Migraine Tip of the Month

Effectiveness=Relief <u>plus</u> Tolerability

onstructing a management strategy for effective treatment of migraine inevitably requires an accurate diagnosis, an accurate assessment of the individual migraineur's headache burden and a concise but complete headache history that includes whatever therapies have been tried in the past.

Communicating with a healthcare provider can have a lot in common with a bad first date. Most readers will recognize this unfortunate phenomenon. You know, those better forgotten times when you wanted to make a good impression but found yourself blathering on about nothing as the smile on your companion's face across the table became ever more forced. A part of you wonders, Why don't you just shut up? And yet on you go.

Have you ever had the experience of showing up for a medical appointment confident that you could provide a clear history and then, in the moment, instead producing an incoherent stream of unlinked informational fragments? And then sat there wondering why in the world you said the things you did, nodding reflexively as you completely miss what the provider is saying and forget to ask the questions you'd prepared?

I certainly have, and I can assure you from personal experience that being a decent communicator as a physician does not necessarily extrapolate to communicating well when placed in the unfamiliar role of being a patient. Given my own experience as clinician and patient and acknowledging the critical importance of the patient's history in managing migraine, I routinely make use of a headache questionnaire which ensures I will learn at least the essentials of what I need to know. Further, to insure that the patient understands what has resulted from

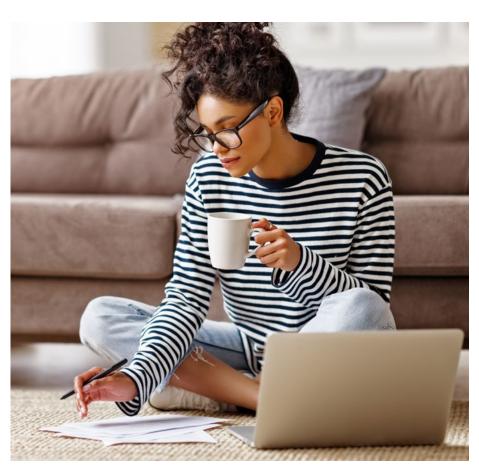
the clinic evaluation, I send each new migraine patient an email message which summarizes my clinical impression and the management strategy we developed together, along with relevant educational materials.

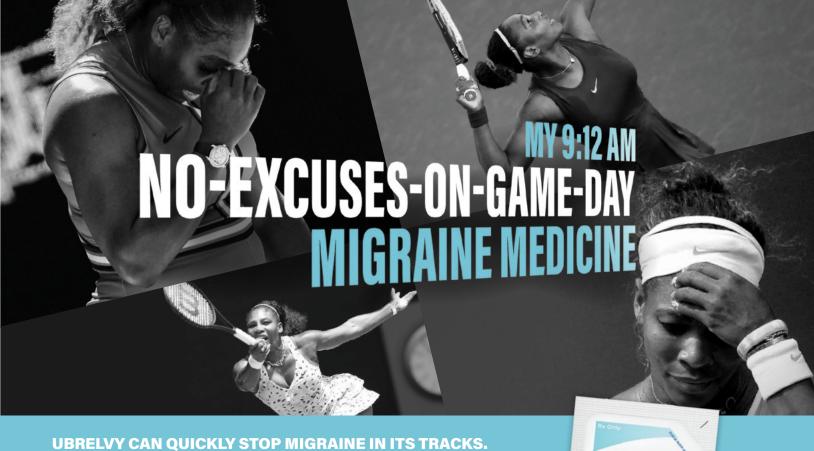
A headache questionnaire similar to what we use at the George Washington University Headache Center is available at this magazine's website. If you plan to seek medical attention for your headache disorder, download the questionnaire, answer the questions as accurately as you can and take a print version of the form with you to your appointment or, if the healthcare provider prefers, scan and email the questionnaire to him/her in advance of your appointment to be scanned into

your electronic medical record. Be assured it will increase the likelihood of that appointment resulting in an eventual reduction in your headache burden.

Also on the website is a sample of the clinical summary that I send to my migraine patients after their <u>initial</u> <u>evaluation</u>. While your healthcare provider may or may not do something similar, this represents the information you want to have solidly in your hand and head following your appointment.

Finally, take a look at the article entitled "Your First Visit to the Doctor" in the issue of this magazine. It will help prepare you for that visit and maximize the benefit you receive from making the effort.





When I took UBRELVY for the first time, I forgot I even had a migraine.
—Serena Williams

One dose of UBRELVY works fast. In clinical studies, many people had pain relief and some even had pain freedom within 2 hours. Unlike older medicines, UBRELVY directly blocks CGRP protein, which is believed to be a cause of migraine.

UBRELVY. The migraine medicine for anytime, anywhere migraine strikes, without worrying if it's too late to take it or where you happen to be.*

*People took UBRELVY within 4 hours of a migraine attack.



Eligible patients may pay as little as \$10 a month—
that's just \$1 per pill!†

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50 mg

ASK YOUR HEALTHCARE PROVIDER ABOUT UBRELVY.

What is UBRELVY® (ubrogepant)?

UBRELVY is a prescription medicine used for the acute treatment of migraine attacks with or without aura in adults. UBRELVY is not used to prevent migraine headaches.

IMPORTANT SAFETY INFORMATION

Who should not take UBRELVY (ubrogepant)?
Do not take UBRELVY if you are taking medicines known as strong CYP3A4 inhibitors, such as ketoconazole, clarithromycin, itraconazole.

What should I tell my healthcare provider before taking UBRELVY?

Tell your healthcare provider about all your medical conditions, including if you:

- Have liver problems
- Have kidney problems
- Are pregnant or plan to become pregnant
- Are breastfeeding or plan to breastfeed

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter

medicines, vitamins, and herbal supplements. Your healthcare provider can tell you if it is safe to take UBRELVY with other medicines.

What are the most common side effects of UBRELVY? The most common side effects are nausea (4%) and sleepiness (3%). These are not all of the possible side effects of UBRELVY.

You may report side effects to the FDA at 1-800-FDA-1088.

Please see full Patient Information on the following page.

†Patient out-of-pocket costs may vary. Terms and Conditions apply. This offer is only valid for commercially insured patients. Offer not valid for patients enrolled in Medicare, Medicaid, or other federal or state healthcare programs. Please see full Program Terms, Conditions, and Eligibility Criteria at UBRELVY.com.



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