



AAN **Patient** and **Provider** Shared Decision-making Tool

## MIGRAINE



### **FIVE QUESTIONS FOR... CHOOSING A TREATMENT FOR SEVERE MIGRAINE RELIEF**

Shared decision-making helps patients and their health care providers make treatment choices together. Health care decisions should consider the evidence and the patient's goals and priorities. This guide will help you and your neurologist talk about what medicines are best to take when you get a severe migraine. You might discuss:

- Which drugs work best
- The side effects
- How the drugs affect quality of life
- How your responsibilities might affect your choice
- How cost will affect the decision

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#### **1. WHAT IS MIGRAINE?**

Migraine is usually a severe, pulsating headache in one area of the head. If not treated, migraines can last for several hours. Patients might have an upset stomach or vomiting and be sensitive to light and sound. Before a migraine, some people have visual changes such as seeing dots, shapes, or flickering lights. People with migraine tend to have repeated attacks that may be triggered by diet, stress, lack of sleep, or hormone changes.

People with migraine might take daily drugs to prevent a migraine. However, sometimes they still get an occasional migraine. In these cases the best chance of stopping migraine pain is by treating it quickly. This guide will help you discuss treatment options, including when rescue drugs are needed.

#### **2. WHAT ARE MY TREATMENT OPTIONS WHEN MIGRAINES STRIKE?**

Even with daily medicine you can still get a migraine. When you feel a migraine start you should treat it as quickly as possible with a rescue drug. Your options include:

1. Over-the-counter medicines: Right when a migraine starts you can take over-the-counter pain medicines. There are name brands and generics for all of them. There are also versions of these drugs that include caffeine. Caffeine helps the body absorb the drugs more quickly and cures the headache in a shorter period of time.
2. Triptans: If over-the-counter pain relievers do not help, your doctor can prescribe one of the triptans. These drugs narrow blood vessels in the brain and relieve swelling. They come in pills, sprays, suppositories, or shots.
3. Opioids and butalbital: Your doctor might consider an opioid or butalbital, as a last resort. They will consider these drugs when other rescue medicines do not work or if there is a medical reason for not taking them. Opioids, otherwise known as narcotics, and butalbital carry a risk of addiction and are not very effective in relief of migraine. Opioids work by reducing pain signals to the brain. Butalbital, a barbiturate, may be combined with pain relievers or with caffeine.

### 3. WHAT ARE THE BENEFITS AND RISKS OF THESE TREATMENT OPTIONS?

Treatment option	Benefits	Risks
<b>Over-the-counter medicines</b> (Acetaminophen, Ibuprofen, Naproxen)	<ul style="list-style-type: none"> <li>• Low-cost</li> <li>• Helpful for many people with mild migraines, especially if migraines are rare</li> </ul>	<ul style="list-style-type: none"> <li>• Headaches can get worse or they can happen more often, especially with use of these drugs more than 15 days a month</li> <li>• Liver damage with frequent, continued use</li> <li>• May cause stomach irritation</li> </ul>
<b>Triptans</b> (available through prescription only)	<ul style="list-style-type: none"> <li>• Significantly reduce pain within two hours for most people</li> <li>• Relieve other migraine symptoms, such as nausea, vomiting, and sensitivity to light, noise, and motion</li> <li>• Generally safe when used correctly and prescribed for the right patients</li> <li>• Less expensive generics available</li> <li>• May be available as nasal spray</li> </ul>	<ul style="list-style-type: none"> <li>• Certain people should not take these drugs, including those who have heart conditions, have had a stroke, or have high blood pressure</li> <li>• Can have side effects such as upset stomach, dry mouth, dizziness, sleepiness, and low energy</li> <li>• Can increase the risk of chest tightness, heart attack or stroke, or change your heart rhythm</li> <li>• Overuse headaches can occur</li> <li>• Higher cost than over-the-counter drugs (when no generic available)</li> </ul>
<b>Butalbital and opioids</b> (available through prescription only)	<ul style="list-style-type: none"> <li>• May work as rescue medication when nothing else has worked</li> </ul>	<ul style="list-style-type: none"> <li>• Less effective with repeat use</li> <li>• Headaches get much worse and happen more often with frequent use</li> <li>• Habit forming</li> <li>• Expensive</li> </ul>

### 4. HOW CAN I TALK WITH MY DOCTOR ABOUT REACHING A DECISION?

Decide if you need more information to make the decision.

- Make sure you are clear about the differences between over-the-counter medicines, triptans, and opioids or butalbital
- Talk with your doctor about studies with good data and the possible side effects for the drugs
- Discuss how you would like to treat your headaches
- Discuss if there are any risks that concern you more than the others
- Talk about the cost of these treatments and if insurance covers the costs

### 5. WHAT IS THE EVIDENCE?

- Silberstein SD; US Headache Consortium. Practice parameter: Evidence-based guidelines for migraine headache (an evidence-based review): Report of the Quality Standards Subcommittee of the American Academy of Neurology. *Neurology* [Internet]. 2000;55(6):754-762.
- Evers S, Afra J, Frese A, Goadsby PJ, Linde M, May A, Sandor PS, European Federation of Neurological Societies. EFNS guideline on the drug treatment of migraine – revised report of an EFNS task force. *Eur J Neurol* [Internet]. 2009 Sep;16(9):968-81.
- Institute for Clinical Systems Improvement. Headache, Diagnosis and Treatment of (Guideline) [Internet]. Bloomington, MN: Institute for Clinical Systems Improvement; 2011 [cited 2012 Oct 25].

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