



Migraine Prevention - Patient Hand-out

If a person experiences 2 or more migraine headaches a week, then taking a preventive medication on a daily basis makes sense. The goal is to reduce the frequency and severity of headaches and to prevent overuse of acute treatment medications. Taking acute medication treatment >2 times/week can lead to drug rebound headache.

The choice of which preventive medication needs to be individualized, taking into account the headache sufferer's medical health. Often, the preventive medication can help treat other problems the patient has such as insomnia, high blood pressure, fibromyalgia or depression.

The first preventive medication prescribed may not work or may cause intolerable side effects. Goals for success need to be outlined ahead of time with the patient to prevent unrealistic expectations. It is not reasonable for migraines to go away completely with any preventative medication. Rather, reducing frequency and severity of the headaches by 50% can be the goal. It can take several months for preventative medication to reach full effect so patience is needed.

Treatment options include:

1. TCA's (Tricyclic Antidepressants) such as Amitriptyline (Elavil) and Nortriptyline (Pamelor). Usually taken at bedtime, this class of drugs can help with insomnia, depression, fibromyalgia and neck pain.
2. Beta-blockers such as Propranolol (Inderal) or Atenolol (Tenormin). This class of drugs also lowers blood pressure and can reduce performance anxiety. Good choice if patients have high blood pressure. Should be avoided in asthma. Generally, well tolerated although fatigue and weight gain can occur.
3. Anti-epileptic drugs such as Depakote, Neurontin and Topamax. Side effects of Depakote can include weight-gain, nausea, hair loss, and tremor and should be avoided in women who could get pregnant. Topamax, now FDA approved to prevent migraine, has received lots of publicity. Unlike most other preventive medications, Topamax can cause weight-loss. Like Depakote, it can cause sedation.

All preventive medication should be started at low dose and increased gradually to prevent intolerable side effects. Seeing your physician at regular intervals to adjust

dosage and monitor effectiveness is critical to the success of preventive headache treatment.

Lots of other preventive medications are used, although not as well studied as the above 3 classes of preventive medications. These may include:

1. SSRI's (Selective Serotonin Reuptake Inhibitors): Useful if depression, PMS/PMDD, Anxiety, Panic Attacks, P.T.S.D., Fibromyalgia; CFIDS (Chronic Fatigue Immune Deficiency Syndrome) are present.
2. Calcium channel blockers: Useful if high blood pressure present; Side effects include sedation, constipation and edema (fluid retention).

Preventive Headache Treatment also includes:

1. Regular Sleep
2. Good Eating Habits
3. Regular Exercise
4. Stress-Reduction Measures
5. Avoiding known triggers

The ultimate goal of any headache preventive treatment is to lessen the severity and frequency of disabling headaches and to improve the quality of life of the headache sufferer.

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