

Orange County Migraine & Headache Center

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Migraine Prevention-Patient Handout

If an individual experiences 4 or more monthly migraine headache days, then he or she is a candidate for preventive treatment for their migraines. Treatment can include both non-prescription and prescription treatment. The goal is to reduce the frequency and severity of migraine attacks and to improve quality of life. In addition, effective preventive treatment can reduce the risk of medication overuse and medication overuse headache.

The choice of which preventive treatment approach to take needs to be individualized, taking into account the migraine individual's medical conditions, risk of pregnancy, allergies, and past experience with preventive treatments. Often, the preventive medication can help treat other problems the individual may have such as insomnia, high blood pressure, fibromyalgia, or depression.

The first preventive medication prescribed may not work or may cause intolerable side-effects. The goals for success need to be outlined ahead of time to prevent unrealistic expectations. It is not realistic for migraines to go away completely in most cases with any preventive medication. Rather, reducing the frequency and/or severity of migraines by 50% or greater is a realistic goal. And it can take several months for a preventive medication to reach full benefit so patience is needed.

Treatment options include:

- 1. Anti-epileptic medications such as Depakote and Topamax both of which are FDA approved for prevention of episodic migraine. However, neither should be used during pregnancy.
- 2. Anti-hypertensive medication such as beta-blockers including Propanolol and Timolol both of which are FDA approved for prevention of episodic migraine. Also, angiotensin receptor blocking (ARB's) blood pressure medications such as Atacand (generic Candesartan) show promise in preventing migraine and may be better tolerated than the beta-blockers which can cause sedation and weight gain.
- 3. Anti-depressants such as Amitriptyline (Elavil), Nortriptyline (Pamelor), Fluoxetine (Prozac), Duloxetine (Cymbalta), and Venlafaxine (Effexor) may be useful in preventing migraine. This category can be especially useful if the individual also has depression, anxiety, panic attacks, PTSD, or fibromyalgia.
- 4. Botox for chronic migraine (15 or more headache days per month for >3 months)
- 5. Non-invasive neuromodulators including Cefaly device, Spring TMS device, and GammaCore
- 6. CGRP monoclonal antibodies (injections) including Aimovig, Ajovy, and Emgality. All are FDA approved for prevention of migraine in adults and all are migraine specific.

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Dedicated to the relief of pain caused by headaches and mood disorders

Preventive Treatment also includes:

- 1. Good sleeping habits including adequate sleep & good quality sleep
- 2. Healthy diet with adequate protein & avoidance of skipping meals
- 3. Regular exercise
- 4. Limiting amounts of alcohol, caffeine, and sugar
- 5. Stress-reduction
- 6. Avoiding known triggers
- 7. Herbal treatments including B-2, CoQ-10, Magnesium, and Butterbur
- 8. P.T. to address neck issues contributing to headache

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

We are here to help!

Prepared by:

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