

***Medication overuse headache is a
severe chronic pain condition that is
preventable and treatable***

An International Experience

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Medication overuse headache

AN APPARENT PARADOX: THE CURE CAUSES THE DISEASE

Headache on ≥ 15 d/mo in patients using:

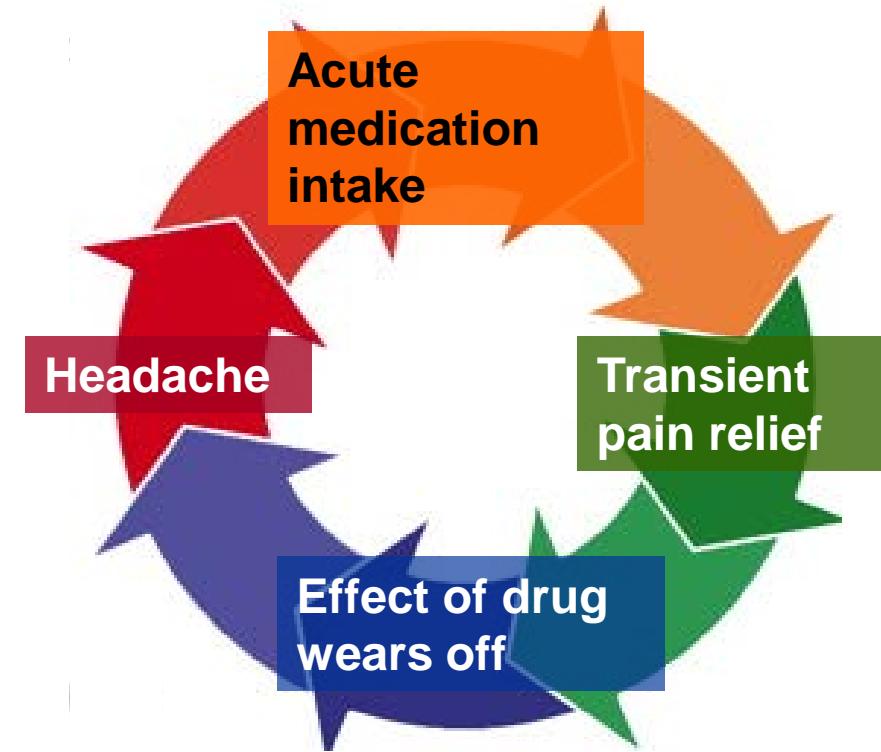
- triptans, ergots, combination analgesics, or opioid-containing medications on ≥ 10 days/month,

or

- acetaminophen or NSAIDs on ≥ 15 days/month



**Prevalence in the
general population: 1-2.5%**



- Pre-existing headache (migraine)
- Increased use of symptomatic drugs
- Phenotypical predisposition?
- Genetic predisposition

- Headache transformation
- Attenuation of the effects of symptomatic drugs

- **Chronic headache**
- **Excessive use of drugs**
- **Depression**
- **Poor quality of life**



Is Medication Overuse Headache preventable?



OH YES!

Educate: the patient

To:

- avoid overused drug(s)
- identify/avoid triggers
- different compensatory modalities

IDEnTIFY AND MANAGE RISK or AGGRAVATING FACTORS

Female sex



Obesity



Snoring

Sleep disorders

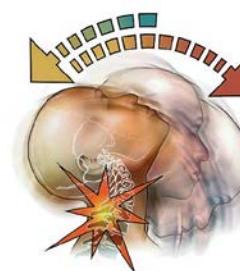
Excessive caffeine intake



Psychiatric disease

Lower socioeconomic status

Comorbid pain disorders



History of head or neck injury

Cutaneous allodynia

Major life changes



*Bigal et al., Neurology 2006
Louter et al., Brain 2013
Scher et al., Cephalgia 2008*

