

Lifestyle Changes

Lifestyle changes are one of the first interventions recommended to help manage migraine. SEEDS is an acronym to help you remember what to work on.

- S** - Sleep Keep to a consistent sleep routine
- E** - Eat Eat regular meals and stay hydrated
- E** - Exercise Exercise 3-5 times per week
- D** - Diary Keep a headache diary
- S** - Stress Reduce stress



Some people living with migraine will report "triggers" that provoke a migraine attack such as wine, chocolate, changes in barometric pressure, menstruation, etc.

**LEARN ABOUT
MIGRAINE TRIGGERS &
LIFESTYLE CHANGES**



Migraine Diary

A written or electronic migraine diary can be helpful for tracking important details about your attacks.

Important information to track in your diary:

- Days a headache occurs
- Other symptoms (nausea, light sensitivity, etc.)
- Treatments used and effectiveness
- Noticeable triggers (ex. menstruation)

**DOWNLOAD A
MIGRAINE DIARY**



What is Migraine?

Migraine is a complex neurological disease that causes the entire nervous system to be more sensitive to stimuli. Headache is only one symptom of migraine. The severity and associated symptoms vary from person to person and throughout one's lifetime.

Migraine Symptoms



Neurological
Head pain
Mood changes
Yawning
Brain fog
Fatigue
Speech impairment



Face and Neck
Sinus pressure/pain
Nasal congestion
Runny nose
Tooth pain
Neck pain/stiffness
Facial/jaw pain



Sensory
Touch sensitivity
Light sensitivity
Smell sensitivity
Visual disturbances
Numbness
Tingling



Ear
Ear pain or pressure
Wet or foreign body sensation
Noise sensitivity
Difficulty hearing
Tinnitus



Gastrointestinal
Nausea
Vomiting
Diarrhea
Constipation
Reflux



Balance
Dizziness
Loss of balance
Motion intolerance
Vertigo/spinning

**LEARN ABOUT
MIGRAINE TYPES**



Disclaimer: You should always speak with your healthcare provider before taking any medication or nutritional, herbal or homeopathic supplement, or adopting any treatment for a health problem. The information provided in this brochure does not constitute professional medical advice.



Migraine Care

*Learn about migraine symptoms,
acute and preventive treatments,
lifestyle changes and more!*



**ASSOCIATION OF
MIGRAINE
DISORDERS®**

www.MigraineDisorders.org

About Acute Treatments

- The goals of an acute or "on demand" treatment are to achieve fast freedom from pain and associated symptoms, return to normal daily activities and limit disease progression.
- Acute treatments should be used as soon as symptoms occur for best results.
- If you are using acute medications more than 2 times per week it is recommended to talk to your provider about starting preventive treatment.

Types of Acute Treatments

These treatments are used at the onset of symptoms.

NON-PRESCRIPTION OPTIONS

Natural Products: caffeine^b, ginger^{*}, topical magnesium^{*b}

Neuromodulation: Cefaly®

Pain relievers: acetaminophen^{*b}, aspirin^{*} ibuprofen^{*b}, naproxen^{*}, combination medications (acetaminophen, aspirin and caffeine or aspirin and caffeine). **NSAIDs are recommended only in the second trimester of pregnancy.**

PRESCRIPTION OPTIONS

Anti-nausea: chlorpromazine, domperidone, metoclopramide^{*b}, ondansetron, promethazine^{*}

Ergot alkaloids: dihydroergotamine, ergotamine

Nerve Blocks^{*b} (office procedure)

Opioids and barbiturates (not recommended): butalbital, oxycodone, morphine

Pain relievers: celecoxib^{*}, ketorolac^{*}

Triptans: almotriptan, eletriptan^b, frovatriptan, naratriptan, rizatriptan, sumatriptan^b, zolmitriptan

PRESCRIPTION OPTIONS WITH COVERAGE RESTRICTIONS

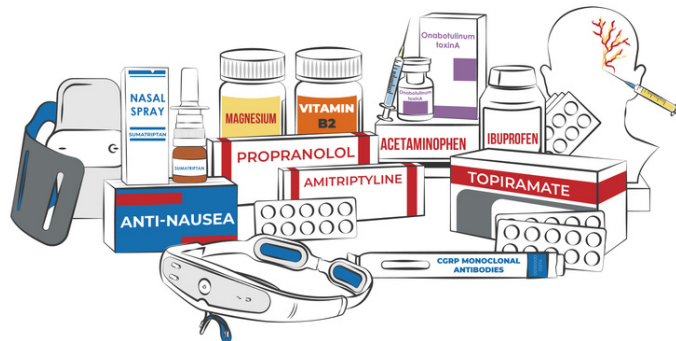
Ditans: lasmiditan

Gepants: rimegepant^b, ubrogepant, zavegepant

Neuromodulation: gammaCore™, Nerivio®, Relivion®, SAVI Dual™

About Migraine Prevention

- The goals of prevention are to reduce attack frequency, severity, duration and disability as well as improve responsiveness to acute treatments.
- A preventive treatment is considered a success when it reduces the frequency of headaches by 50%.
- You may need to try more than one type of preventive treatment or use multiple treatments at the same time.
- It is important to continue to use preventive treatments even when you are not having symptoms.
- Many insurance companies require a person to trial multiple medications without success prior to covering the "newer medications" (Anti-CGRP monoclonal antibodies, onabotulinumtoxinA, or gepants).
- Treatments should be trialed for at least 8-12 weeks at a therapeutic dose to determine if they are effective. Anti-CGRP monoclonal antibodies may be re-evaluated within 3-6 months.
- Talk to your provider if you plan to become pregnant within the next 6-12 months. Certain treatments may not be safe during pregnancy.



LEARN MORE ABOUT MIGRAINE TREATMENTS



*May be used during pregnancy.
^bMay be used during breastfeeding.

Preventive Treatments

These treatments are used routinely to reduce the frequency and severity of migraine attacks.

NON-PRESCRIPTION OPTIONS

Supplements

- Must be taken in higher doses than found in multivitamins and foods
- May want to break up the dose into two or more times a day (discuss with provider)
- Combination formulations are available

Magnesium^{*}: 400 mg (200-1200 mg) daily total. Magnesium glycinate or L-threonate are preferred. May cause loose stools.

Riboflavin (vitamin B2)^{*}: 400 mg (100-400 mg) daily total. Will harmlessly turn urine bright yellow.

Coenzyme Q10: 300 mg (100-300 mg) daily total

Cognitive Behavioral Therapy^{*b}, Biofeedback^{*b}, Mindfulness^{*b}

Neuromodulation: Cefaly®

PRESCRIPTION OPTIONS

Antidepressants: amitriptyline^{*b}, nortriptyline^{*b}, venlafaxine^{*b}

Anti-Seizure medications: divalproex sodium, topiramate^b, valproic acid, levetiracetam

High Blood Pressure Medications: atenolol, candesartan, labetalol^{*}, lisinopril, metoprolol^{*}, nadolol, propranolol^{*b}, timolol^b, verapamil^{*b}

Supplemental Hormones: continuous low-dose combination of estradiol and progestin or progestin alone; hormone replacement therapy

Nerve Blocks^{*b} (office procedure)

Others: cyproheptadine^{*}, memantine

PRESCRIPTION OPTIONS WITH COVERAGE RESTRICTIONS

Anti-CGRP Monoclonal Antibodies: eptinezumab, erenumab, fremanezumab, galcanezumab

Botulinum toxin

Gepants: atogepant, rimegepant^b

Neuromodulation: gammaCore™, Nerivio®, SAVI Dual™