FREQUENTLY ASKED QUESTIONS
Frequently Asked Questions

• Should mono- or polytherapy be used for acute treatment of migraine?
• Should mono- or polytherapy be used for the prevention of migraine?
• How do you select a specific treatment for specific patients?
• When should you add prevention?
• How long is it necessary to continue prophylactic treatment for migraine?
• What should you do when headache frequency is >2 days/week and patient is on preventative therapy?
• Which migraine medications can be used during pregnancy and lactation?
• What therapies – other than pharmacological therapies – are suitable for pregnant or lactating women with migraine?
• Which migraine medications are suitable for children with migraine?
• Is transcranial magnetic stimulation (TMS) suitable for migraine treatment?
Frequently Asked Questions

- What is your favorite triptan?
- What is your favorite preventive agent?
- Are triptans safe to use in patients with migraine with aura?
- How do you get patients out of medication overuse headache (MOH)?
- Should we use monotherapy or polytherapy in migraine treatment?
- How long should migraine prophylactic treatments be continued?
- How can a migraine status be aborted?
- How safe are oral contraceptives?
- When can nerve blocks be used in patients with migraine?
- Which migraine patients deserve imaging?
- Closure of patent foramen ovale in migraine with aura?