Treat properly

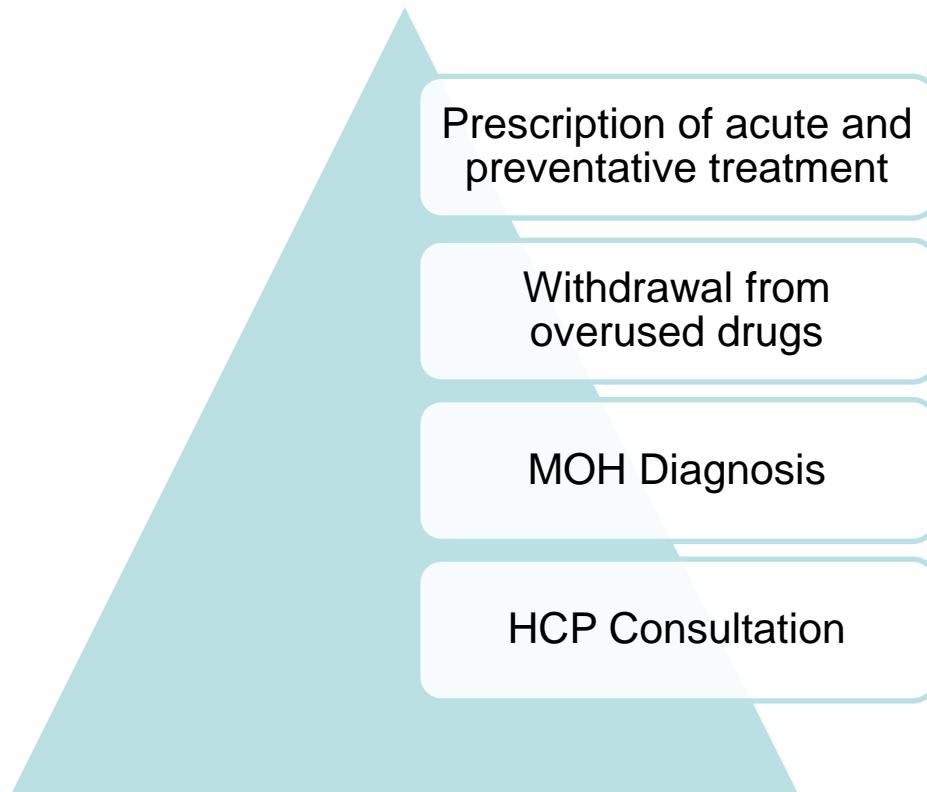
Optimize acute treatment on individual needs and headache characteristics

- Very aggressive primary headache
- Highly functional-type patient

- 
- Treat attacks early
 - Combine drugs, if required

Use preventative drugs!

The perfect world



The real world

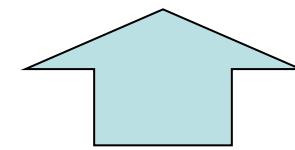
56 (4.5%)



126 (10.0%)



512 (40.8%)



1254 patients

Dodick et al., Headache 2016

Respondents
Classified as
CM, MIDAS
Grade ≥2, and
Health
Insurance
Data
N=1,254

Is Medication Overuse Headache treatable?



