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My Headache's Gone and My Skin Is Smooth

by Rod Davis



Dr. Jeffrey Janis probably hates that headline, but when you're using Botox to treat migraine headaches, you have to expect a few raised eyebrows. This is, after all, the wonder drug of the vain. But some plastic surgeons, such as Janis, assistant professor of plastic surgery at UT Southwestern Medical Center, have long known that the wrinkle remover has legitimate medical uses. About five years ago, Janis began following a correlation between Botox and migraines accidentally discovered by a colleague, Dr. Bahman Guyuron of Case Western Reserve University in Cleveland, during routine surgery for brow lifts.

Through subsequent anatomical studies, duly published in professional journals, Janis and Guyuron demonstrated that the Botox injections at key locations in the forehead and scalp could effectively isolate the nerves—typically above the eyebrows—that act as headache triggers. Janis, who is also chief of plastic surgery for Parkland Hospital, identified four "trigger points," from the forehead to the neck, ideal for the injections that in turn paralyze the muscles that compress and irritate nerves. Based on four to five years of clinical use, Botox injections temporarily eliminate migraines in about 80 percent of Janis' patients. Follow-up surgery, which is the actual treatment, is effective in approximately 85 to 90 percent of cases.



photography by Jeremy Sharp

As the only plastic surgeon in Dallas who does the procedure, and one of only about 10 in the entire country (although more doctors, including neurologists, are warming to the treatment), Janis has labored in relative obscurity. Botox-migraine patients have comprised only about 15 percent of his practice. No longer. He says, "This thing has just exploded. The amount of patients I have seen has really gone through the roof." Still, it's a big roof: migraines affect 28 million Americans, 75 percent of them female. "I'll bet you everybody knows somebody that has had migraines," Janis says. It's a good bet that the ones in Dallas are spreading the word about what could be the hottest use yet of a drug that can do a lot more than make you look young.

Botox, muscle surgery combined add up to migraine relief

By Donna Stegah Hansard

Five years ago, Sharon Schater Bennett suffered from migraines so severe that the headaches disrupted her life, kept her from seeking a job and interfered with her participation in her children's daily activities.

Now, thanks to an innovative surgical technique performed by a UT Southwestern Medical Center plastic surgeon who helped pioneer the procedure, the frequency and intensity of Mrs. Bennett's migraines have diminished dramatically – from two to three per week to an occasional one every few months.

The technique – performed by a handful of plastic surgeons in the U.S. – includes using the anti-wrinkle drug Botox to pinpoint which of several specific muscles in the forehead, back of the head or temple areas may be serving as “trigger points” to compress, irritate or entrap nerves that could be causing the migraine. Because Botox temporarily paralyzes muscles, usually for about three months, it can be used as a “litmus test” or “marker” to see if headaches go away or become less intense while the Botox's effects last, said Dr. Jeffrey Janis, assistant professor of plastic surgery.

If the Botox is successful in preventing migraines or lessening their severity, then surgery to remove the targeted muscle is likely to accomplish the same result, but on a long-term and possibly permanent basis, he said.

CLINICAL ADVANCES

For Mrs. Bennett, the surgery proved to be life-altering.

“I can't even begin to tell you what a change this has made in my life,” said Mrs. Bennett, 45, a Houston-area resident. “For the first time in years, I can live like a normal human being and do all the normal ‘mom’ and ‘wife’ things that the migraines physically prevented me from doing. My family thinks it's great because they don't have to put their lives on hold numerous times a week because of my migraines. I'm also going back to school to get a second degree, something I could never have considered before.”

Dr. Janis said, “Many neurologists are using Botox to treat migraines, but they are making the injections in a ‘headband-like’ circle around the forehead, temple and skull. They are not looking at finding the specific location of the headache's trigger point. While patients may get temporary relief, after the Botox wears off they will have to go back and get more injections or continue medications for migraines.”

“It's like a math equation. I will inject the Botox into one trigger point at a time and leave the others alone. The Botox is used as a diagnostic test

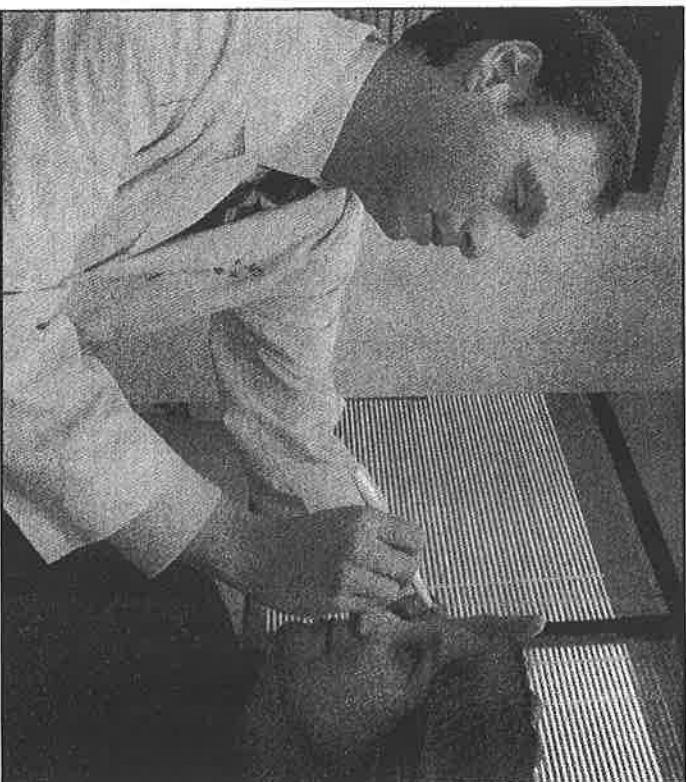
to determine what trigger point is causing the problem. If patients get a benefit from the Botox, they likely will get a benefit from the surgery. If there's no benefit from the Botox, then there won't be a benefit from the surgery.”

Dr. Janis began collaborating more than five years ago with Dr. Bahman Guyuron, a plastic surgeon at Case Western Reserve University and the first to explore using surgery to relieve migraines, following the revelation by several of his patients that their migraines had disappeared after they had cosmetic brow lifts. Dr. Janis has assisted his colleague by performing anatomical studies on cadavers to explore the nerves and pathways that might cause migraines. Together they have identified four specific trigger points and developed a treatment algorithm that includes using Botox prior to deciding whether to perform surgery.

During the past several years, numerous peer-reviewed articles have been published in *Plastic & Reconstructive Surgery* detailing their research efforts, and the researchers have presented the technique at professional meetings of plastic surgeons.

Approximately 28 million Americans, 75 percent of those women, suffer from migraines, according to the National Institutes of Health. For employers, that translates into an estimated 157 million lost workdays annually.

“A migraine is something you can't



Dr. Jeffrey Janis marks a site, pinpointing a muscle later removed to help relieve Sharon Schader Bennett's severe migraines.

explain to someone who hasn't had one,” said Mrs. Bennett, who began suffering monthly migraines as a teenager. As she grew older, the headaches become more frequent and unpredictable. “They were messing up my life. I couldn't make any commitments or plan activities for my kids. This surgery has made a huge difference in my life. It's awesome.”

Dr. Janis only sees patients who

have been diagnosed with recurring migraines by a neurologist and have tried other treatments that have failed. “Plastic surgeons are not in the business of diagnosing and treating headaches,” he said. “This is a novel method of treatment that is proving to be effective and potentially more long lasting than other things used before. But it is still in its infancy.”

For information, call 214-645-2353.