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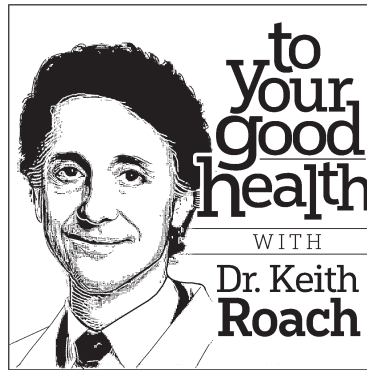
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TO YOUR GOOD HEALTH

FOR RELEASE JULY 13, 2026

By Dr. Keith Roach



Man With Hemicrania Continua Requires Indefinite Therapy

DEAR DR. ROACH: My future son-in-law was diagnosed with hemicrania continua several weeks ago by a neurologist and is responding to indomethacin. Could you provide a prognosis for this illness? The internet says that it can take anywhere from weeks to months to years. Is this likely the case? — *M.I.L.*

ANSWER: Hemicrania continua is an unusual type of headache syndrome. It's often misdiagnosed, with 50% of people not receiving a correct diagnosis for eight years. The pain is on one side of the head (hence "hemicrania"), and the pain severity can be high, with over 70% of sufferers describing the pain as "excruciating."

Although the pain can come and go, most people have or develop continuous unrelenting pain (hence the "continua"). In some people, these episodes of continuous pain can last for weeks or months and are followed by a pain-free period. This condition is usually diagnosed and managed by a neurologist.

The bad news for your future son-in-law is that most people have this condition not merely for months or years but for the rest of their lives, so they need indefinite therapy. The good news is that people who respond to indomethacin tend to keep responding to it.

Almost 50% of people were able to decrease their dose of indomethacin — a

potent but somewhat toxic anti-inflammatory drug that can affect the stomach and kidneys. Many people need medicine (such as ranitidine) to protect their stomachs. People who can't tolerate indomethacin have other options such as melatonin, the anti-seizure drug topiramate, or nerve blocks.

DEAR DR. ROACH: I read your recent column on dry age-related macular degeneration (AMD) and the AREDS2 vitamin and mineral supplement. I'm taking a generic version of them, even though my ophthalmologist (who's a board-certified retina specialist) says that mine's in the early stages and that AREDS are only useful in later stages. But he says that there's no harm in taking AREDS before then, and perhaps it'll do some good.

I'm also taking a saffron extract, which appears to be the only thing that clinical studies have found to help during the early stages. I wonder if you have any thoughts on this. — *B.S.*

ANSWER: There was a randomized, controlled trial on saffron for mild to moderate AMD in 2019, and saffron did show modest but statistically significant improvements compared to a placebo. People who took saffron had small improvements with visual acuity (both people who were and weren't taking AREDS supplements benefited from saffron), as well as improvements with sophisticated measurements of retinal activity.

Since there weren't any significant side effects, and there's an added benefit on top of the AREDS supplements, saffron is a reasonable treatment. The dose that was studied was 20 mg per day, and I found it easily available at reasonable prices.

Dr. Roach regrets that he is unable to answer individual questions, but will incorporate them in the column whenever possible. Readers may email questions to ToYourGoodHealth@med.cornell.edu.

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