



BÖLÜM 8

MİGRENDE PROFLAKTİK TEDAVİ

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GİRİŞ

Migren, günlük yaşam aktivitelerini engelleyici özelliği nedeni ile sık acil servise başvuru nedenleri arasında yer almaktadır. Bu nedenle migren hastalarında atak tedavisi yanında proflaktik tedavi de gerekebilmektedir ve hastaların yaklaşık %38' i fayda görmektedir ancak sadece %3-13'ü tedaviyi sürdürmektedir (1).

İLAÇ TEDAVİSİ

İlaç tedavisinden önce yaşam şekli değişikliği (düzenli uyku, beslenme, egzersiz ve gevşeme tekniklerinin kullanımı), tetikleyicileri belirleyip onlardan kaçınma konusunda her hasta bilgilendirilmelidir. Hastada proflaktik tedavi ihtiyacı belirlendikten sonra Tablo 1'deki algoritma izlenmelidir.

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ÖZEL DURUMLAR İÇİN PROFLAKSİ

Gebelik

Gebelik döneminde ilaç tedavisinden ziyade ilaç dışı tedaviler genellikle tercih edilmektedir (egzersiz, davranışçı terapi, periferik sinir blokajları vb.). İlaç tedavisi tercih ediliyorsa da mümkün olduğu kadar düşük dozda fetüse en az zarar verecek ilaç tercih edilmelidir (2). Propranololun intrauterin gelişme geriliğine yolaçtığı gösteren çalışmalar olmakla birlikte en güvenilir ilaçtır (56).

Emzirme

Emzirme döneminde yine ilaç dışı tedaviler tercih edilmekle birlikte amitriptilin, propranolol, verapamil kullanımının herhangi bir yan etkisi gösterilmemiştir (57). Periferik sinir blokajlarında lokal kullanılan bupivakainde bebekte yan etki gözlenmemiştir ancak steroidden kaçınılmalıdır (58).

Çocukluk

Çocukluk çağında migren proflaksisi için flunarazinin güvenilirliği kanıtlanmıştır. Bunun dışında propranolol, valproik asit, siproheptadin ve levetirasetam da reçete edilmekte ancak güvenilirliği kanıtlanmamıştır (59).

SONUÇ

Migrende, şiddetli ağrıların olması, sık ataklar halinde olması bireyi psikolojik olarak da etkileyip, günlük yaşama katılımını azaltmaktadır. Bu nedenle hastanın komorbid durumları da göz önünde bulundurularak uygun profilaktik tedavi seçimi bireyin yaşam kalitesini artırması açısından gereklidir.

KAYNAKLAR

1. Lipton RB, Bigal ME, Diamond M, et al. Migraine prevalence, disease burden, and the need for preventive therapy. *Neurology*. 2007;68(5).
2. Silberstein SD, Edlund W. Practice parameter: Evidence-based guidelines for migraine headache (an evidence-based review): Report of the Quality Standards Subcommittee of the American Academy of Neurology. Vol. 55, *Neurology*. 2000.
3. Silberstein SD, Holland S, Freitag F, et al. Evidence-based guideline update: Pharmacologic treatment for episodic migraine prevention in adults report of the quality standards subcommittee of the American academy of neurology and the american headache society. Vol. 78, *Neurology*. 2012.



