



Headache in the Spotlight

New treatments are bringing the field of headache medicine to center stage.

By Deena Kuruvilla, MD



This issue of *Practical Neurology* comes at an exciting time for headache medicine. The recent Food and Drug Administration (FDA) approval of 3 calcitonin gene-related peptide (CGRP) monoclonal antibody therapies has cast a spotlight on the field. Several millions and perhaps billions of dollars have been spent advertising these 3 medications—galcanezumab, fremanezumab, and erenumab—attracting more people with migraine to pursue medical care for the condition than ever before.

Other antibody and small-molecule CGRP antagonists are also in development, and new targets are being considered. Just as CGRP was targeted after it was shown that infusing CGRP in individuals with migraine induced attacks, similar studies are being conducted with pituitary adenylate cyclase-activating polypeptide (PACAP). This exciting target has been identified for the acute and preventive treatment of migraine and with a second migraine-specific therapeutic target, we are perhaps moving into a golden age of migraine therapy. We have more treatment options to offer individuals with migraine than ever before requiring thoughtful and informed care from neurologists, primary care physicians, pain physicians, and other specialists. Our goal for this issue is to provide assistance for accurately diagnosing and effectively treating migraine and cluster headache. Our hope is that this issue will give the reader a summary of important topics with a variety of treatment recommendations in these disabling headache disorders from key opinion leaders in the field.

We begin the issue with a focus on migraine diagnosis and pharmacologic treatments. The first article by Cynthia E. Armand, Alina Masters-Israilov, and Richard B. Lipton reviews migraine diagnosis, seeking to answer: *Migraine Mimics: Are We Underdiagnosing Migraine?* Next we have a review from Charisse Litchman and Sirisha Sanamandra on available *Migraine Preventive Therapies*. This is followed up by Aniket Natekar, Hsiangkuo Yuan, Malya Sahu, and Stephanie Nahas' overview of *Migraine Preventive Therapies in Development*.

Migraine Acute Treatments available and in development are then clearly summarized by Rashmi B. Halker Singh, Amaal J, Starling, and Juliana VanderPluym. Rounding out our coverage of migraine are articles on *Migraine in Children* by Lauren Strauss and Scott Otallah and *Migraine During Pregnancy* by Kate Onorato, Carrie Dougherty, and Jessica Ailani.

The next part of the issue focuses on nonpharmacologic treatments for headache, many taken without prescription. Research shows that people with headache disorders often incorporate nonprescription treatments with or without the help of their physician. Umer Najib and colleagues cover *Neuromodulation Therapies for Headache*, Regina Krel and Paul Mathew discuss *Procedural Treatments for Headache Disorders*, Mary Motwani and I provide an overview of *Behavioral and Integrative Therapies for Headache*, and Niushen Zhang covers the controversial topic of *Cannabis and Cannabinoid Therapies for Headache*.

We complete the issue with articles on *Cluster Headache Preventive Therapies* by Christopher Gottschalk and Emmanuelle Schindler and *Cluster Headache Acute Therapies* by Brian McGeeney.

We hope this issue starts new conversations between providers and patients regarding the many options we now have for headache abortion and prevention. Regardless of the complexity of your patient with headache, we are excited to provide you with a toolbox of various old, new, and upcoming treatments that will give your patients hope and progress toward creating a stigma-free era for people with headache worldwide. ■

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