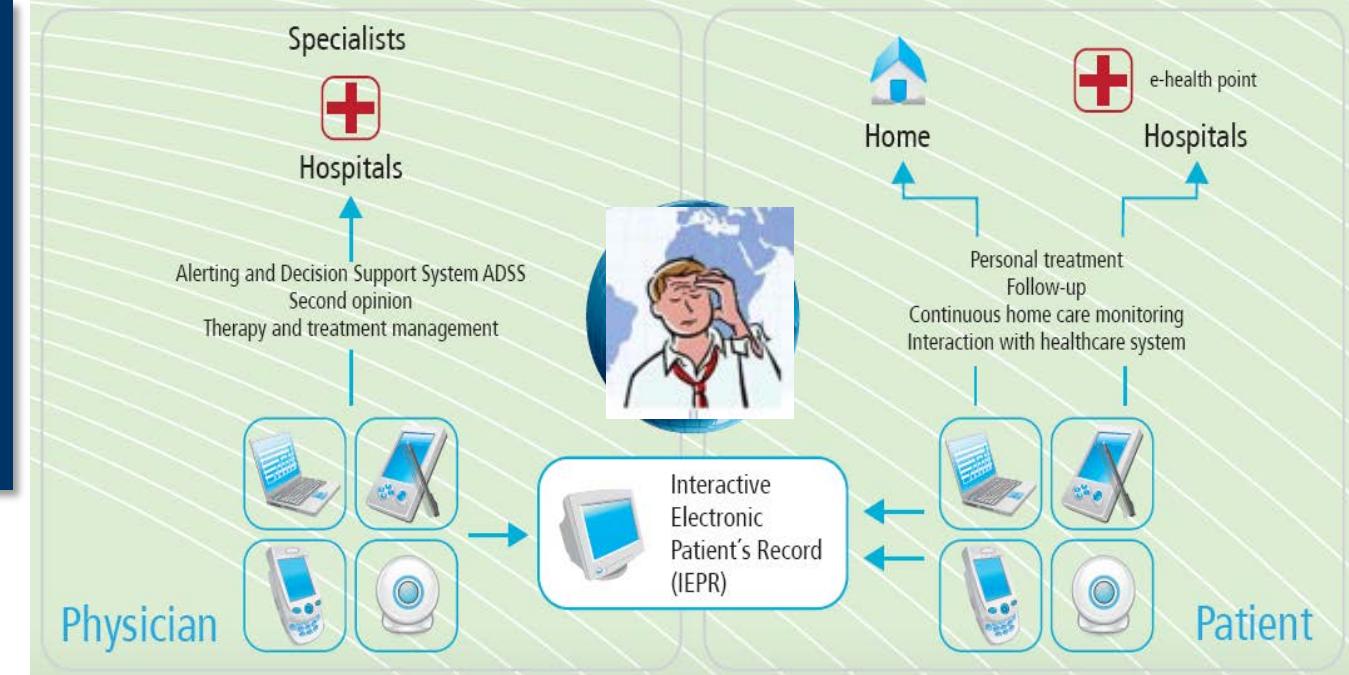
Success rate of treatment ranges from 50 to 70%

Yes, BUT...

