



Migraine.

Major impacts on women's working lives.

Migraine is three **times more common in women than in men.**ⁱ Migraine affects over 30% of women over their lifetime.ⁱⁱ Migraine is most troublesome during people's most productive years (late teens to 50s).ⁱⁱⁱ Given the number of **working women living with migraine**, ensuring access to proper care pathways represents not just an economic, but also a gender equity priority.

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About Migraine

A **migraine** is a severe headache that often comes with nausea, vomiting, and sensitivity to light. It can last hours or days. Doctors don't know the exact cause of migraine headaches, although they seem to be related to changes in your brain and to your genes.^{iv}


There are two types of migraine: **migraine with aura and migraine without aura**; the former results in aura which is a series of sensory disturbances (i.e. visual disturbances, flashing lights) that occur before a migraine attack, whereas the latter has an absence of warning signs and is the most common form of migraine.^v

Differences between men and women

Both men and women can suffer from migraine. Yet, as in many other disorders, their experiences are different. Each migraine attack may be different, and **each individual responds differently; this is particularly true for men vs women.**

Women suffer longer attack duration than men and a higher recurrence rate. The difference in attack frequency between age groups is significant for women but not for men migraineurs. Migraine attack duration is also age-related: it is longer in women aged 30 and over. In general, the symptoms accompanying migraine (nausea, vomiting, phonophobia, photophobia) are more frequent among women.^{vi}

Menstrual migraines affect around 20-25% of females with migraines and are associated with greater disability, longer attack duration and are more difficult to treat than non-menstrual migraine attacks.^{vii}

 **30%**
of women are affected by migraine in their lifetime.

Impact on work-life: women's work limitations due to migraine

Migraine is the leading reason for lost days of work among people under 50, as approximately a third of attacks occur during workdays and two-thirds of migraine attacks result in a significant loss of productivity. Chronic migraine sufferers have four times more productive time lost compared to those who have infrequent headaches.^{viii} As women are three times more likely than men to suffer with migraine, they bear the greatest economic impact.

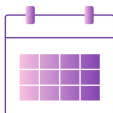
In the 'My Migraine Voice'^{ix} survey 2018 in which 75% of the participants were women:

- 52% of the respondents stated that they could not concentrate due to their migraine, making it difficult to perform job tasks effectively.
- 70% indicated that migraine affected their professional life.
- The top 3 impacts of migraine on work reported were **inability to concentrate on work (52%), missing too many days of work (32%), and lack of understanding among colleagues about their condition** or not taking it seriously (27%).
- An average of **4.6 working days being missed a month** was reported.
- Migraine led to a reduction of 13% in the respondents' working time (absenteeism) and 48% in productivity while working (presenteeism); 52% reported impairment in both overall work productivity (absenteeism and presenteeism combined) and daily activities due to migraine.

Migraine exacerbates health inequalities between the sexes, but it also leads to greater gender inequality as more women with migraine are forced to abandon their careers in the prime working years.^x



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We need to refocus our thinking around women and migraine by empowering them to take control of their lives. By further tailoring management of migraine to individual needs, promoting social inclusion, and improving health services, women with migraine can function better in society.

Supporting girls with migraine at school and women with migraine in the workplace will promote a positive change in their career choices and chances, thus helping to reduce the gender gap.

Migraine hits mostly young women, addressing it is actually a must if we want to make sure that young women can have a career and contribute to society.

More needs to be done to **address the burden of migraine in the workplace**, and improve the work-related outcomes for people with migraine. Incentivise and support employers to **encourage "migraine-friendly" workplaces**. Adapt the workplace to avoid absenteeism and presenteeism by implementing migraine- friendly work environments.

Policy framework for the workforce; adapt school and workplace legislation to give people with migraine, and women in particular, equal opportunities to contribute to society.

DISCOVER MORE AT WOMENSBRAINPROJECT.COM/MIGRAINE

References:

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ⁱⁱ <https://americanmigrainefoundation.org/resource-library/facts-about-migraine/>

ⁱⁱⁱ Migraine in the EU: Bringing women out of the shadows, European Migraine & Headache Alliance (EMHA), 2021: <https://www.emhahalliance.org/wp-content/uploads/Women-M-Policy-Paper-FINAL23MARCH.pdf>

^{iv} <https://www.webmd.com/migraines-headaches/migraines-headaches-migraines>

^v NHS. Overview: Migraine [10 May 2019]. Available from: <https://www.nhs.uk/conditions/migraine/#:~:text=A%20migraine%20is%20usually%20a,1%20in%20every%2015%20men.>

^{vi} Allais G., Chiarle G., Sinigaglia S. et al. Gender-related differences in migraine. *Neural Sci* 41, 429–436 (2020). <https://doi.org/10.1007/s10072-020-04643-8>

^{vii} Vetvik KG, MacGregor EA. Menstrual migraine: a distinct disorder needing greater recognition. *The Lancet Neurology*. 2021;20(4):304–15. <https://thejournalofheadacheandpain.biomedcentral.com/articles/10.1186/s10194-021-01243-5#>

^{ix} Martelletti P., Schwedt T.J., Lanteri-Minet M. et al. My Migraine Voice survey: a global study of disease burden among individuals with migraine for whom preventive treatments have failed. *J Headache Pain* 19, 115 (2018). <https://doi.org/10.1186/s10194-018-0946-z> - This study was conducted worldwide (31 countries across North and South America, Europe, the Middle East and Northern Africa, and the Asia-Pacific region) using an online survey.

^x Al-Hassany L, Haas J, Piccininni M. et al. Giving Researchers a Headache - Sex and Gender Differences in Migraine. *Frontiers in Neurology*. 2020;11:549038-.



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IN HER
HEAD



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