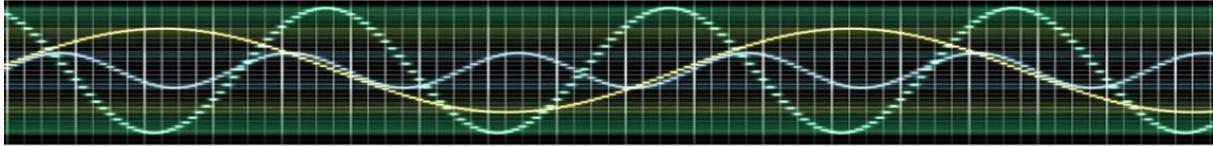




Redland Reflexology

BODY OPTIMISER - SOUND WAVE TECHNOLOGY



Diminishing Function Risk			Optimal and Balanced			Increasing Inflammation Risk		
1	2	3	4	5	6	7	8	9
Critical	Severe	Moderate	Mild	Normal	Mild	Moderate	Severe	Critical

MIGRAINE

Some Associated References re GROK response (check for imbalances)

See – RR Body Chemistry Results/Physical Functionality/Brain Nerve/ Cranial Nerve 5, Trigeminal

See – RR Body Organ Results/ Nerves Upper Body/Cervical Spinal Nerve C1 to C8

See – RR Body Organ Results/ Skeleton Vertebra/C1-C3

GROK Query Response: JAN 2026

The main nerves associated with migraine are primarily part of the trigeminovascular system, which plays a central role in the pathophysiology of migraine headache pain.

Primary Nerve: The Trigeminal Nerve (Fifth Cranial Nerve)

The trigeminal nerve (cranial nerve V) is the most important and consistently implicated nerve in migraine. It provides sensory innervation to the face, head, and key pain-sensitive structures like the meninges (the membranes covering the brain), dural blood vessels, and cerebral arteries.

The trigeminal nerve has three main branches:

Ophthalmic branch (V1) — The most heavily involved in migraine; it innervates the front of the head, forehead, eyes, and much of the dura mater (especially the anterior regions).

Maxillary branch (V2) — Contributes to a lesser extent, affecting areas like the cheeks and upper jaw.

Mandibular branch (V3) — Involved minimally in typical migraine pain.

During a migraine attack, activation and sensitization of trigeminal nerve endings lead to the release of neuropeptides (especially CGRP — calcitonin gene-related peptide), causing neurogenic inflammation, blood vessel dilation, and throbbing pain. This process is known as the trigeminovascular pathway, widely accepted as a core mechanism in migraine.

LIMITATIONS: Redland Reflexology, the RR Physio Analyser and the RR Body Analyser Optimiser are not able to detect cancer or diagnose diseases or medical conditions. Like other similar systems, we cannot guarantee that the system is 100% accurate; however, scan sessions may highlight frequency imbalances in the body that could be related to certain disorders. If you have symptoms that concern you, it is important to consult your doctor or healthcare provider.

Modern migraine treatments (e.g., CGRP monoclonal antibodies like erenumab or gepants) target this system directly, confirming the trigeminal nerve's key role.

Secondary/Contributing Nerves: Upper Cervical Nerves (Especially Greater Occipital Nerve)

The greater occipital nerve (arising from the C2 spinal nerve, with contributions from C3) and other upper cervical nerves provide additional innervation to the posterior dura and back of the head/scalp.

These nerves can contribute to migraine pain, particularly in cases with posterior head involvement, neck pain, or when migraines overlap with cervicogenic headache or occipital neuralgia.

There is convergence between upper cervical afferents (C1–C3) and the trigeminal system in the brainstem (trigeminocervical complex), explaining why neck issues or greater occipital nerve irritation can trigger or worsen migraine-like headaches.

Greater occipital nerve blocks are sometimes used diagnostically or therapeutically in migraine patients, especially those with occipital tenderness.

Summary of Key Associations

1. Trigeminal nerve → Primary driver of migraine headache (via trigeminovascular activation).
2. Greater occipital nerve (and upper cervical nerves) → Important in some patients, contributing to posterior pain and sensitization.

While the trigeminal nerve is central to nearly all migraines, individual attacks can vary in presentation, and not every case involves prominent cervical nerve contributions. If you're experiencing migraines, consulting a neurologist or headache specialist for personalized assessment is recommended.

LIMITATIONS: Redland Reflexology, the RR Physio Analyser and the RR Body Analyser Optimiser are not able to detect cancer or diagnose diseases or medical conditions. Like other similar systems, we cannot guarantee that the system is 100% accurate; however, scan sessions may highlight frequency imbalances in the body that could be related to certain disorders. If you have symptoms that concern you, it is important to consult your doctor or healthcare provider.