



MIGRAINE WORLD SUMMIT

INTERVIEWS WITH WORLD-LEADING EXPERTS

TRANSCRIPT



FOODS TO HELP MIGRAINE & DIZZINESS

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Introduction (00:05): The pathway to healing can look a little bit different since we don't have a lot of information on it. And so, I would say that you have to be a little more open to treatments that may not have a lot of scientific research backing them, or they have very, very small studies because that may be something that changes your life in the long run. And that was the case for me. Everything I tried had such, such little science behind it, but it really made such a difference.

Lisa Horwitz (00:37): Alicia Wolf is a full-time chef who found her niche in preparing migraine-friendly meals after being diagnosed with chronic vestibular migraine. Her journey from diagnosis to treatment was filled with many twists and turns, and inspired her to become a patient advocate for people with migraine. Alicia's own experience following a migraine diet greatly relieved her symptoms and allowed her to shift from a bedridden life to an active one. Alicia shares her knowledge and experiences in her cookbook, *The Dizzy Cook*, which features migraine-friendly recipes and treatment tips. Alicia, welcome to the Migraine World Summit.

Alicia Wolf (01:15): Thank you so much for having me. I'm excited to be here.

Lisa Horwitz (01:20): Yes, these are two topics that I know many of our watchers are interested in. So, I think the first thing we need to cover is, what exactly is vestibular migraine?

Alicia Wolf (01:34): Vestibular migraine is a type of migraine that can actually occur with or without head pain, which makes it a little bit harder to diagnose and why it took so long for me to get an accurate diagnosis, as well. It does come with light sensitivity or sound sensitivity, and most often patients experience feelings of dizziness, vertigo, dissociation symptoms. They feel like they're floating or moving when they're not. It can cause crazy, crazy symptoms in your brain that just make you feel like you are not in this world, you're not living in this world, you're just detached from everything or that you're feeling movement that's not there. I mean, it's just a crazy sensation.

Lisa Horwitz (02:24): You mentioned the word "dissociating," and that sounds like it can be a very scary thing to experience, especially if you're not having head pain, so you might not know it's a migraine. Is that the experience you had?

Alicia Wolf (02:40): Yeah, so actually that's what took me so long to get diagnosed with vestibular migraine because I was experiencing these feelings, but doctors didn't quite understand what it was. A lot of them said I was stressed or dealing with depression, that I needed to, you know, change my workload at work. Just stuff like that, and no one could quite give me a straight answer as to why I was feeling this way, even after a lot of vestibular testing.

Lisa Horwitz (03:12): That sounds extremely difficult, and like you said, because this is a migraine condition, but it doesn't present like a migraine, you weren't even going to the doctors yet with the knowledge to diagnose you. Is that correct?

Alicia Wolf (03:28): Yes. So, I actually saw about seven physicians, from ENTs to vestibular therapists to some of the top neurologists in Dallas. And everyone had a different opinion on it, but my vestibular tests were coming back negative and normal. My MRI was normal and so everyone was like, "Well, you're presenting normal, so this must literally all be in your head." And I'm like, "Yes, well, it's in my head, and I have anxiety and I have stress because I'm feeling this way, not because those ... that's the cause of it," you know? And so, it was really about finding a doctor that believed in me and could look a little bit deeper with how I ended up getting my diagnosis. And I actually drove 18 hours to go to the Mayo Clinic in Arizona because



some of the vestibular therapists I saw had said I could potentially have a perilymph fistula and I would need surgery that would leave me deaf for the rest of my life.

Alicia Wolf (04:32): So I was like, "Well, if I'm going to pursue this, I really want to see an expert to get a second opinion." So I booked an appointment with an ENT there who was an expert in perilymph fistula. And after all my tests, he came into the room and he said, "You have migraine." And I said, "What? No, I don't get headaches." And to me, as someone who had never experienced a traditional migraine attack, I always just assumed migraine equaled headaches, like, you know, a lot of the world does, and I didn't realize that it could come with all these other symptoms.

Lisa Horwitz (05:08): You serve as a great example to not give up. It might not be the fifth doctor, but it might be the sixth or the seventh. You just have to keep trying. Is that what you recommend to people that you speak to?

Alicia Wolf (05:22): Yeah, I mean, it can be so frustrating, especially as a woman. I felt like a lot of doctors just spoke to my husband in appointments, which did help kind of get somewhere bringing him with me to appointments. But there were times that they would just speak strictly to him and not even to me about my own symptoms. And it was, frankly, humiliating as a patient and I just wanted someone to listen to me.