4. Canadian Headache Society Guideline for Migraine Prophylaxis: Supplement 2. *Can J Neurol Sci / J Can des Sci Neurol*. 2012;39(S2).
5. The American Headache Society Position Statement On Integrating New Migraine Treatments Into Clinical Practice. *Headache*. 2019;59(1).
6. Sequeira V, van der Velden J. Historical perspective on heart function: the Frank–Starling Law. Vol. 7, *Biophysical Reviews*. 2015.
7. Solomon S, Diamond S, Mathew N, et al. American headache through the decades: 1950 to 2008. Vol. 48, *Headache*. 2008.
8. Erratum: Medications for migraine prophylaxis (American Family Physician (January 1, 2006) (72-77)). Vol. 74, *American Family Physician*. 2006.
9. Jackson JL, Cogbill E, Santana-Davila R, et al. A comparative effectiveness meta-analysis of drugs for the prophylaxis of migraine headache. *PLoS One*. 2015;10(7).
10. Loder E, Burch R, Rizzoli P. The 2012 AHS/AAN guidelines for prevention of episodic migraine: A summary and comparison with other recent clinical practice guidelines. *Headache*. 2012;52(6).
11. Pringsheim T, Davenport WJ, MacKie G, et al. Systematic review: Medications for migraine prophylaxis - Section II. *Can J Neurol Sci*. 2012;39(2).
12. Solomon GD, Steel JG, Spaccavento LJ. Verapamil Prophylaxis of Migraine: A Double-blind, Placebo-Controlled Study. *JAMA J Am Med Assoc*. 1983;250(18).
13. Markley HG, Cheronis JCD, Piepho RW. Verapamil in prophylactic therapy of migraine. *Neurology*. 1984;34(7).
14. Evers S, Áfra J, Frese A et al. EFNS guideline on the drug treatment of migraine - Revised report of an EFNS task force. Vol. 16, *European Journal of Neurology*. 2009.
15. Chronicle EP, Mulleners WM. Anticonvulsant drugs for migraine prophylaxis. Vol. 2016, *Cochrane Database of Systematic Reviews*. 2016.
16. Silberstein SD, Neto W, Schmitt J, et al. Topiramate in migraine prevention: Results of a large controlled trial. *Arch Neurol*. 2004;61(4).
17. Linde M, Mulleners WM, Chronicle EP, et al. Topiramate for the prophylaxis of episodic migraine in adults. Vol. 2013, *Cochrane Database of Systematic Reviews*. 2013.
18. MEDICATION OVERUSE HEADACHE AND OTHER CHRONIC DAILY HEADACHES. *Headache J Head Face Pain*. 2004;44(5).
19. Linde M, Mulleners WM, Chronicle EP, et al. Gabapentin or pregabalin for the prophylaxis of episodic migraine in adults. Vol. 2013, *Cochrane Database of Systematic Reviews*. 2013.
20. Roberts LW, Hales RE, Yudofsky SC. *The American Psychiatric Association Publishing Textbook of Psychiatry*. The American Psychiatric Association Publishing Textbook of Psychiatry. 2019.
21. Markley HG. CoEnzyme Q10 and riboflavin: the mitochondrial connection. Vol. 52 Suppl 2, *Headache*. 2012.
22. Robbins MS, Recober A. Pathophysiology of Migraine. Vol. 27, *CONTINUUM Lifelong Learning in Neurology*. 2021.
23. Sándor PS, Di Clemente L, Coppola G, et al. Efficacy of coenzyme Q10 in migraine prophylaxis: A randomized controlled trial. *Neurology*. 2005;64(4).
24. Breen C, Crowe A, Roelfsema HJ, et al. High-dose riboflavin for prophylaxis of migraine. *Can Fam Physician*. 2003;49.
25. Silberstein SD, Goldberg J. Menstrually related migraine: Breaking the cycle in your clinical practice. Vol. 52, *Journal of Reproductive Medicine for the Obstetrician and Gyneco-*



- logist. 2007.
26. Peres MFP, Zukerman E, Da Cunha Tanu et al. Melatonin, 3 mg, is effective for migraine prevention. *Neurology*. 2004;63(4).
 27. R.K. B, A.N. F. Update on botulinum toxin use in facial plastic and head and neck surgery. Vol. 12, *Current Opinion in Otolaryngology and Head and Neck Surgery*. 2004.
 28. D.W. D, A. M, A.H. E, R. D, M.F. B, S.D. S, et al. Botulinum toxin type A for the prophylaxis of chronic daily headache: Subgroup analysis of patients not receiving other prophylactic medications: A randomized double-blind, placebo-controlled study. *Headache*. 2005;45(4).
 29. Mathew NT, Frishberg BM, Gawel M, et al. Botulinum toxin type A (BOTOX®) for the prophylactic treatment of chronic daily headache: A randomized, double-blind, placebo-controlled trial. *Headache*. 2005;45(4).
 30. Herd CP, Tomlinson CL, Rick C, et al. Botulinum toxins for the prevention of migraine in adults. Vol. 2018, *Cochrane Database of Systematic Reviews*. 2018.
 31. Charles A, Pozo-Rosich P. Targeting calcitonin gene-related peptide: a new era in migraine therapy. Vol. 394, *The Lancet*. 2019.
 32. Benarroch EE. CGRP: Sensory neuropeptide with multiple neurologic implications. *Neurology*. 2011;77(3).
 33. Tepper S, Ashina M, Reuter U et al. Safety and efficacy of erenumab for preventive treatment of chronic migraine: a randomised, double-blind, placebo-controlled phase 2 trial. *Lancet Neurol*. 2017;16(6).
 34. Tepper SJ, Ashina M, Reuter U, et al. Long-term safety and efficacy of erenumab in patients with chronic migraine: Results from a 52-week, open-label extension study. *Cephalalgia*. 2020;40(6).
 35. Lipton RB, Tepper SJ, Reuter U et al. Erenumab in chronic migraine: Patient-reported outcomes in a randomized double-blind study. *Neurology*. 2019;92(19).
 36. Tepper SJ, Diener HC, Ashina M, et al. Erenumab in chronic migraine with medication overuse: Subgroup analysis of a randomized trial. *Neurology*. 2019;92(20).
 37. Ashina M, Tepper S, Brandes JL, et al. Efficacy and safety of erenumab (AMG334) in chronic migraine patients with prior preventive treatment failure: A subgroup analysis of a randomized, double-blind, placebo-controlled study. *Cephalalgia*. 2018;38(10).
 38. Detke HC, Goadsby PJ, Wang S, et al. Galcanezumab in chronic migraine: The randomized, double-blind, placebo-controlled REGAIN study. *Neurology*. 2018;91(24).
 39. Silberstein SD, Dodick DW, Bigal ME, et al. Fremanezumab for the Preventive Treatment of Chronic Migraine. *N Engl J Med*. 2017;377(22).
 40. Lipton RB, Goadsby PJ, Smith J, et al. Efficacy and safety of eptinezumab in patients with chronic migraine: PROMISE-2. *Neurology*. 2020;94(13).
 41. Goadsby PJ, Dodick DW, Ailani J, et al. Safety, tolerability, and efficacy of orally administered atogepant for the prevention of episodic migraine in adults: a double-blind, randomised phase 2b/3 trial. *Lancet Neurol*. 2020;19(9).
 42. Croop R, Lipton RB, Kudrow D, et al. Oral rimegepant for preventive treatment of migraine: a phase 2/3, randomised, double-blind, placebo-controlled trial. *Lancet*. 2021;397(10268).
 43. Ailani J, Lipton RB, Goadsby PJ, et al. Atogepant for the Preventive Treatment of Migraine. *N Engl J Med*. 2021;385(8).
 44. Molsberger A. The role of acupuncture in the treatment of migraine. Vol. 184, *CMAJ*. 2012.
 45. Li Y, Zheng H, Witt CM, et al. Acupuncture for migraine prophylaxis: A randomized cont-



