Access to Care – Heading for a Solution

Irish MEP, Mairead McGuinness hosted this year’s event in the Members Salon. Announcing the “Access to Care” survey results she remarked how poorly managed the condition is even amongst those who have been properly diagnosed and their difficulty accessing appropriate treatment. She expressed her surprise and concern at the high incidence and prevalence of migraine and wondered about all those who continue to suffer in silence and isolation! Guests included Irish MEP’s Gay Mitchell, Sean Kelly, Pat the Cope Gallagher, Marian Harkin and Italian MEP, Lara Comi. Others in attendance included representatives from the European Brain Council and the European Commission together with some EHA Board members.

Audrey Craven, President EHA, spoke from the “Patient Perspective.” She outlined the work of EHA and highlighted other EMDA events to raise awareness across Europe. She went on to say that €27 billion is lost to the EU economy each year in terms of workdays lost and reduced productivity. She urged policy makers to use their influence to ensure this condition receives proper recognition and a FAIR share of resources. Education and awareness raising initiatives lead to better management and quality of life for all those affected. It is vital that all possible stakeholders collaborate – unity is strength!

Professor Cristina Tassorelli, Vice-President EHA, presented the results of the “Access to Care” survey in which she had played a leading role. Information was collected from both patient organisations and their members across Europe in order to obtain reliable and representative information on access to care for headache patients. “Heading for a solution – meeting the aims of the Rome Declaration.” The survey carried out in Finland, Germany, Ireland, Italy, The Netherlands, Serbia, Spain, Sweden and the UK indicated that overall the aims of the Rome Declaration may be met. The results showed that most responders were dissatisfied with their treatment, have insufficient explanation on how to use their medication and have difficulty accessing appropriate treatment.

In the recent 2009 International Headache Society congress held this September in Philadelphia, U.S., relevant data about the menstrual migraine management were presented. Within the different new data seen, a double-blind, cross-over, placebo controlled clinical trial can be highlighted because of its solid methodology and interesting results.

Allais et al, from Italy, presented an n=147 women trial where participants had to had regular menstrual cycles, being aged between 18 and 50 years and suffer from...
A triptan in menstrual migraine treatment.

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migraine attacks (without aura) occurring on days -2 to +3 of menstruation in at least two out of three menstrual cycles, with or without additionally attacks at other times of the cycles.

The cross-over nature of the trial improves the external validity of the trial, and could be applied to most of the studies in order to minimize the intra-subject variability.

Regarding the dimension of the burden of menstrual migraine, it is noteworthy to mention that half of the study attacks appeared in the first and second day of the menstrual period, that most of patients treated their pain when it was already moderate or severe and that 90% of the attacks had associated symptoms.

At 2 hours post-dose, Pain Free situation was achieved by twice as many ITT population patients treated with almotriptan compared to patients on placebo (48.4% vs. 26.2%, p=0.0008). Sustained Pain Free and migraine-related symptoms evolution was also statistically significant and clinically relevant in favour of the active treatment, which was well tolerated, with comparable to placebo adverse events incidence (n.s.).

An open active treated follow-up phase, closest then to the everyday conditions showed even higher two hour pain free rates (55-59% 2hPF) in the ¾ of the patients that went on with the study.
Cluster Headache Award (6th edition).

On Behalf of the University Centre for Adaptive Disorder and Headache (UCADH) and the Casimiro Mondino Foundation of Pavia, Italy, the Cluster Headache Award is given yearly to a research group which, following the tradition of the Headache Centre over the last three decades, has given a relevant contribution in the field of cluster headache. The prize is acknowledged on the basis of a peer reviewed manuscript published the previous year. The members of the Scientific committee are the following: G. Nappi (Chairman), K. Ekbom M. Fanciullacci, P.Goadsby, GC. Manzoni, NT. Mathew, M. Moskowitz, F. Antonaci (Secretary). The Scientific Committee has selected and scored 38 manuscripts on Cluster headache published in 2008. The winner of the 6nd Edition (year 2009) is the paper: “Reduced habituation of trigeminal reflexes in patients with episodic cluster headache during cluster period” Written by Perrotta A, Serrao M, Sandrini G, Bogdanova D, Tassorelli C, Bartolo M, Coppola G, Pierrelli F, Nappi G. and appeared in: Cephalalgia. 2008 Sep 28;(9): 950-9. The pathogenesis of cluster headache (CH) is still not completely understood, even though a growing body of evidence supports the pivotal role of the hypothalamus. On the basis of animal studies, it has been suggested that a hypothalamic dysfunction can lead to a habituation deficit of brainstem reflex responses, as result of a stress-like condition. During the interictal period a deficient habituation of the R2 component of the blink reflex has been clearly demonstrated in migraineurs. Taking into account these findings, we tested the hypothesis that habituation of brainstem reflexes may be impaired in CH patients and, in order to look for evidence of possible differential impairment of habituation mechanisms, we compared the results with those of an additional group of subjects affected by migraine without aura. The habituation phenomenon of the late components (R2 and R3) of the blink reflex was studied in 27 CH patients during the cluster period, in 22 migraine patients interictically and in 20 control subjects. A significant habituation deficit in the R2and R3 components was found in CH compared with both controls and migraineurs. The lack of habituation in CH, more pronounced than in migraine, points to abnormal processing of sensory stimuli at the trigeminal level that could be driven by hypothalamic dysfunction during the cluster period. The prize will be delivered to the authors during the award section at the forthcoming Italian Society for the Study of Headache (SISC) meeting in Bari (3rd October 2009). The author/s is requested to have a presentation of the major achievement of the paper in the field of cluster headache. MSD Italy has kindly sponsored the Award.

Fabio Antonaci (Pavia).
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Professor Antonaci, President of the European Headache Federation (EHF) gave a global overview of migraine and the Rome Declaration on Migraine 2005-2010.

In his presentation entitled “Migraine – the Forgotten Epidemic 4 years after the Rome Declaration” the targets set back in 2005:

- The percentage of migraine patients in the care of a physician should increase from the current level of 30% to 50%
- The number of patients receiving effective therapy for acute migraine attacks should increase from the current level of 40% to 70%
- At least 50% of patients requiring migraine prevention therapy should be receiving this treatment.

Professor Antonaci stressed the value of education saying EHF have a number of projects including headache schools, e-learning, etc. He went on to encourage good collaboration between patients and health professionals. This is important for all those who seek to promote recognition and reduce the burden of this under-diagnosed, under-managed condition.

Finally, in closing the event MEP, Mairead McGuinness said it was obvious from what she had seen and heard that some progress has been made but pointed out “A lot done – more to do!”

It’s abundantly clear from this and previous year’s EMDA events the importance of building a nucleus of champions for our within the institutions of the EP and EC.


The Editorial Office