**up to 40% of subjects relapse
into overuse**

The COMOESTAS experience

When monitoring is curing



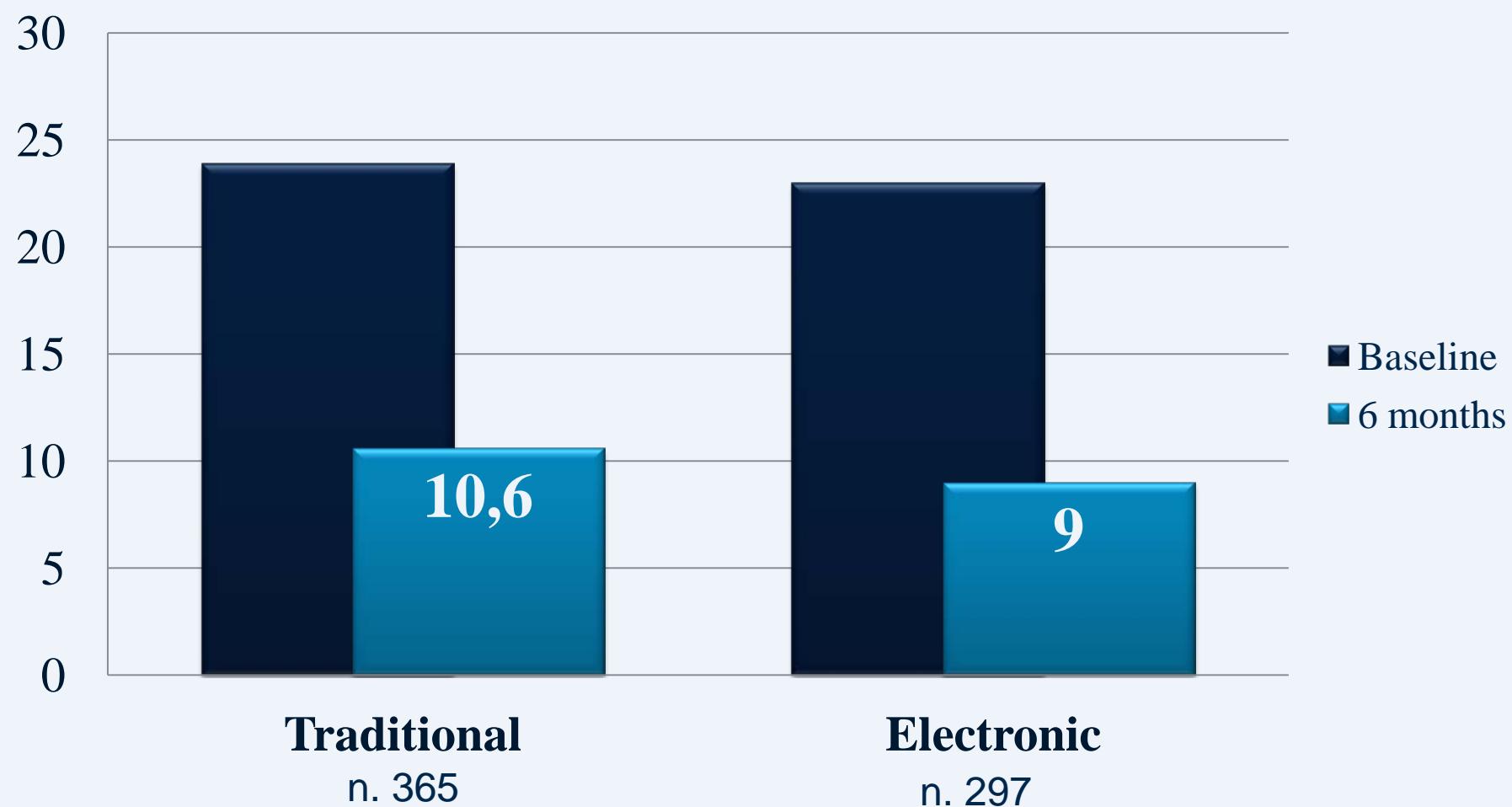
INTELLIGENT SYSTEM FOR FACILITATED COMMUNICATION AND FOLLOW-UP

- Electronic Diary
associated with
 - an Alerting and Decision Support System
 - a facilitated Communication System
(doctor-patients)
- Interactive electronic patient's record

