

POSTER PRESENTATION

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Prevention of migraine by supraorbital transcutaneous neurostimulation using the Cefaly[®] device (PREMICE): a multi-centre, randomized, sham-controlled trial

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Introduction

Subjects who have frequent migraine attacks (≥ 2 / month) are in need of a preventive anti-migraine treatment. Available preventive drugs have incomplete efficacy and/or unpleasant side effects.

Purpose

Supraorbital transcutaneous neurostimulation (STNS) has shown encouraging results for migraine prevention in pilot studies and has no side effects [1-3]. We assessed efficacy and safety of STNS in migraine prophylaxis with the Cefaly[®] device in a multicentre, double-blind, randomized, sham-controlled trial.

Methods

Five Belgian tertiary headache clinics participated to the study. After a 1-month run-in, patients with ≥ 2 migraine attacks/month were randomized to verum or sham stimulation, and applied the Cefaly[®] device daily for 20 minutes during 3 months. Primary outcome measures were change in monthly migraine days and 50% responder rate, i.e. the percentage of subjects having a $\geq 50\%$ reduction of monthly migraine days. Patients and enrolling neurologists were blinded from the randomization.

Results

Sixty-seven patients were randomized and included in the intention-to-treat analysis. Between run-in and 3rd month of treatment the mean number of migraine days decreased significantly in the verum (4.88 vs 6.94; $p=0.023$), but not

in the sham group (6.22 vs 6.54; $p=0.608$). The 50% responder rate was significantly greater ($p=0.023$) in the verum (38.1%) than in the sham group (12.1 %). Monthly migraine attacks ($p=0.044$), monthly headache days ($p=0.041$) and monthly acute anti-migraine drug intake ($p=0.007$) were also significantly reduced in the verum but not in the sham group. There were no adverse events in either group.

Conclusions

STNS with the Cefaly[®] device is effective as a preventive therapy for migraine. The therapeutic gain (26%) is within the range of those reported for other preventive drug and non-drug anti-migraine treatments [4,5], and the safety profile is excellent.

Conflicts of interest

LH: Allergan. JS: ATI Redwood California, St Jude Medical USA, Allergan USA, ATI USA, Medtronic USA and Cyberonics USA.

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References

1. Reed KL, Black SB, Banta CJ 2nd, Will KR: Combined occipital and supraorbital neurostimulation for the treatment of chronic migraine headaches: initial experience. *Cephalalgia* 2010, **30**(3):260-271.
2. Solomon S, Guglielmo KM: Treatment of headache by transcutaneous electrical stimulation. *Headache* 1985, **25**(1):12-15.
3. Gérardy PY, Fabry D, Fumal A, Schoenen J: A pilot study on supra-orbital surface electrotherapy in migraine. *Cephalalgia* 2009, **29**:134.
4. Mulleners WM, Chronicle EP: Anticonvulsants in migraine prophylaxis: a Cochrane review. *Cephalalgia* 2008, **28**(6):585-597.

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5. Linde K, Rossmagel K: **Propranolol for migraine prophylaxis**. *Cochrane database of systematic reviews (Online)* 2004, **2**: CD003225.

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