

# Jefferson Headache Center Newsletter

## Menstrual Migraine Edition

Edition 1

### TOP STORIES ↗

- ◆ What are Menstrual Migraines?
- ◆ Menstrual Migraine Research at the Jefferson Headache Center
- ◆ Contact Information



### *Dear Headache Sufferer:*

The purpose of this Newsletter is to share information with you about menstrually-related headaches as well as current research projects being conducted at the Jefferson Headache Center.

We hope that you will find the information within this newsletter helpful, either for yourself or for a family member or friend.

## WHAT ARE MENSTRUAL MIGRAINES?

Menstrual Migraine is formally defined as an attack occurring 2 days before and up to 4 days after the onset of the menstrual period. Migraine attacks occur around the menses in 60% of women. It is suggested that menstrual migraine is most likely due to estrogen withdrawal, which could trigger migraine attacks in susceptible women. These attacks are typically more difficult to treat due to their severity and their lack of response to standard acute medications.

- Menstrual migraine is different from non-menstrual migraine attacks, even in the same women, because of the regularity of its timing and its greater severity.
- Women are 2.5 times more likely to have a migraine during the first three days of menstruation, and they are more than three times as likely to report the migraine as severe.
- Being able to predict menstruation and menstrual migraine attacks allows women to prepare for menstrual attacks, avoiding other triggers and preparing to treat early

Though the field of headache has come a long way over the last 10 years, more research is necessary to better understand the biological complexity of menstrual migraine. For these reasons, we continue to pursue treatment options for these headaches by doing well designed research studies. Our hope is that we will then be able to provide treatment that has been proven to be effective and be able to understand more about this complex disease.

## RECENT ADVANCES IN MENSTRUAL MIGRAINE

The recent wave in the treatment of menstrually-related migraine focuses on short-term prevention. It is thought that preemptively treating with an acute medication for several days around when the menstrual migraine is expected, may help prevent these attacks from occurring. In a recent study, researchers compared use of the migraine medication frovatriptan to placebo (inactive substance). They found that by starting frovatriptan therapy two days before menstruation begins and continuing treatment for six days, the occurrence of menstrual migraines could be reduced by as much as 26 percent. The study showed that more than half of patients who used frovatriptan 2.5 milligrams twice daily had no menstruation-associated migraine.



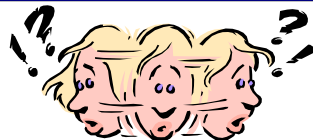
**A DAILY DIARY IS KEY!** One of the more important aspects of appropriate menstrual migraine treatment is the initial diagnosis. Recent studies show that women underestimate the occurrence of menstrually-related attacks. It is recommended that women who suspect they may have menstrually-related migraine, keep a daily diary of their headaches, severity and dates of menses.

## MENSTRUAL MIGRAINE RESEARCH:

The Jefferson Headache Center conducts many research studies examining menstrually-related migraines, including studies on the short-term prevention of these attacks. It is important that we continue to focus research efforts in this area in order to not only advance our knowledge, but also optimize the treatment of patients experiencing these disabling headaches. Our research projects typically involve investigational drug provided free of charge and compensation for participants.

**If you are interested in learning more about menstrual migraine research trials, please contact the Clinical Research Department at the number below.**

## CONTACT INFORMATION:



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