



Controversies in Migraine Management

July 11, 2014

Voting Questions and Results

1. For the acute treatment of migraine with aura, is the evidence adequate to demonstrate that the net health benefits of transcranial magnetic stimulation (SpringTMS) are equivalent to or better than those of other standard acute treatment medications?
2 yes (18%), 9 no (82%)
2. For the prevention of episodic migraine, is the evidence adequate to demonstrate that the net health benefits of the Cefaly device are equivalent to or better than those of usual care with preventive medications?
1 yes (9%), 10 no (91%)
3. For patients who have inadequate relief with other preventive therapies for chronic migraine, is the evidence adequate to demonstrate that the net health benefits of Botox injections used on an every 12-week schedule are better than no treatment?
11 yes (100%)
 - a. *If yes, what is the comparative value of Botox injections vs. no treatment?*
7 low value (63%), 3 reasonable value (27%), 1 high value (9%).

Low value votes:
“Promising but inconclusive evidence of better outcomes and higher cost”: 5
“Better outcomes at too high a cost”: 2

Reasonable value votes:
“Better outcomes at reasonable higher cost”: 3

High value votes:
“Better outcomes at slightly higher cost”: 1
4. For patients who are considering multiple therapeutic options for chronic migraine, is the evidence adequate to demonstrate that the net health benefits of Botox injections used on an every 12-week schedule are equivalent to or better than those of other preventive therapies?
1 yes (9%), 10 no (91%)
5. For the acute treatment of migraine in the emergency department, is the evidence adequate to demonstrate that the net health benefits of parenteral opioids as first-line therapy are inferior to those of non-opioid alternatives?
9 yes (82%), 2 no (18%)