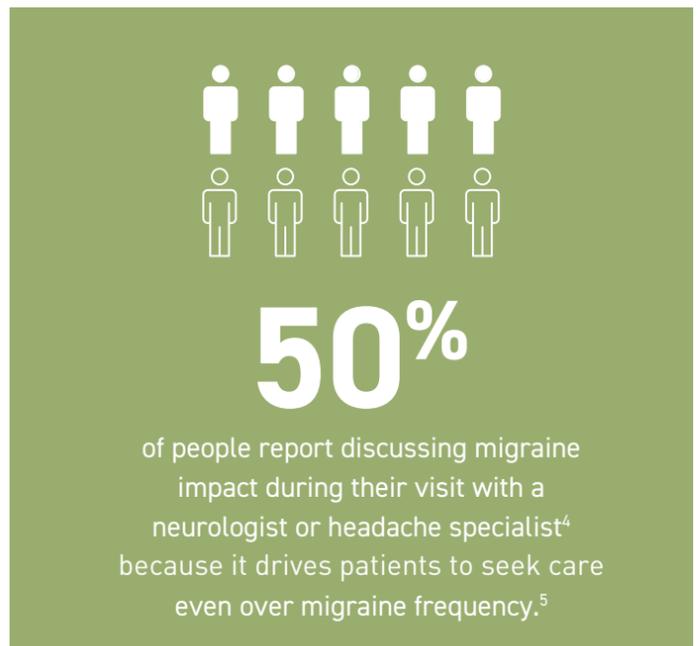
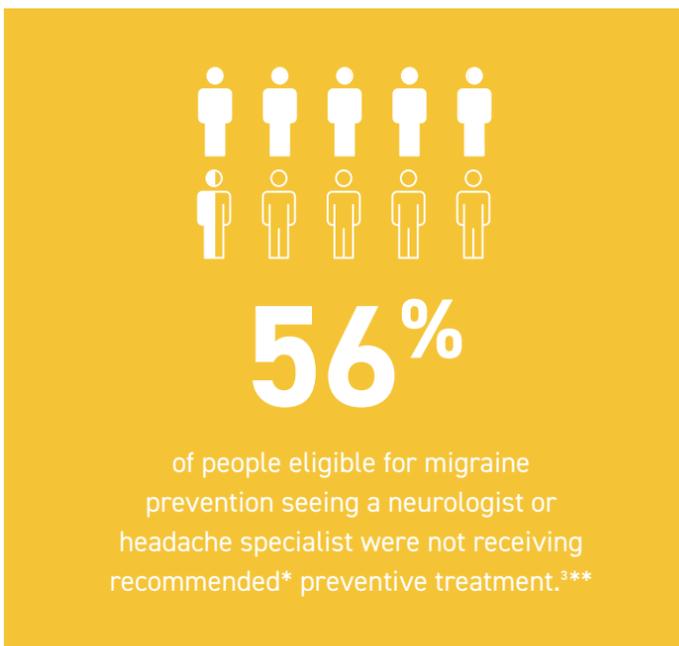


PREVENTIVE MIGRAINE TREATMENT: BENEFICIAL YET UNDERUTILIZED



Many patients who might benefit from treatment are not receiving them^{1,2}



*Recommended treatment refers to those with established/probable efficacy as identified by the American Academy of Neurology/American Headache Society guidelines and the 2021 AHS position statement regarding new migraine treatments.

**In the OVERCOME study, 17% of the total participants with migraine (n=61,935) sought care from neurologists or headache specialists.

Identifying Patients Eligible for Migraine Prevention

- Understanding the full impact of migraine, both during and between attacks, can help determine eligibility for preventive treatment.⁶
- The higher the number of headache days per month, the lower the degree of disability required for eligibility.⁶
 - » *Discuss prevention with your patient if migraine impact is 4 or more days per month.⁶*

2021 AHS Consensus Statement: Criteria for Identifying Patients for Preventive Treatment⁶

Prevention should be ...	Headache days/month	Degree of disability required ^a
Offered	6 or more	None
	4 or more	Some
	3 or more	Severe
Considered	4 or 5	None
	3	Some
	2	Severe

^a As can be measured by the Migraine Disability Assessment Scale, Migraine Physical Function Impact Diary, or Headache Impact Test.

Goals of Preventive Treatment



Maximize chance of alleviating symptoms and decreasing attack frequency⁶



Improve function and participation in daily activities⁶



Reduce acute medication overuse⁶



Prevent progression from episodic to chronic migraine^{6,7}

Lilly's Think Talk Treat Migraine® program can serve as foundation for HCPs to have meaningful conversations with patients to discuss treatment options.

For more information on Think Talk Treat Migraine

[Click Here](#)

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