Lisa Horwitz (05:50): You found that a migraine diet was a very effective management tool. What does your personal migraine diet look like?

Alicia Wolf (05:59): So, the treatment plan that my neurologist originally put me on, which was a combination of medication and supplements, as well as watching my sleep schedule and also removing myself from my very stressful job — we got to about 60% better with that. And so, I wasn't having as debilitating symptoms. I didn't feel like I was constantly walking on clouds or marshmallows or that my head was always in a blender, but I did have dizziness every day, brain fog, I was still having some vertigo episodes.

Alicia Wolf (06:38): And so that's kind of when I looked into possibly adding in a migraine diet and it was the migraine diet that actually took me from 60% to 100% days. And it did take some time, but it was really, really nice to start experiencing those dizzy-free moments throughout the day and then finally getting to dizzy-free days. And so, I think the combination of time mixed with the other therapies and then adding in that final piece was what took me to migraine remission, which was amazing.

Lisa Horwitz (07:13): What is the basic theory behind a migraine-friendly diet?

Alicia Wolf (07:20): So, there are actually so many different migraine diets out there that ... it seems like everyone has their own version of a migraine diet. What I chose to follow was, it's called the Johns Hopkins Migraine Diet. So, they use it in the clinic, as well as it's made popular by a book by Dr. David Buchholz called *Heal Your Headache*. So, some people may know it by both, it's ... been on a few websites, like AHS [American Headache Society] has their own version of it, too. But basically, the idea behind a migraine diet is that you remove common trigger foods — common migraine trigger foods from your diet for a limited time, and give your brain a chance to sort of calm down. And in that sense, you increase your migraine threshold by doing your other treatments, as well. So as your brain sort of calms down, you stop having so many



attacks, you start feeling more like yourself every day. Then you slowly work to reintroduce some of these foods to see: Do I even have migraine triggers and what could they possibly be?

Lisa Horwitz (08:35): So how long did it take from when you started this migraine diet until you started to feel relief? Was it days, weeks, months?

Alicia Wolf (08:48): It was actually months for me. So, I would say between about four months in, I started to experience dizzy-free moments throughout the day. And it was about six to eight months in that I actually had dizzy-free days and I felt comfortable to start bringing back in foods that I had eliminated.

Alicia Wolf (09:11): I remember about two months in, you know, I was working really hard at it and I wasn't really seeing any progress and I thought, "Oh, this diet is garbage, like, I'm just going to stop." And I used to love tzatziki sauce with my lamb, and so anytime we ate, like, grilled lamb or lamb chops or anything like that. And so, I remember one night I had prepared it and I used yogurt as the base for it. And I think within an hour or so I started experiencing a vertigo attack. And I hadn't had one in a few months, and the whole table really started moving on me and I thought, "Oh my gosh, there's something here that's just not sitting right with me," you know; "maybe there is a point to this and I'm just going to continue with it." And it turns out, as I started reintroducing foods later, yogurt is still actually one of my big trigger foods.

Lisa Horwitz (10:12): So, you found that yogurt was something that wasn't great for you. Is there a list of maybe 10 foods you can think of offhand that they recommend people avoid?

Alicia Wolf (10:25): Yeah, so a lot of it are the common ones we hear all the time. So like, aged meats and cheeses; we hear about caffeine, which does seem to be particularly hard on people with vestibular issues. Chocolate is the one that we hear all the time. Red wine is one that we hear all the time. But what was interesting about that is those didn't actually end up being my migraine food triggers — I can tolerate those pretty well. What did end up being some of my triggers were ones that you don't always hear about but that are a part of this diet. So, things like nuts — especially walnuts for me — tend to be a bad trigger, which was very shocking because I used to have almond milk in my coffee every morning and now I'm starting to realize, oh, that was causing my dizziness every morning. But even certain protein powders — collagen protein was one for me that I had to eliminate — that made a huge difference; things like citrus and onion, even, and certain beans.

Lisa Horwitz (11:36): Oh no, how do you cook without onions?

Alicia Wolf (11:41): There's actually a lot you can do, but that's usually everyone's first reaction.

Lisa Horwitz (11:47): As we're shifting to reactions to this, the list you just mentioned is a little bit overwhelming. If you think, how do I eat without aged meat or cheese or lemon — I think I put lemon on everything I cook — what is your No. 1 tip for people who want to try a migraine-friendly diet but feel completely overwhelmed by how different it is from the way they're currently eating?

