Can Daith Piercings Provide Migraine Relief?

by JAIME SANDERS

Ear Piercing for Migraines

Have you heard of a daith piercing? This ear piercing for migraines has been a commonly discussed subject on social media for a few years, regarding its ability to help relieve migraine symptoms for many people who have gotten it. Before we jump into what daith piercings are and whether or not they are effective, let's talk about migraines. Migraine is one of the primary headache disorders as classified in the International Classification of Headache Disorders 3rd Edition (ICHD-3).

Migraine has two major types: migraine without aura and migraine with aura. Migraine without aura is defined as being a cyclical or recurrent headache disorder, with attacks lasting between 4 to 72 hours. Characteristics of the headache are typically unilateral in location, pulsing sensation, with a moderate-to-severe intensity. Nausea and a sensitivity to light, smell and sound are also associated with this type of migraine.

Migraine with aura consists of recurrent visual or sensory attacks that last between 5 to 60 minutes. These disturbances develop gradually and are typically followed by a headache and other migraine symptoms, such as photophobia and nausea. Aura symptoms are reversible and can be motor, brainstem, retinal or affect speech.

Common Treatments

When it comes to medications for migraine, they can fall into one of two categories: preventive and abortive. Preventives, which are medications taken daily or monthly, help prevent attacks from occurring. Abortive medications, which are taken at the onset of a migraine attack, help stop it from progressing. Some of the more commonly prescribed preventives include antidepressants, antiepileptics, blood pressure medications and beta-blockers.

In May 2018, the first class of drugs that specifically target and prevent migraine was approved by the FDA. These are the anti-CGRP monoclonal antibodies (mAbs), Aimovig (erenumab-aooe), Ajovy (fremanezumab) and Emgality (galcanezumab). CGRP, or calcitonin gene-related peptide, is a neuropeptide that is thought to play a key role in the pathophysiology of migraine.

The main function of CGRP is as a neurotransmitter in the central and peripheral nervous systems, and it also acts as a vasodilator. Studies have suggested that the levels of CGRP increase during a migraine attack. The role of CGRP inhibitors is to block the CGRP receptor, which would inhibit the inflammatory response in the central and peripheral nervous systems.

The most common abortive medications include over-the-counter medications, such as NSAIDs, analgesics and caffeine (ibuprofen, acetaminophen, aspirin and naproxen). Commonly-prescribed abortive medications for migraine include dihydroergotamine (DHE and Migranal Nasal Spray) and triptans (sumatriptan and eletriptan).

For those who are unable to take a triptan due to cardiovascular contraindications or allergies, the FDA just

approved Ubrelvy (ubrogepant), the first oral calcitonin gene-related peptide receptor antagonist drug (gepant) on the market for the acute treatment of migraine. Unlike the mAbs Aimovig, Ajovy and Emgality, Ubrelvy is a small molecule that blocks the CGRP receptor.

Daith Piercings

There has been some recent debate on whether daith piercings can help alleviate migraine attacks. A daith piercing is a piercing on the crus of the helix, a horizontal piece of cartilage on the outside of the ear canal. Many people on social media have sworn by this alternative treatment. But does it work?

It might not seem so unreasonable as to why the daith piercing has worked for some people. Migraine and the daith piercing are connected through acupuncture, an early Chinese medicinal practice that treats various conditions by triggering specific points on the body with needles. Why the ear? Well, there are specific pressure points on the ear that are used to treat headaches and migraines.

There have not been any studies done regarding the efficacy of daith piercings for migraine treatment. However, there is a documented case of a 54-year-old man with refractory chronic migraine and medication overuse headache who had gotten bilateral daith piercings. He had migraine since childhood with a family history of migraine. This gentleman had tried several preventive therapies, including Botox (onabotulinumtoxin-A) and had used five abortive medications to treat his acute migraine attacks. Despite these treatments, he still experienced significant pain and disability.

Due to minimum benefits from recurrent therapeutic efforts, he chose to get a daith piercing in both ears. At the time of getting the piercing, he was taking amitriptyline and aspirin daily as preventives, experiencing up to 15 headache days per month and using up to 15 abortive medications per month. In subsequent months after the piercings, he had a significant reduction in the number of migraine attacks and reverted back to an episodic state of the migraine condition. His head pain became less severe and he experienced only 13 headache days in three months, treated with only one abortive as opposed to five prior to the piercings.

Should You Get a Daith Piercing?

This one man’s experience and results from getting the daith piercing is not everyone’s experience. The results of an anonymous survey by MigrainePal in 2016 asked 1,107 respondents three questions about their daith piercing for migraine. These questions asked how long they had the piercing and how it has affected their migraine frequency and severity.

64% of respondents experienced a reduction in frequency and 66% reported a reduction in the severity of their attacks. The group of respondents who only had the daith piercing for one month had a higher number of people whose attacks were completely eliminated (25%). However, the longer a respondent had the piercing, the lower the number of people who experienced no further migraine attacks.

What we have to keep in mind is that although the results of this particular survey show that the daith ear piercing for migraines has good potential, it relies solely on the self-reporting of respondents who chose to share their experience. Therefore, there is a certain amount of bias present in this type of research. A clinical trial would be the best way to get more accurate and inclusive results on whether the daith piercing is an effective treatment for migraine.