



## **ACUTE MIGRAINE TREATMENT STRATEGIES**

Use **ONE** medication from each of the following categories:

Category:	1	Migraine-Specific	Anti-Inflammatories	Anti-Emetic	Neuroleptics (also Anti-Emetics)
Examples:	1)	Triptans (Imitrex,	1) Naproxen (Aleve),	Zofran (Ondansetron)	1) Promethazine (Phenergan)
		Maxalt, Zomig,	Ibuprofen (Advil, Motrin), Toradol		<u>OR</u>
		Amerge, Relpax,	(Ketorolac), Indomethacin		2) Prochlorperazine (Compazine)
		Axert, <u>OR</u> Frova)	(Indocin), Meloxicam (Mobic),		<u>OR</u>
	<u>OR</u>		Diclofenac (Cambia), Celebrex,		3) Metoclopramide (Reglan)
	2)	Dihydroergotamines	Ketoprofen, <u>OR</u> Aspirin		, , , ,
		(DHE injections <u>OR</u>	<u>OR</u>		*DO NOT USE THESE MEDICATIONS
		Migranal Nasal	2) Steroids (such as prednisone		WITHIN 24 HOURS OF EACHOTHER*
	:	Spray)	or dexamethasone) –		
	*MA	X 9 DAYS/MONTH*	sparingly		
	<u>*DO</u>	NOT USE THESE	*DO NOT USE THESE MEDICATIONS		
		DICATIONS WITHIN 24	WITHIN 24 HOURS OF EACHOTHER*		
	HOU	IRS OF EACHOTHER*			

## Example of treatment strategies:

- For mild headaches: use ice or heat packs, rest in a dark and quiet room, drink extra water, biofeedback, essential oils
- For moderate headaches: take a neuroleptic, anti-emetic, and/or an NSAID as early in the headache/nausea as possible
- For severe headaches: take a triptan or DHE preparation and ondansetron as early in the headache/nausea as possible

## Other options:

- Diphenhydramine (Benadryl) 25-50 mg
- Magnesium 400-600 mg/day
- Intranasal lidocaine 4%
- IV fluids (given as an outpatient at a local infusion center)
- Trigger injections/nerve blocks
- Topical treatments:
  - o Lidocaine/Prilocaine (EMLA) cream
  - o Lidoderm patches
  - o Voltaren gel

## If vomiting:

 Consider use of an alternative formulation of medication (injections, nasal spray, oral dissolving tablets, suppositories)

Consider need for backup and rescue treatment to keep you out of the ER and <u>ONLY</u> to keep you out of the ER

- <u>VERY</u> spare use of medications such as opioids (Ultram/tramadol, Norco/hydrocodone, Percocet/oxycodone) <u>OR</u> benzodiazepines (such as Valium/diazepam)
- <u>Too frequent use of opioid medications makes headaches worse and</u> harder to treat over time!!!