Alicia Wolf (12:19): Right. So, first I would say that's totally normal to feel overwhelmed. I was overwhelmed, as someone who loves to cook and loves food. So, give yourself a little bit of grace. I think the first month is really an adjustment period. And, you know, one of the things that I missed from our list before is MSG and particularly hidden MSG. I do see it to be a pretty



common problem with readers in varying amounts, whether it's natural glutamate or actual MSG.

Alicia Wolf (12:54): And so, what the first month of the migraine diet is really for is to kind of get you adjusted to making substitutions to some of your recipes, cooking more at home, reading labels. And those are things that we don't always do, especially when we don't feel well. We just kind of want to grab, you know, frozen meals or pick up something easy from our local restaurant and you can do that sort of thing. You just have to be a little more mindful of it.

Lisa Horwitz (13:28): Do you think that for the first month of a diet change people need to follow any rules very strictly, or can they ease into a transition, like saying, "This week I'm going to eliminate food A; next week I'll eliminate this one," and work their way up to it. Or do you think it's better to just go cold turkey?

Alicia Wolf (13:50): You know, it really depends on the person. So, if you're one of those people who is all-in on things, you know, feel free to go all-in. If it gives you more of a sense of security to do things one at a time, I think that's totally OK. You know, it's like starting any other medication or supplement. If you do it randomly, you might get more random results; whereas if you do things consistently, you're probably going to see consistent, faster results. So, there's no rules on this; you can work it into your life however you want, but to see the quickest results or the most life-changing results, you may need to take it a little bit more seriously.

Alicia Wolf (14:44): But there's always ways to do that while incorporating it into your lifestyle. And a lot of times if you find yourself getting too wrapped up in everything and too focused on maybe labeling foods as good and bad, I highly recommend working with a dietician because it shouldn't be that way. A migraine diet should be more about embracing the foods you can have, learning to cook with new spices that you may not have used before. And really just changing your mindset to embrace, "OK, I'm going to focus on my health right now and eat these things that are great for my brain health."

Lisa Horwitz (15:22): I love that you reframe it that way because that was actually my very next question. Instead of thinking about the foods we might need to eliminate, what are some foods that you can supplement into your diet that may provide relief?

Alicia Wolf (15:38): Actually, I just finished [writing] a book with my neurologist and we really focused on foods that were great for brain health. So, some of these things, like dark berries, are really, really good to incorporate. Fish, especially for the omega-3's — I think we hear that all the time — salmon is one that we hear a lot. But there are actually a lot of ... No one ever says, "OK, well how do you incorporate your salmon easily into your diet?" And you know, that's where I can help, is make salmon delicious.

Lisa Horwitz (16:12): So, you're really mixing some convenience food items with things that you have to take more time cooking. So the salmon you might cook yourself and prepare, but you can rely on things like five-minute rice.

Alicia Wolf (16:25): Exactly. I always keep frozen rice in my fridge, especially frozen brown rice or some quinoa in there that I can just microwave really, really easy in like three minutes, toss together some greens or put them in the oven for a little bit. And then, actually, salmon turns out perfectly if you put it in the air fryer for about nine to 10 minutes — perfectly cooked every single time. You can season it with a little bit of toasted sesame oil; coconut aminos; make like a



quick teriyaki sauce to it, or even just sometimes sweet chili sauce is really great on it — hot honey; there are lots of things that you could do with it. A little bit of oregano and basil — you can switch it up.

Lisa Horwitz (17:08): I want to point out one ingredient you mentioned, which is coconut aminos. That's a substitute for soy sauce, correct?

Alicia Wolf (17:15): Yes.

Lisa Horwitz (17:15): Is soy something that people might want to start avoiding?

Alicia Wolf (17:19): So, soy is a part of the general elimination diet and it's not something I see as a very common trigger with patients who email me, but it's definitely worth just trying to eliminate it first and bringing that back in later on to see if it's a trigger for you. I think that also can be affected by higher glutamate content, as well, for people who are sensitive to that.

Lisa Horwitz (17:46): Food is such an emotional thing and that's why it's so hard sometimes to alter our diets because we want to eat with our families and we want to eat with our friends. So yeah, it can be a very difficult transition emotionally, as well as physically.

Alicia Wolf (18:03): Yeah. And I think that, you know, that's up to every patient to decide: If the migraine diet is stressing you out and you're not enjoying it and you're miserable, then it's probably not the right treatment for you. There are lots of other ways you can get around it. It's just an option for people who are looking for something a little bit different, who maybe enjoy cooking or who are wanting to learn how to cook.

