Description of Acute and Chronic Prescribed Headache Therapy in Patients with an Emergency Department visits for Migraine. S Amaral, (PharmD., SSPPS), SJ Billups, and E Gilliam, Department of Clinical Pharmacy, University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences.

The aim of this study was to evaluate medication prescribing patterns in accordance with migraine treatment guidelines in patients admitted to the emergency department (ED) for migraine before, during, and after their ED visit to identify potential opportunities for education or therapeutic intervention. We conducted a retrospective cohort study to characterize prescribed medications before, during, and after an ED visit with a primary diagnosis for migraine. Prior to patients’ ED visit, the majority of them were not on any migraine specific abortive therapy (76%). In the ED, most patients received antiemetic therapy (73%). Corticosteroid use during the visits were low (13%), and opioids were seen to be used in 6% of all visits. After the ED visit it was seen that 68% of patients were not prescribed any migraine specific abortive therapy. Use of corticosteroids in the ED to prevent headache recurrence remains low, and opioids are still being offer to patients presenting to the ED despite recommendations. The addition of migraine specific medications following an ED visit was low indicating a possible point of intervention for the ED team to address.