For a patient who is starting to get more frequent headaches despite preventive treatment, consider:¹

1. Education, support, management of expectations, close follow-up
2. Lifestyle modifications, behavioural therapy (e.g., sleep, exercise, stress)
3. Pharmacologic therapy

Considerations for anti-CGRP therapy: When to use and when to stop

- Patients with EM or CM who failed ≥2 of the available medical treatments OR who cannot use other preventative treatments because of comorbidities, side effects, or poor compliance²

- After 3 months: Assess benefit of monthly therapy[^4][^3]
- After 6 months: Assess benefit of quarterly therapy[^4][^3]
- Continue treatment as long as patients are well controlled
- After 6-12 months: Consider stopping therapy²

[^1]: Using validated PRO parameters such as MIDAS, MPFID, or HIT-6.
[^2]: Courtesy of Patricia Pozo-Rosich, MD, PhD; oral communication; September 2019.

The information presented here is not meant to serve as a guideline for patient management. Any procedures, medications, or other courses of diagnosis or treatment included here should not be used by clinicians without evaluation of their patients' conditions and possible contraindications, review of any applicable manufacturer's product information, and comparison with recommendations of other authorities.

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