with the realization that they would be unable to do anything for me. The attacks worsened in frequency and severity: I took all the old familiar drugs.

I have been lucky enough in the last four years to have found a proprietary drug which works for me. It has more or less transformed my life, though it may not do much for many other people.

In the old days, I should not have been here today without a violent attack of migraine, which would have hit me on waking; simply because I knew I had a job to do.

I have not noticed a great deal of difference in the reactions of men and women to this complaint. But women will talk more openly than men about the humiliation of it, and some of them tell me that they find it connected with a certain kind of sexual excitement which comes at the time of an attack. This is very distressing: but I have a good deal of confirmation that it is so.

Anything you can do—and I know that some of you are sufferers, or have friends who are—so to co-ordinate your efforts that something positive may be done, will earn our deep gratitude. I am not going to pretend that my principal feeling is for industry and the loss of man-hours, although I know that this is a social problem. I am concerned simply with the human misery migraine causes. I know now that, unhappily, it is not confined to any one section of the community,—for instance, to a highly intelligent section of the community. That pathetic crumb of comfort has gone. I think it is splendid that this Association is trying to do what it can; for we, on the receiving end, have been waiting for help for a very long time. As you said, Mr Chairman, it goes back to Periclean Athens, and is, of course, far older than that. The Greeks had a word for it—hemiparalysis.

I look back with dread upon my worse years. I still have friends to whom migraine is a ruination of life; even when they are not actually suffering from an attack, they are waiting for the thing to happen again. I think doctors need to get out of their patients something of the mood this undoubtedly induces in them, particularly manifesting itself in the feeling of humiliation which is so very trying, and which so often prevents them from seeking treatment, from lying down at once in a dark room, or from doing anything which might relieve an attack in the early stages. It blackens their lives and it maddens their relatives. “Got another headache, dear?” One replies “Yes, but I don’t think it’s a migraine this time; in fact I’m sure it isn’t”. Then one goes through the ghastly familiar cycle of letting everybody down, and feeling terrible oneself.

Many people who do not suffer from migraine fail entirely to understand it and have little interest in working for its relief; you can encourage them to take a different outlook. I, however, am talking purely in subjective terms of human misery. Even to see you all here today, on a brilliant Sunday morning, discussing this depressing subject, gives me the greatest possible hope. On behalf of the Association, I am very grateful to you that you have come.