

CONSIDER A DIFFERENT APPROACH FOR YOUR MIGRAINE PATIENTS WHO HAVE


4 OR MORE MIGRAINE DAYS

PER MONTH^{1,2*}

*Frequency ranging from 2 to 6 or more headache days per month with impact on function ranging from severe to none.²

Here's an example patient:

- 35 years old
- 4 to 5 migraine days per month
- Busy parent of 2 boys and a small business owner
- Tends to leverage acute and OTC medications to manage migraine



"A migraine would have me curled up on the couch. I need to find a different way to more effectively manage my migraines."

The AHS recommends considering preventive treatment in any of the following situations:

ATTACKS SIGNIFICANTLY INTERFERE WITH DAILY ROUTINES DESPITE ACUTE TREATMENT²



I didn't realize how migraine pain was affecting me until I saw how much it was impacting the things that I do.

PATIENTS EXPERIENCE FREQUENT ATTACKS²



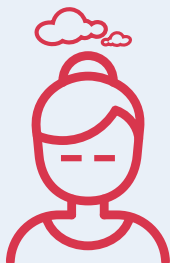
I was having too many migraine days. Around 5 a month.

CONTRAINDICATION TO, FAILURE, OR OVERUSE OF ACUTE TREATMENTS²



I was relying on my acute medications so often, I would run out before I could get my next monthly refill.

PATIENTS EXPERIENCE AEs WITH THEIR ACUTE TREATMENTS²



My doctor prescribed an acute treatment, but I ended up not being able to take it.

PATIENT PREFERENCE²



I take medication once migraine attacks occur, but I'd rather try to keep them from happening in the first place.

AHS=American Headache Society.

YOUR PATIENTS MAY BE READY FOR A MIGRAINE PREVENTIVE TREATMENT.

References: 1. Ha H, Gonzalez A. Migraine headache prophylaxis. *Am Fam Physician*. 2019;99(1):17-24. 2. Ailani J, Burch RC, Robbins MS, et al. The American Headache Society Consensus Statement: update on integrating new migraine treatments into clinical practice. *Headache*. 2021;61(7):1021-1039. doi:10.1111/head.14153