Alicia Wolf (18:28): And it was something that actually saved me because when I lost my job to migraine, I was so ... I didn't really know who I was at that point. And what really made me feel more like myself was preparing a dinner, and my husband and I sitting down together at the end of the day and just really enjoying this food. It was such a comfort to me, and it just made me feel like a normal person when the rest of my day, I didn't feel like a normal person. So I think food has that ability to bring us together, to bring us comfort, to make us feel better. But as people with migraine, we're like, "Oh, how do we cook all of this?" You know, it just seems exhausting. But there are different levels to it and there are lots of ways to have substitutions for the things you miss. And so, it's not necessarily about restriction, but just a new mindset really.

Lisa Horwitz (19:27): I know your website has some really helpful tips. It has lists of safe foods, lists of foods you may want to eliminate, all spelled out for you. So if people feel overwhelmed, you can go to her website and there's a pantry list. I mean, it'll tell you the exact brand so you don't have to spend so much time in the store reading the labels — Alicia has read the labels for you.

Alicia Wolf (19:52): Yes. It was everything I wish I would've had when I first started and I was super symptomatic. I just wanted to put it all in one place for people. And even on my Instagram, I do grocery hauls, so at Trader Joe's or for Costco or different grocery stores. So, you can check those out, too, and get some ideas there on maybe things that interest you.



Lisa Horwitz (20:14): For people looking to shift into a different way of eating to help with their migraines: We've spoken about how it can be so intimidating. What does a migraine-friendly breakfast, lunch, and dinner maybe look like?

Alicia Wolf (20:31): Yeah, so, I'll just kind of take you through a few things that I like to do. So, a few of my favorite breakfasts just look like a combination of eggs, sometimes hash browns mixed in there, toast with SunButter on it. And I like to do fresh berries or even a smoothie. I have an anti-inflammatory smoothie recipe on my website that's very, very popular, especially with people on attack days — maybe when you have a lot of nausea, it seems to be pretty effective for that. Overnight oats, cottage cheese with berries — these are all things that make a wonderful quick breakfast, as well.

Alicia Wolf (21:14): For lunch — I'll typically like to meal prep this — so I will either do what I like to call a "naked rotisserie chicken," so it's not scandalous chicken, it's just a chicken baked in olive oil, maybe with salt and pepper. Sometimes you can find this at like Whole Foods or Sprouts or your local grocery store sometimes. It's pretty easy to make at home, actually. And I'll just pick that off and use it for sandwiches the rest of the week. You can put it in soups. There's lots of vegetarian soups that you could do, as well, with garbanzo beans, which is really, really hearty and filling, as well. A lot of these can be made in the Crockpot ahead of time, as meatballs in a sandwich, so it can be really, really easy to meal prep this ahead.

Alicia Wolf (22:00): And then my dinners usually look like a combination of something frozen — so either, brown rice from the fridge that I just microwave, quinoa, some kind of whole grain. And then I like to mix that with a few greens. So, whether that's roasted broccoli or doing a bed of greens somehow in a bowl mixed with a little bit of vinegar and some kind of olive oil or toasted sesame oil. And then I usually like to put some kind of protein on it.

Lisa Horwitz (22:34): A lot of these foods sound like foods we may already be eating with just a slight alteration that doesn't seem that intimidating. And they can find your information on how to message you on your website. Can you give us that name of that website again?

Alicia Wolf (22:49): Yes, it's thedizzycook.com and all of my social media is just @TheDizzyCook, so you can find me on there, as well as on my website and just shoot me an email — whatever works for you.

Lisa Horwitz (23:02): What do you think people living with vestibular migraine have to do differently in terms of treatment or lifestyle?

Alicia Wolf (23:12): Yeah, so I would say the most important is to find a doctor who specializes in vestibular disorders or vestibular migraine specifically. It may be an ENT, it could be a neurologist or a neuro-otologist — which has a little "t" in the middle there — and they tend to be experts on the vestibular system and how it can affect migraine, as well. And so, usually calling around and asking, "Hey, are you familiar with this?" can help.

Alicia Wolf (23:43): I have a list of doctors who treat vestibular migraines specifically and it's full of a range of them. So, I think that's what makes it kind of tricky is you have some ENTs treating it, some neurologists treating it, and they're also limited by their scope of education, as well. So, sometimes they have to work with each other or bring in vestibular therapists. And it really is a multi-pronged approach when it comes to vestibular migraine because occasionally vestibular therapy can also be a part of it, too. So there are lots of people that you might need in your care,



and to start off with a doctor who has those resources and can refer you to those resources — it will really change the outcome of your treatment.

