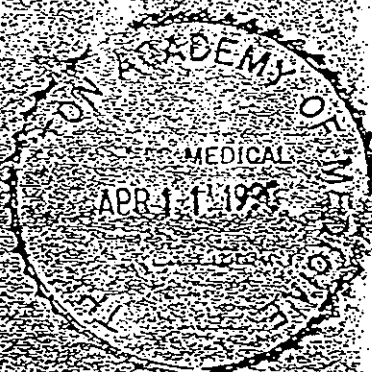

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THE MECHANISM AND TREATMENT OF MIGRAINE AND OTHER
DISORDERS OF CERVICAL AND POSTURAL DYSFUNCTION.

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The analysis of 5000 cases of Migraine treated personally during 1960-89 by one method is presented. All current attacks (150 persons) were immediately terminated by traction and cervical manipulation, except in 3 persons, in whom partial relief was achieved, without resort to chemo-therapy. Ten percent obtained permanent relief, requiring multiple manipulations. Chiropractic sources claim a higher level.

Since 1960 all chronic Migraineurs have been treated by one method - total spinal manipulation under Suxamethonium and Thiopentone. 10,000 such procedures have been personally performed for the treatment of postural dysfunction including 5000 cases of Migraine. 0.5% were rejected for contra indications being present, traction and cervical manipulation being substituted. All types of Migraine in the proportion of classical, common ophthalmic, basilar, cervical, traumatic, Barré-Liéou, neck muscle tension and atypical forms were encountered. The mortality rate was nil. Morbidity was minimal and transient. The method requires a surgeon, anaesthetist, two nurses, a fully equipped operating theatre and day-care facilities. The age range 1-90 years. The female/male ratio 54/46. The first decade contributed 12%. No congenital nor familial association was established.

Universal to all migraine was, confirmed cervical and postural dysfunction, acquired by birth and environmental factors, operating during life, which only total manipulation under Suxamethonium and Thiopentone, intentionally directed to its treatment, can effectively correct and restore the erect biped locomotive posture to normality.

At long term review, 60% obtained complete permanent relief following one, 80% following two, 90% following three manipulations leaving 10% with partial relief, requiring further measures.

This large series has confirmed that all migraine is the human penalty, punishment, pain, for acquired postural defects. The clinical indicator of all postural dysfunction is the traumatic cervical syndrome which produces all migraine, neckache, spinal dysfunction and in the proportion, headache, disturbance of cranial, spinal and autonomic nerves, disturbance of spinal cord, vascularity, organs, structures, and

2.

erebration.

As head and neck injuries considerably co-exist with the dysfunction of cerebration with resulting multiple neurologic defects are identical, only total manipulation under Suxamethonium and Thiopentone can with certainty eliminate the cervical component.

This series has revealed numerous disorders presently regarded as idiopathic, neurotic, behavior- to be in the proportion, the covert pathology of postural dysfunction, including brain damage, post-traumatic syndrome, Down's syndrome, defects of vision, smell, taste, hearing, balance, memory, speech, metabolism, learning, behavior, manifesting as photophobia, blurred eyes, blurred vision, tunnel vision, rhinitis, atonic dystrophy, deafness, tangential speech, vertebral basilar insufficiency, brain dullness, learning difficulties, dyscontrol syndrome, phobias, parkinsonia, psychoneurosis, tantrums, rages, the learning child syndrome, etc., as some of the manifestations of postural dysfunction.

A history and physical examination are the basic requirements for clinical diagnosis and treatment. The destiny of all mortals is the acquisition of postural dysfunction. The task of manipulative medicine is the restoration of the erect biped locomotive posture to the state intended by the hominidae and by nature that never plays dice, by total manipulation under Thiopentone and Suxamethonium.