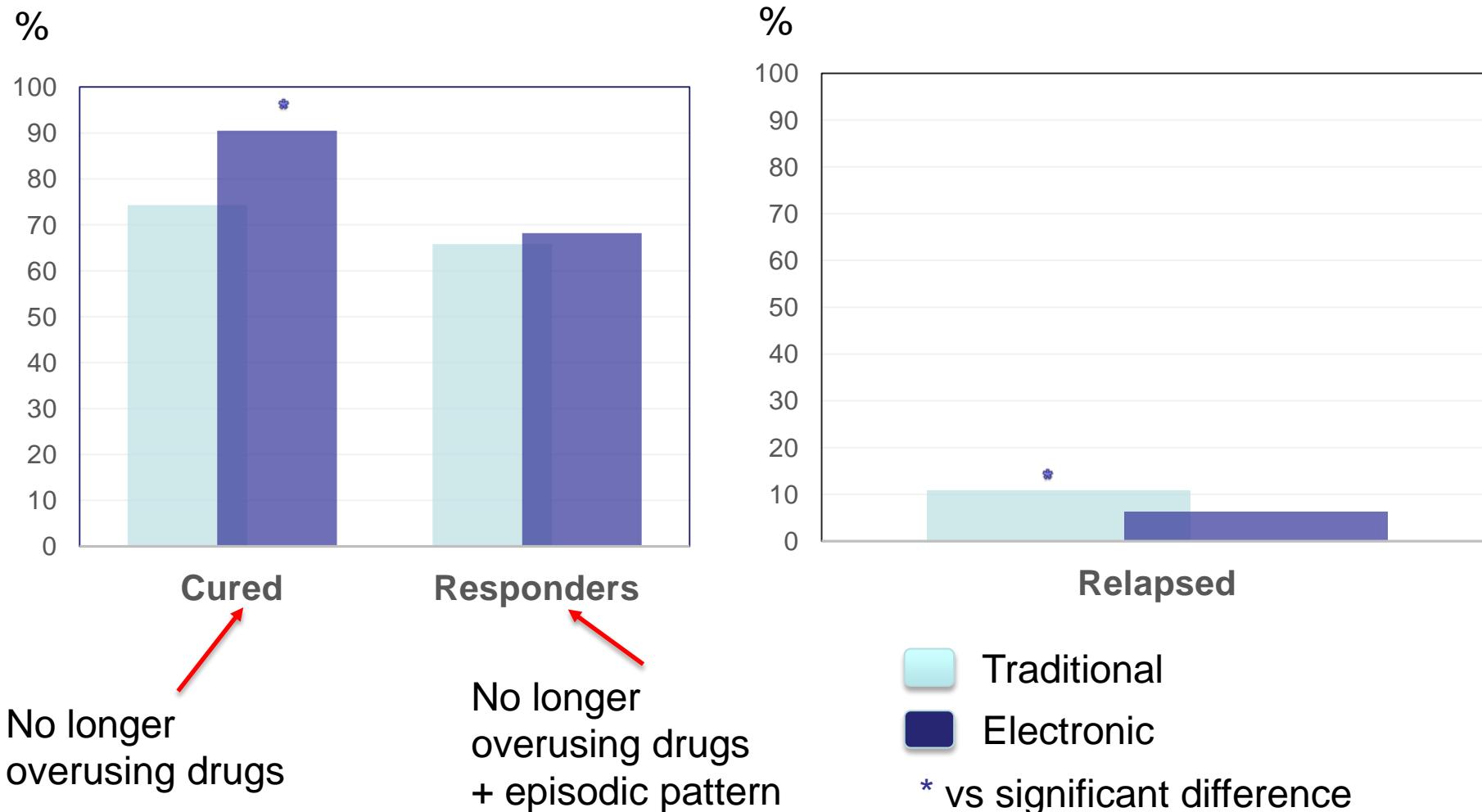


COMOESTAS PROJECT
2008-2010
VII FRAMEWORK PROGRAMME

Headache Frequency (days/month)

