CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Experts on Call: Pregnancy

Will Kingston, MD, FRCPC, FAHS
Assistant Professor, University of Toronto
Site Director – Adult Neurology
Sunnybrook Health Sciences Centre
Toronto, ON

Case: 42-year-old Female (Paula)

- Right-handed
- PMHx
  - Asthma
  - Anxiety
  - PTSD
  - Hypothyroidism
  - Recurrent miscarriage G5P0SA4
  - ?SLE- under investigation (lupus anticoagulant positive)

- Medications:
  - Sertraline 50mg
  - Rizatriptan 10mg *
  - Levothyroxine
  - Diclectin
  - ASA 160mg
  - Acetaminophen

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Paula: Presentation

- Presents at 20 weeks GA
  - Intermittent headache R>L throbbing, onset to peak 30 min, lasts all day
  - +Photo/Phonophobia
  - +Nausea
  - Worse with routine physical Activity
- Current Monthly Headache Frequency
  - Severe: 7 days
  - Moderate: 18 days
  - Mild: 5 days

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Paula: Headache History

- Long history of headache dating back to childhood
- In the last several years well managed on rizatriptan PRN and nutraceuticals.
  - Always treats headache early 95% effective with rizatriptan
  - Pre-pregnancy 5-7 monthly migraine days
- No red flags on current headache history
- Pregnancy
  - Thus far uncomplicated, not conceived with IVF but had undergone previous treatments.
  - 4 previous pregnancies – all losses, one in second trimester

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Paula: Second Opinion

- Presents as a second opinion for management of headache in pregnancy
- Currently using daily acetaminophen
- Has used rizatriptan 4 times in pregnancy and has felt extremely guilty
- No current prevention
- Worsening mood/anxiety which has occurred in conjunction with worsening headache
- Previous provider
  - Was told no acute treatment allowed “pregnancy is supposed to be hard”
  - Was told there were no options for her

- Examination: Normal

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Paula: Discussion

- What do we have to offer Paula?
- Does she need prevention and if so, what are our options?
- What about her acute treatment?

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Abortive Treatment

Safe (cat B)	May be Safe (Cat C)	Avoid Use	Contraindicated
Lidocaine	NSAIDs (trimester 2)	NSAIDs (trimester 3)	DHE
Acetaminophen	Triptans	ASA (trimester 2&3)	
Caffeine	Prochlorperazine		
Metoclopramide			

Preventive Treatments

Safe (cat B)	May be safe (cat C)	Avoid use	Contraindicated
Cyproheptadine	Propranolol	Valproic Acid	CGRP Mab (all)
Memantine	Metoprolol	Topiramate	
Lidocaine ONBs	Nadolol	Nortriptyline	
	Gabapentin	Candesartan	
	Amitriptyline		
	Onabotulinum toxin A		
	SSRI/SNRI (except paroxetine)		

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

Paula - Resolution

- Sumatriptan at early signs of mod/severe attacks
- Nerve blocks (lidocaine) monthly
- Profound improvement in QoL
- Requires some treatment throughout pregnancy
- Healthy mom and baby

CANADIAN HEADACHE CONFERENCE
COAST TO COAST

THANK YOU
QUESTIONS?