7th Iranian International Headache & 2nd joint Headache-Pain Congress

Update in acute treatments of migraine attack

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Migraine is one of the most frequent disabling chronic neurological conditions that causes significant effect in quality of life in patients. Migraine is a chronic disorder that characterized with attacks. Attacks are characterized by moderate—severe, often unilateral, pulsating headache attacks, typically lasting 4 to 72 hours, generally associated with nausea and/or light and sound sensitivity.

The acute treatment of migraine attacks, ranges from use of simple analgesics such as nonsteroidal anti-inflammatory drugs (NSAIDs) or <u>acetaminophen</u> to triptans, antiemetics, calcitonin gene-related peptide (CGRP) antagonists, <u>lasmiditan</u>, and <u>dihydroergotamine</u>. Noninvasive neuromodulation devices are used for patients who do not respond to or tolerate drug treatments and those who wish to avoid medications.

Early use of migraine-specific medications for severe attacks provided the best outcomes especially parenteral sumatriptan.

The patient should be treated early in the attack, use an adequate dose and formulation of a medication. Ideally, acute therapy should be restricted to no more than 2 to 3 days per week to avoid medication overuse headache

Key words: Migraine, treatment, Acute, attack