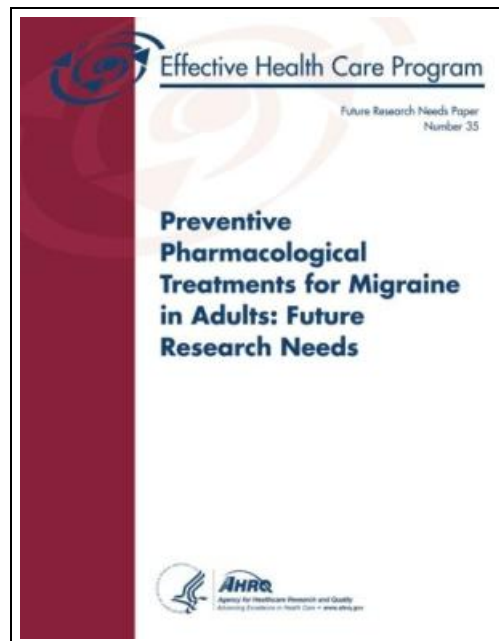


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Createspace. Paperback. Condition: New. This item is printed on demand. 62 pages. Dimensions: 11.0in. x 8.5in. x 0.1in. According to the International Classification of Headache Disorders (ICHD-2), migraine is a common disabling primary headache disorder manifesting in attacks lasting 4 to 72 hours. Migraine headaches range from moderate to very severe and are sometimes debilitating. Migraine affects 17 of women and 6 of men. The ICHD-2 divides migraine into migraine with aura and migraine without aura. The most common type of migraine, migraine without aura, is defined as a headache that occurs at least five times per month with headaches lasting between 4 and 72 hours (untreated or unsuccessfully treated), and having a minimum number of migraine attributes two of (a) unilateral location, (b) pulsating quality, (c) moderate or severe pain intensity, (d) aggravated by or causing avoidance of physical activity and one of (a) nausea and/or vomiting, (b) phonophobia or photophobia and cannot be attributed to another condition. When migraine without aura occurs on 15 or more days per month for at least 3 months and eight of the headaches meet migraine without aura criteria, without medication overuse, the complication of chronic migraine should be diagnosed. This Future Research Needs (FRN) project is a follow up to the Comparative Effectiveness Review (CER), Preventive Pharmacologic Treatments for Migraine. The review was motivated by uncertainty around the effectiveness, comparative effectiveness, and safety of pharmacologic treatments for the prevention of episodic or chronic migraine in adults. To identify research needs, this FRN project used a deliberative process to identify evidence gaps, translate gaps into researchable questions, and solicit stakeholder opinion on the importance of research questions. Addressing these research needs should provide information potentially of value to decisionmakers. The research questions addressed in the CER relied upon an analytic framework from the original...

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