

What Is Medication Overuse Headache?

Medication overuse headache is a [secondary headache disorder](#), commonly occurring in people with migraine, cluster or tension-type headache.

People with medication overuse headache experience more than 15 headache days per month for at least three months, and the headaches have developed or worsened with medication overuse.

When you start taking more medication to relieve increasing headaches, the medication itself can actually worsen headache frequency and intensity. According to current research, frequent pain medication use can lower your threshold for pain and affect brain pathways that process pain.

How much is too much?

What constitutes overuse depends on the type of medication you're taking and how often you're using it. Only abortive medications, which are taken to stop an acute headache, are believed to be responsible for medication overuse headache.

Over-the-counter pain relievers like aspirin, acetaminophen and NSAIDs can cause overuse headache when they're used 15 or more days per month. Overuse of prescription medications, opioids and combination pain relievers (e.g., over-the-counter acetaminophen/

aspirin/caffeine) happens when using them 10 or more days per month.

If you're experiencing more headaches and need medication more than two days per week, it may be an indication of [medication overuse headache](#).

Start a Headache Diary

To help identify whether your headaches are caused by medication overuse, you can track them with a headache diary. This record will give you a fuller picture of how often you're having headaches, how often you're using medication and how effective it is.

What To Track in Your Headache Diary

- Your headache days
- The severity of your pain
- Medications you took
- The dosage and time you used them
- The medication's effect on your symptoms

What Constitutes Overuse? Thresholds by Medication:

Category	Common Medications	What Constitutes Overuse?
Simple Analgesics	Over-the-counter anti-inflammatory pain relievers including aspirin, acetaminophen, and NSAIDs like ibuprofen, naproxen, indomethacin	15 or more days per month
Combination Pain Relievers	Over-the-counter pain relievers that contain a combination of caffeine, aspirin and acetaminophen or butalbital (Excedrin Migraine, Midol)	10 or more days per month
Prescription Migraine Medications	Prescription medications that block pain transmission, like triptans and ergotamines	10 or more days per month
Opioids	Prescription-strength pain relievers like oxycodone, tramadol, butorphanol, morphine, codeine, and hydrocodone	10 or more days per month

Remember: It Is Not Your Fault

It's important to follow your migraine treatment plan. When used appropriately, medication can drastically improve the quality of life for people with migraine.

Your pain is real, and it's valid to want those debilitating, life-disrupting symptoms to go away. If you find yourself in a situation of medication overuse, it's not your fault.

Medication overuse headache may be an indication that your migraine is not fully managed.

Medication overuse headache is common, affecting [1% to 2% of the general population](#). About half of people diagnosed with chronic migraine significantly improve after weaning off an overused medication. This suggests that many of the frequent headaches people with chronic migraine experience may actually be medication overuse headaches.

Ways to Wean off Medications

Weaning off medication not only involves taking your medication less often or stopping it completely—it may also require managing your symptoms in a different way, such as bringing a greater focus to prevention or incorporating non-medication treatments.

- Under your doctor's direction, decrease and stop taking the medication that is causing medication overuse headache. It may take 2 to 6 months to stop the headache cycle. While your headaches may worsen initially, they will eventually get better.
- Discuss with your doctor whether you're a good candidate for starting or adding a preventive medication. Taken daily, these medications reduce the occurrence of headache and have not been linked to causing medication overuse headache.
- Your doctor may recommend a short course of long-acting non-steroidal anti-inflammatory medication (like naproxen or nabumetone) to ease the transition off your other medication.
- Alternative therapies, such as transcranial magnetic stimulation and behavioral treatments such as cognitive behavioral therapy or biofeedback, can also help during the weaning period.

- Identify your triggers—or what you believe triggers your primary headache disorder—and work to reduce or avoid them. Common environmental triggers can include bright lights, loud noise, strong scents and certain foods.
- Make [lifestyle changes](#) to prevent or reduce your migraine symptoms. Make it a priority to get enough sleep, stay hydrated, eat regular meals and exercise.
- Reduce or slowly eliminate (i.e., wean off) your [caffeine](#) intake. While caffeine helps some people manage migraine, drinking more than 200 mg of caffeine a day (about two large cups of coffee) can exacerbate medication overuse headache.
- Stress is another common trigger for migraine, so managing stress is important. Non-medical treatments such as acupuncture, massage, meditation and other relaxation techniques can help relieve stress and be very effective for migraine management.

How to Have a Conversation With Your Doctor

Your doctor is on your side and wants to help you feel your best. If you suspect that you're experiencing medication overuse headache, bring it up to your doctor. Tell them how many headache days you're experiencing, the frequency and severity of your symptoms and how often you're taking medications. (This is where that headache diary comes in handy!)

Your doctor can evaluate why your headaches are increasing, provide a diagnosis and suggest changes to your migraine treatment plan to eliminate medication overuse headache—such as trying a new preventive strategy or switching your medication.

Because it's individual to each person, migraine can take time to figure out and manage effectively. With a combination of preventive and acute treatments, as well as an open, ongoing dialogue with your doctor, you will find what works best for you.

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The mission of the American Migraine Foundation is to mobilize a community for patient support and advocacy, as well as drive and support impactful research that translates into advances for patients with migraine and other disabling diseases that cause severe head pain. Visit americanmigraine.org for more resources for people living with migraine and their supporters.

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