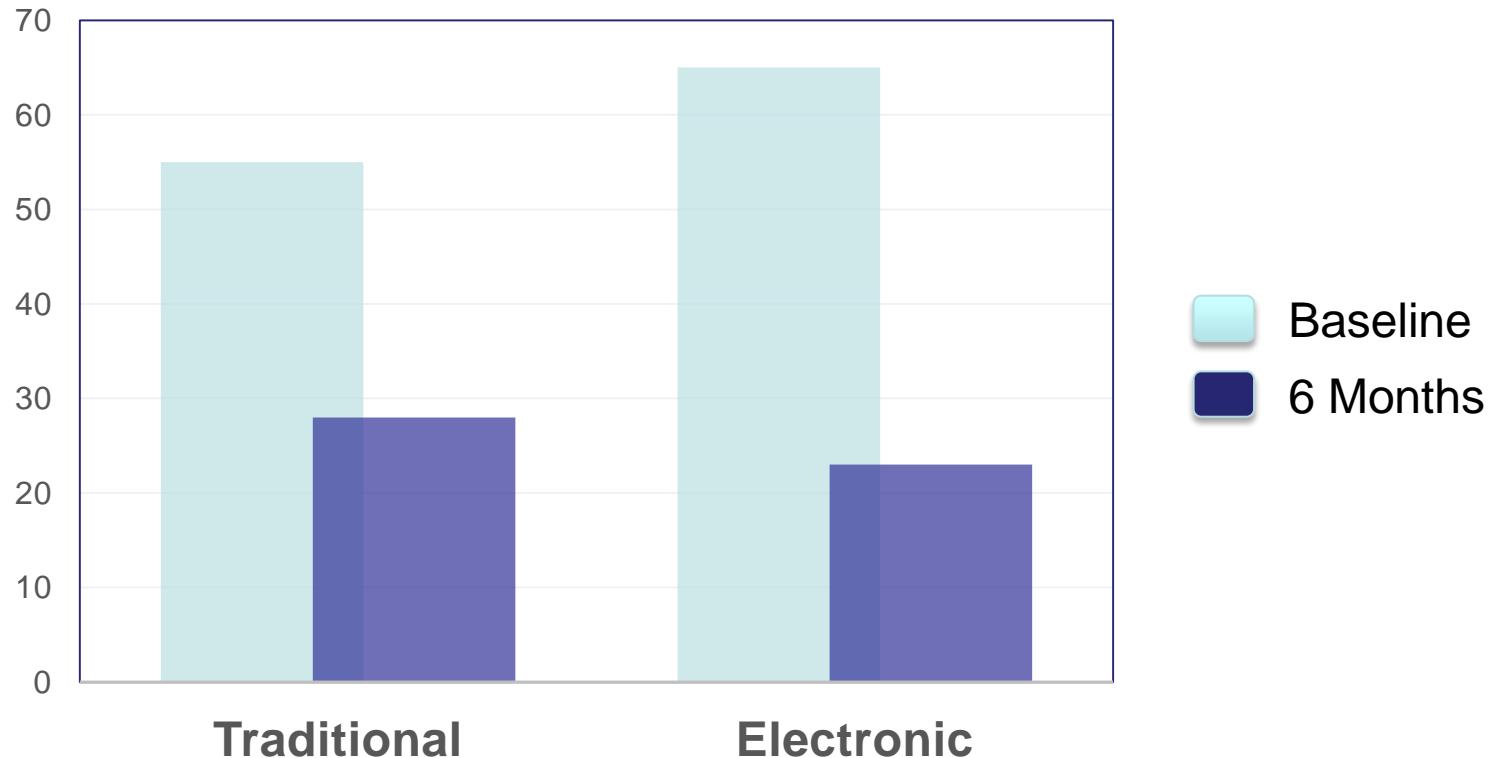


Cured, responders and relapsed