- rolled trial. *CMAJ*. 2012;184(4).
46. Diener HC. Acupuncture for the treatment of headaches: More than sticking needles into humans? Vol. 28, *Cephalalgia*. 2008.
 47. Grossmann W, Schmidramsl H. An extract of *Petasites hybridus* is effective in the prophylaxis of migraine. *Altern Med Rev*. 2001;6(3).
 48. Vogler B, Pittler M, Ernst E. Feverfew as A Preventive Treatment for Migraine: A Systematic Review: <https://doi.org/10.1111/j.1468-2982.1998.1810704.x> [Internet]. 2016 Jun 26 [cited 2021 Dec 2]; Available from: <https://journals.sagepub.com/doi/abs/10.1111/j.1468-2982.1998.1810704.x>
 49. Zeynep H, Çağlayan B, Ataoğlu EE, et al. Nörolojide Geleneksel ve Tamamlayıcı Tıp Uygulamalarının Etkinliğinin Değerlendirilmesi. *jag.journalagent.com*. 2018;24.
 50. Starling AJ, Tepper SJ, Marmura MJ, et al. A multicenter, prospective, single arm, open label, observational study of sTMS for migraine prevention (ESPOUSE Study). *Cephalalgia*. 2018;38(6).
 51. Saper JR, Dodick DW, Silberstein SD, et al. Occipital nerve stimulation for the treatment of intractable chronic migraine headache: ONSTIM feasibility study. *Cephalalgia*. 2011;31(3).
 52. Schoenen J, Vandersmissen B, Jeanette S, et al. Migraine prevention with a supraorbital transcutaneous stimulator: A randomized controlled trial. *Neurology*. 2013;80(8).
 53. Silberstein SD, Calhoun AH, Lipton RB, et al. Chronic migraine headache prevention with noninvasive vagus nerve stimulation: The EVENT study. *Neurology*. 2016;87(5).
 54. Varkey E, Sa Cider A°, Carlsson J, et al. Exercise as migraine prophylaxis: A randomized study using relaxation and topiramate as controls.
 55. Grazi L, Andrasik F. Non-pharmacological approaches in migraine prophylaxis: behavioral medicine.
 56. Mehta N. Headaches in the pregnant patient. *R I Med J* (2013). 2015;98(2).
 57. American Academy of Pediatrics Committee on Drugs: The transfer of drugs and other chemicals into human milk. *Pediatrics*. 1994;93(1).
 58. Wells RE, Turner DP, Lee M, et al. Managing Migraine During Pregnancy and Lactation.
 59. Lewis D, Ashwal S, Hershey A, et al. Practice Parameter: Pharmacological treatment of migraine headache in children and adolescents: Report of the American Academy of Neurology Quality Standards Subcommittee and the Practice Committee of the Child Neurology Society. Vol. 63, *Neurology*. 2004.