

New study shows common blood pressure meds underused for migraine

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The first known large-scale review of international studies on the positive effect of blood pressure (BP) medicines across all classes in preventing migraine shows these common drugs could be used much



more widely, at low cost, than is the case with current practice, according to a new paper published in the journal *Cephalalgia*.

Conducted by researchers at The George Institute for Global Health in Sydney, Australia, the study confirms almost all classes of antihypertensive medications have some ability to reduce the frequency of days with headache in people with migraine and that more research is therefore warranted to better understand the mechanisms involved.

The <u>meta-analysis</u> included 50 trials of more than 4,300 people, with BP-lowering <u>medication</u> on average reducing the number of headache days experienced per month by about one day on top of the average placebo effect.

"For countries where new migraine medications are expensive, limited by prescribing criteria or not available at all—covering all countries to some extent—this study shows that common BP medicines, which GPs are comfortable prescribing, can be an important preventative measure for patients with migraine or severe headache episodes," said the study's Joint Principal Investigator, Dr. Cheryl Carcel, Senior Research Fellow at The George Institute and Conjoint Senior Lecturer, Faculty of Medicine, UNSW Sydney.

"Moreover, while we can see from the analysis that the effect is true for almost all types of BP medicines, this is not reflected in the current clinical guidelines, which specify just one or two types (such as beta-blockers) but not the full range of therapies that could be useful," she said.

Global migraine prevalence is estimated at 14 to 15% of the population, representing a major cause of ill health for up to 1 billion people. Migraine is the world's second leading cause of disability overall and the <u>first among women</u>.



"Around 90% of people with migraine can be managed in general practice, where the goal is to prevent as many episodes as possible because of the disabling impact they have on the patient's quality of life," commented Joint Principal Investigator and former GP, Dr. Faraidoon Haghdoost. "The good news is that blood pressure medications are widely available at low cost, with many available in generic forms, presenting a trusted treatment option alongside other preventive measures such as avoiding triggers and making lifestyle changes."

The results also indicated that not all BP medications are equally effective in preventing <u>migraine</u>. The George Institute team is soon to publish a further review to give more insight into which of the various mechanisms are best.

"The numbers of people living with headache disorders is enormous and common treatments given once an episode has taken hold can have side effects that in themselves present problems, such as drowsiness or weight gain," continued Dr. Haghdoost. "Whereas BP meds can prevent episodes without a significant side effect burden."

More information: Cheryl Carcel et al, The effect of blood pressure lowering medications on the prevention of episodic migraine: A systematic review and meta-analysis, *Cephalalgia* (2023). DOI: 10.1177/03331024231183166

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