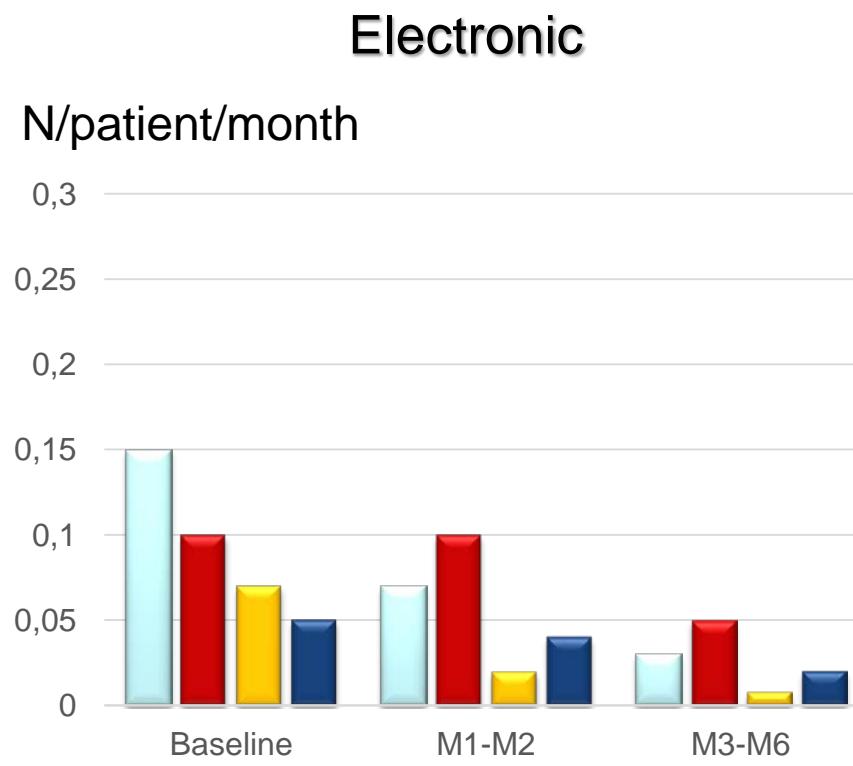
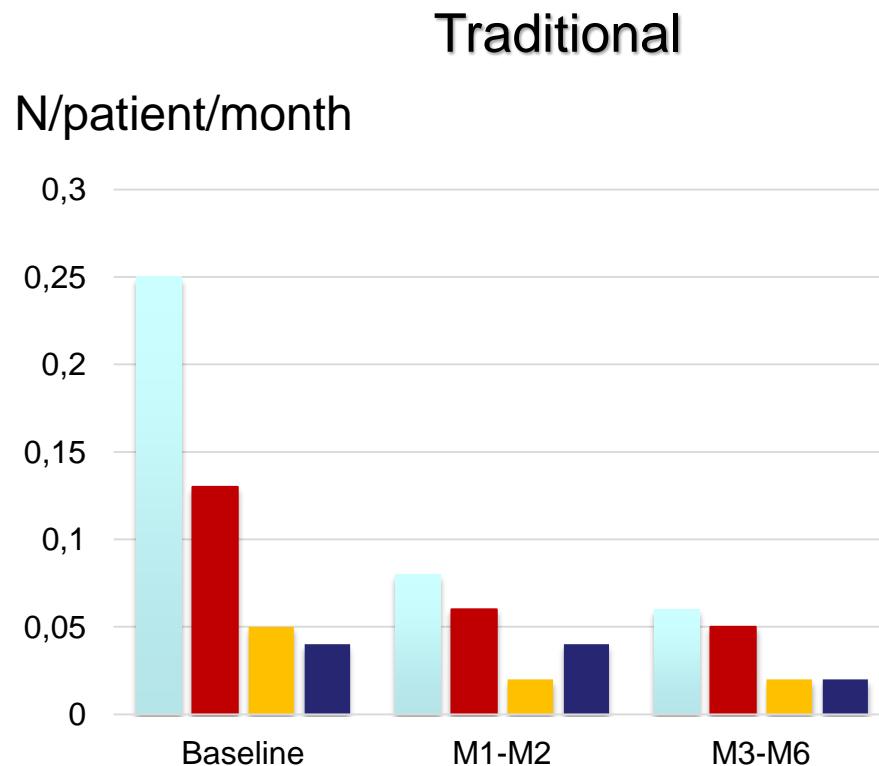


