The anatomy of the surgical treatment of migraine
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Background:
The transpalpebral resection of the corrugator and depressor supercili muscles is a new treatment option for migraine headaches. Hyperactive contractility of these muscles can provoke the peripheral compression of the supratrochlear nerve and induce a neurogenic inflammation triggering the symptoms of migraine.

Nerve Supply:
Dual nerve supply through branches of the facial nerve.
medially-zygomatic VII
laterally-temporal VII

Corrugator with penetrating supratrochlear nerve

Instant anatomy:
Mass and length of the corrugator are highly variable
- the corrugator is penetrated by the supratrochlear nerve and runs over the supraorbital nerve
- the corrugator pierces the orbicularis and frontalis muscles separated by general fat pads to achieve extraordinary glabella mobility

Anatomical layers:
3 paired muscles acting in the glabella region
Superficial - procerus and frontalis
middle - orbicularis
deep - corrugator and depressor

Measurement:
1. Origin of the depressor supercili; 1.0 cm above the medial canthus
2. Origin of the corrugator supercili; 1.4 cm above the medial canthus
3. Midface-supratrochlear nerve; 1.7 cm
4. Midface-supraorbital nerve; 2.7 cm