Lisa Horwitz (24:33): So, it sounds like the main difference is not only finding a specialist, but you might have to work with multiple people, just because so many doctors' knowledge is hyper-focused on their own specialty. So you're really crossing specialties to get some treatment — a treatment plan.

Alicia Wolf (24:52): Exactly. And a lot of people with vestibular migraine can have comorbidities. So, Meniere's disease is one of them. BPPV [benign paroxysmal positional vertigo] is another, and these are different types of vestibular disorders and they tend to be more common in people with migraine. Triple PD [persistent postural-perceptual dizziness] is one that we're seeing a lot more often, too, in this community. And so, that can make this whole diagnosis a little more tricky than just vestibular migraine.

Alicia Wolf (25:21): And that's where having an expert who's seen these patients, who's treated these patients and can kind of look outside the box a little bit — especially when it comes to treatments — is key. That's one thing that I really loved about my neurologist. And something that also is interesting to me when it comes to a migraine diet is, although the migraine diet doesn't even have a lot of scientific evidence for it — which is difficult when we have such variable food triggers or some people don't even have food triggers, you know — it's the same thing with treatments, as well, and a lot of treatments weren't even studied for vestibular migraine back then. We're getting a few here and there, but everything that worked for me didn't have a lot of scientific research behind it.

Alicia Wolf (26:11): And so that's where I really had to rely on my doctor for anecdotal evidence: What was he seeing in his clinic, what was working for other patients? And I think that's what's so important to the vestibular migraine community, is you do kind of have to read other people's stories online and gather what they're doing and what's working for them because the pathway to healing can look a little bit different since we don't have a lot of information on it. And so, I would say that you have to be a little more open to treatments that may not have a lot of scientific research backing them or they have very, very small studies because that may be something that changes your life in the long run. And that was the case for me. Everything I tried had such, such little science behind it, but it really made such a difference.

Lisa Horwitz (27:08): So, before we leave today, I love to ask, since you are an advocate and a person with migraine, what advice do you have for people living with or taking care of someone who experiences vestibular migraine?

Alicia Wolf (27:24): I think the most important thing that you can do is just believe them and support them because it's really hard to not want to fix things or not be able to fix things. You know, in my community I see so many moms and wives or husbands cooking for their significant other or their friend, and dropping off food for them that's migraine-friendly or that they know can get them through a really, really bad attack time. And that to me is just so healing — that act of giving and in giving to someone else who's in need; I think it can actually be very healing for us as people with migraine, as well. And so, I would encourage that, if you have, like a friend or a family member that, you know, you could maybe trade off with or you could say, "Hey, I really need your help. I just can't make this food right now. Can you make this recipe for me and bring it over?" I mean, that can mean the world to someone, too.



Lisa Horwitz (28:27): This has been such an informative and interesting talk, and I know people are going to want to learn more about everything we've discussed. Where can we learn more about the migraine diet and what you're doing or follow your work?

Alicia Wolf (28:42): I have a website: thedizzycook.com. All the recipes and information on there are totally free to patients. I have a cookbook if you're interested in trying an elimination, but you want lots of good comfort foods to eat. It's called *The Dizzy Cook* and you can find it almost everywhere books are sold. And then I actually have a cookbook out that's very new called *The Mediterranean Migraine Diet*, which I did in partnership with Dr. Shin Beh. So, the traditional elimination diet that we kind of discussed is only meant to be done for a short amount of time and then you reintroduce foods. But this Mediterranean diet is more about long-term brain health and how to eat for long-term brain health, especially if you discover you have certain triggers through the elimination process. So, it'll be kind of the next step for people if they want a long-term way of eating or if they think elimination is not right for them, this book could be helpful for that.

Lisa Horwitz (29:45): Oh, that's so great. Are there any other resources that you like to recommend? Any other websites that you found useful, or books?

Alicia Wolf (29:55): Yeah, so I would actually recommend my neurologist's book, *Victory Over Vestibular Migraine. Heal Your Headache* — some of the information should be updated, but overall, it's a really great book to help understand the migraine-threshold theory and especially how everything works together and why the diet works for some patients. And then, I would also recommend vestibular.org as a resource, especially if you're experiencing a lot of vestibular symptoms. They have support groups, and we have a conference every so often and they really, really focus on patients with vestibular issues.

Lisa Horwitz (30:36): Alicia, it has been a pleasure talking to you today and learning more about vestibular migraine, from being a patient to an advocate to a chef. Thank you so much for joining us.

Alicia Wolf (30:50): Thank you.