MIDAS - disability

Score



USE OF RESOURCES



- GP visits
- Specialist visits
- ER Accesses
- Instrumental evaluations



**Fondazione Istituto Neurologico
Casimiro Mondino, Pavia, ITALY
(coordinator, G. Nappi)**



**Universitaet Duisburg-Essen,
GERMANY (Z. Katsarava)**



**Danish Headache Center,
Copenhagen, DENMARK
(R. Jensen)**



**Fundación de la Comunidad
Valenciana, Hospital Clínico
Universitario De Valencia, SPAIN
(L.M. Lainez)**



PONTIFICIA UNIVERSIDAD CATÓLICA DE CHILE

**Pontificia Universidad Católica de Chile, Santiago, CHILE
(R. Fadic)**

**Fundacion para la Lucha contra las
Enfermedades Neurologicas de la
Infancia (FLENI), Buenos Aires,
ARGENTINA (J.A. Leston)**

Conclusions

- 
- Detoxification + prophylactic therapy + patient's monitoring resulted in an impressive rate of success with a striking reduction in headache frequency and in relapses.
 - The web-based diary and alarm system further improved the outcome of disease.
 - Good clinical practices are useful and transferable.

The added value of an electronic monitoring and alerting system in the management of medication-overuse headache: A controlled multicentre study

Cristina Tassorelli^{1,2}, Rigmor Jensen³, Marta Allena¹, Roberto De Icco^{1,2}, Zaza Katsarava⁴, Miguel Lainez⁵

Find et al. *The Journal of Headache and Pain* (2016) 17:20
DOI 10.1186/s10194-016-0612-2

 The Journal of Headache and Pain
a SpringerOpen Journal

RESEARCH ARTICLE

Open Access

Medication overuse headache in Europe and Latin America: general demographic and clinical characteristics, referral pathways and national distribution of painkillers in a descriptive, multinational, multicenter study

Ninett Louise Find^{1,2}, Rossana Terlizzi^{2,3}, Signe Bruun Munksgaard², Lars Bendtsen², Cristina Tassorelli⁴, Giuseppe Nappi⁴, Zaza Katsarava⁵, Miguel Lainez⁶, Maria Teresa Goicochea⁷, Beatriz Shand⁸, Ricardo Fadic⁸, Santiago Spadafora⁹, Marco Pagani¹⁰, Rigmor Jensen^{2*} and COMOESTAS Consortium

Original Article

A consensus protocol for the management of medication-overuse headache: Evaluation in a multicentric, multinational study

C Tassorelli^{1,2}, R Jensen³, M Allena¹, R De Icco^{1,2}, G Sances¹, Z Katsarava⁴, M Lainez⁵, JA Leston⁶, R Fadic⁷, S Spadafora⁸, M Pagani⁹, G Nappi¹ and the COMOESTAS Consortium¹⁰

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DOI: 10.1177/033102416660549
journals.sagepub.com/home/cep


Changes in anxiety and depression symptoms associated to the outcome of MOH: A post-hoc analysis of the Comoestas Project

Sara Bottiroli¹, Marta Allena¹, Grazia Sances¹, Roberto De Icco^{1,2}, Micol Avenali^{1,2}, Ricardo Fadic³,

Shand et al. *The Journal of Headache and Pain* (2015) 16:83
DOI 10.1186/s10194-015-0561-1

 The Journal of Headache and Pain
a SpringerOpen Journal

RESEARCH ARTICLE

Open Access

Clinical and Demographical Characteristics of Patients with Medication Overuse Headache in Argentina and Chile: Analysis of the Latin American Section of COMOESTAS Project



Beatriz
Giusep
J Headache Pain (2011) 12:91–96
DOI 10.1007/s10194-011-0298-4

ORIGINAL

What do the patients with medication overuse headache expect from treatment and what are the preferred sources of information?

S. B. Munksgaard · M. Allena · C. Tassorelli · P. Rossi · Z. Katsarava · L. Bendtsen · G. Nappi · R. Jensen · The Comoestas Consortium

Cephalgia
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DOI: 10.1177/033102417704415
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An argentinean patient wrote:

“Using this system is not just typing on a computer to fill in the electronic diary: I knew that my doctor was there, on the other end of the line, taking care of my headache.”

