

OUTLINE OF HEADACHE TREATMENT

Updated 2019

Education First- handout/web materials/read book

Start Diary, Trigger Identification and Avoidance
Lifestyle hygiene- sleep, diet, exercise
Caffeine reduction/cessation

First Line Migraine Abortive Medications

1. Imitrex(sumatriptan) Gold Standard 50mgx2, 100mgx1, 20mg spray, 6mgIM, Treximet x1
2. Maxalt(rizatriptan) - **Fast** (tabs, rapidly disintegrating tablets Maxalt mlt) 5, 10mg Max 20mg/d
3. Amerge(naratriptan)-(**longer duration**, lower side effects, lower efficacy) (menstrual migraine) 1, 2.5mg
4. Zomig-(zolmitriptan) **Fastest, long half-life** 2.5,5mg tab, 5mg spray
5. Frova-(frovatriptan) **Long half-life** 2.5mg tab
6. Relpax-(eletriptan) 40,80mg
7. Axert-(almotriptan) **Low adverse** 6.25,12.5mg
8. Treximet- imitrex85/naproxen 1/attack
9. Excedrin Migraine-ASA,caffeine,acetaminophen. Max 2/d. Rebound.
10. Aleve(naproxen)- young patients. 2at onset with food, repeat in 2h, max6/d, GI upset
11. Ibuprofen-400 mg to 800 mg q3 maximum 2400 mg per day
12. Amidrine- safe in children
13. Migranal spray(dihydroergotamine) –migranal kit 2/wk max, 8 sprayers
Never With: Antifungals, -mycins, protease inhibitors(-navirs), triptans, CAD, uncontrolled HTN
Good for AM HA, Menstrual
Good for migraine hypothesis testing
14. Steroids- prednisone 50mg, repeat x3d
15. Phenergan 25mg q6
16. Sphenopalatine block- 2%/4% lidocaine spray

First Line Vestibular Migraine Abortive Medications

1. Prednisone 50mg daily
2. Promethazine 25mg q6h
3. Almotriptan(Axert) 12.5mg[1]
4. Sumatriptan 100mg

Second Line Abortive Medications

1. Cafegot- Ergomar
2. DHE-IM
3. Toradol (Ketorolac)
4. Compounded suppositories – see Robbins
5. Compounded lozenges – see Robbins

Antiemetics

1. Phenergan (Promethazine) 25 mg or 50mg suppositories or pill Q6 hours- effective
2. Compazine (Prochlorperazine) p.o.(10 or 25mg q4) or suppositories(5 or 25mg), not in children
3. Reglan (Metoclopramide) 5 or 10mg q 4h, max 30 mg/d
4. Tigan (Trimethobenzamide) p.o. suppositories or lozenges-best for children
5. Thorazine (Chlorpromazine) last resort, sedating
6. Zofran (Ondansetron) 4-8 mg q6-8 hours, least side effects; no sedation

First-Line Preventive Medications

1. Elavil (Amitriptyline) 10mgHS-titrate up. Best efficacy, more side effects than Pamelor
2. Pamelor (nortriptyline) 10mgHS-titrate up, EKG if 50mg reached(20mg often sufficient)
3. Inderal (Propranolol) SR60mg to start- increase to 120mg
4. Aleve/Naprosyn/ Anaprox (Naproxen) 500 daily, can be bid
5. Verapamil – cardizemCD 120mg to start then double
6. Klonopin(clonazepam) 0.25mg, 0.5mg. Titrate up to 0.5mg bid
7. Depakote (Sodium valproate) 250mg Titrate up to 500mg bid
8. Topamax (topiramate) Start at 25mg bid ,increase 25mg/wk to 50mgbid
9. Trokendi- long acting topiramate
10. Mg Gluconate 1000mg tid – safe except in renal failure – good add-on
11. Zonisamide 50mg –taper up to 100mgBID
12. Candasartan 8mg HS x 14d then 16mg (angiotensin receptor blocker) similar efficacy to propranolol
13. Venlafaxine(Effexor) 37.5mg increase to 75mg if needed

Second Line Drugs with Specific Efficacy in Vestibular Migraine

1. Acetazolamide 500mg bid of VM[3]
2. Lamotrigine 100mg/d (no HA benefit)[4]
3. Cinnarizine 37.5-75mg(Europe)[5]
4. Flunarizine 10mg(Europe)[6,7]

Second-Line Preventive Therapy

1. Polypharmacy:
 - a. Amitriptyline/ Propranolol
 - b. Cardizem/ Mg gluconate 1000mg tid
 - c. NSAID plus first-line
 - d. Anything + Magnesium
2. Nebivolol(Bystolic) Beta-blocker)beta1and2receptor blocker over 10mg/d. 2.5,5,10mg. max40/d
3. Neurontin(gabapentin) 300 mg bid
4. Lyrica(pregabalin) 50, 100mg Titrate up to 200mg bid
5. Feverfew 2-4tabs/day

Third-Line Preventive Medications

1. Mexilitine- oral lidocaine
2. Nardil (Phenelzine) MAO inhibitor
3. Repetitive DHE cycle breaking

4. Botox A
5. CGRP inhibitors- Emgality, Ajovy(ligand), Aimovig(receptor)

Menstrual Migraines-Preventive

1. NSAIDs
2. Erogots - migranal
3. Triptans
4. Hormonal therapy
 - a. Tamoxifen – see Robbins
 - b. Estrogen patch
 - c. Long cycle contraceptives
5. Amerge 2.5 mg daily or b.i.d., for three days

Alternative Medications

1. Magnesium- 500mg tabs up to 1000mg tid, less GI effects with gluconate. Cheapest on internet.
Safe except in renal failure.
2. Petadolex(Petasites)- butterbur extract
3. Feverfew- 2-4tabs/d
4. Riboflavin- 400mg/d
5. CoEnzyme Q- 100mg tid
6. Migra-T: feverfew, butterbur, magnesium, CoQ10
7. Sinus Buster spray(capsacin)
8. Antihistamines

Notes on drugs we rarely use:

Midrin- isometheptane(vasoconstrictor), dichloralphenizone(sedative), acetaminophen. Kids 5 and up.

Give caffeine if too much sedation.

Fiorinal- butalbital, ASA, caffeine

Esgic, Fioricet- butalbital, acetaminophen, caffeine

Esgic Plus- more acetaminophen

No Narcotics

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(adapted from Robbins L. *Management of Headache and Headache Medications, 2nd Edition*. Springer-Verlag, New York, NY. 2000)

References

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