

Pharmacists and Migraine Patients: The good advices that should be diffused



Pharmacists are important partners in the treatment of migraine patients. They are often more available than doctors and can take time to provide valuable advice on managing migraines. However, it is important to make sure the right messages are getting through!

Advices to avoid:

■ Triptans are “strong pills”!

Triptans are medications that have been specifically developed to treat migraines. They have certain contraindications, which is why they must be prescribed by a physician, but if taken correctly they are totally safe and have been used by millions of people for the last 25 years. A migraine patient’s life can change for the better, thanks to triptans.

■ You can’t take a triptan if you’re taking an antidepressant.

The American FDA issued an alert regarding the risk of serotonin syndrome in cases where a triptan is combined with an antidepressant. However, an attentive review of the literature showed that the risk is extremely low and should not prevent co-prescription. If in doubt, contact the physician.

Advices to adopt

■ You’re trying a preventative treatment...are you keeping a migraine diary?

Doctors are overworked and don’t always have time to explain the usefulness of a migraine diary to their patients. Pharmacists can act as allies by encouraging migraine patients to fill out a migraine diary.

■ You take a lot of pills to stop your migraine attacks...are you familiar with medication-overuse headaches?

The most insidious form of medication-overuse headache is caused by over-the-counter combined analgesics. In Canada it is possible to obtain codeine without a prescription in Tylenol no.1. The risk of medication-overuse headache from combined analgesics arises when they are used 10 days or more per month.

Advices to avoid

- **Your doctor has prescribed you an antidepressant (referring to Elavil).**

Elavil (amitriptyline) does indeed belong to the antidepressant family, but for the treatment of migraines or chronic pain it is used only at low doses. Antidepressant doses are much higher than those prescribed for migraine. The terms “pain neuromodulator” or “anti-migraine drug” would be more appropriate.

- **You can't take a second dose of Relpax (eletriptan) within 24 hours of the first.**

In theory, this is correct. For reasons unknown, Health Canada approved the use of Relpax at only one 40 mg dose per 24 hours. However, in most countries (including France and the USA) a second dose is allowed and is considered safe. The Canadian regulation is therefore not based on valid scientific proof.

- **Wait until your migraine is unbearable before taking a treatment.**

It has been scientifically proven that acute migraine treatments are more effective when taken at the onset of the migraine.

The only time treatment should be restricted is when migraine attacks are very frequent (more than 10 days per month) in order to avoid medication-overuse headache (MOH).

Remember that attacks that are not well controlled may last several days and are also a risk factor for chronification.

Difficult situations should be discussed in detail with a physician.

Advices to adopt

- **To effectively treat your migraine, don't wait until the pain becomes intense. Treat it immediately.**

In cases of episodic migraine (8-10 days or less per month), there is no reason to wait before taking an acute migraine treatment. The better the attacks are managed, the lower the risk of chronification. Learn to recognize the first signs of a migraine attack, keep your medication with you, and take your treatment immediately.

- **The triptan your doctor prescribed you isn't working... try another one!**

You could try another since each person responds differently. There is no such thing as “the best triptan”. It's possible that a given triptan is perfect for your cousin but doesn't work for you! Make sure you try several triptans. If none are effective, discuss with your doctor the possibility of combining a triptan with an anti-inflammatory medication.

- **You're starting a preventative treatment... be patient!**

Many migraine patients become discouraged during the first few weeks of trying a preventative treatment. The side effects appear first...but they can later diminish, and the benefits subsequently appear during the second and third months.

The dose must sometimes be increased in order to be effective against migraines. The expected benefit is not the complete disappearance of migraines but a reduction of 50% or greater. Setting realistic goals is very important.

And remember...a preventative treatment is not a replacement for good lifestyle habits!



The book of Dr. Elizabeth Leroux, « Migraine: More than a Headache » is available in bookstores and ebook version. A french version is also available.