

SURVEY REPORT

Migraine in the ER & Urgent Care



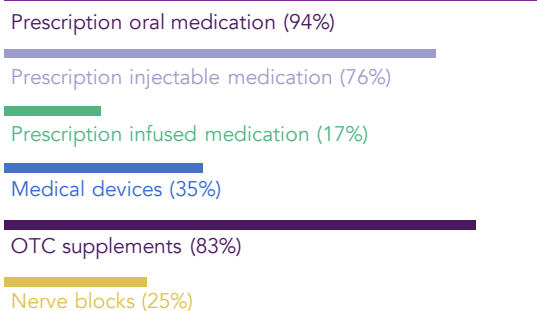
Migraine Meanderings and the Headache and Migraine Policy Forum recently conducted an online survey to better understand the experience people with migraine have in the emergency room and urgent care. Five-hundred responses were gathered via social media and email.

THE RESULTS



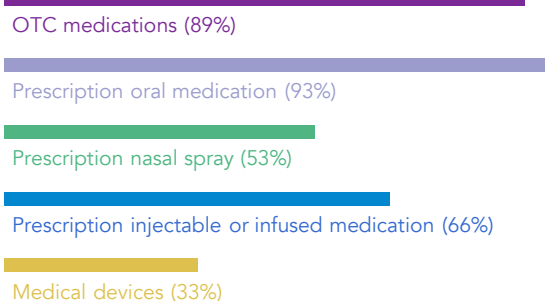
PREVENTIVE TREATMENTS

About **99% of respondents** use treatment options to **prevent migraine attacks.**



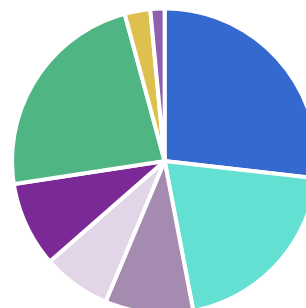
ABORTIVE TREATMENTS

About **99% of respondents** use treatment options to **stop an existing attack.**



SEEKING TREATMENT AT THE EMERGENCY ROOM OR URGENT CARE

Respondents report the following symptoms led them to seek treatment at the ER and/or urgent care:



- Pain (89%)
- Nausea, vomiting or dehydration (67%)
- Aura or other visual disturbances or changes (31%)
- Aphasia (speech disturbance) (24%)
- Stroke-like symptoms (30%)
- Status migrainosus (77%)
- Dizziness/vertigo (9%)
- Other symptoms (5%)

Since being diagnosed with migraine, respondents estimate going to the ER or urgent care:

- More than 10 times (44%)
- 6-10 times (20%)
- 1-5 times (36%)

In the PAST YEAR, respondents have gone to the ER or urgent care:

- 1-5 times (52%)
- More than 5 times (7%)
- 0 times (41%)

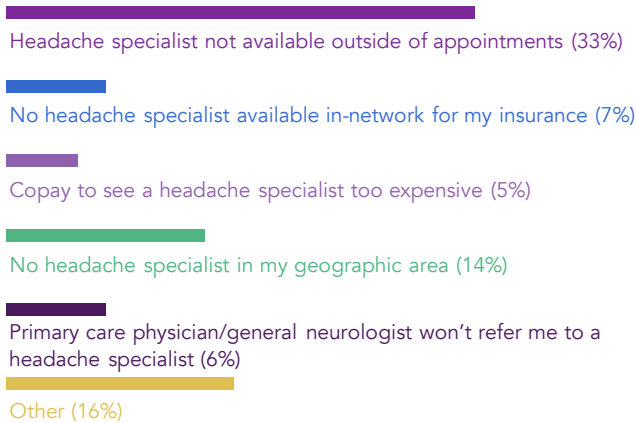
“Being a frequent flyer to the ER, they now know me well. Decades ago I was discriminated against for having migraine disease. Called a drug seeker. But through advocacy for myself and others I’m fortunate enough to get the treatment needed and with empathy.”

—Survey Respondent



BARRIERS TO TREATMENT

88% of respondents went to the ER or an urgent care facility due to lack of access to a healthcare professional who could treat their migraine. They report the following issues prevent them from seeing a headache specialist who could more effectively treat their migraine:



28% of respondents sought treatment at the ER or urgent care due to issues getting abortive or rescue medications that their healthcare professional prescribed for them. **They reported the following barriers:**

- Insurance coverage/denials (19%)
- High out-of-pocket costs or copays (13%)
- Insurance required step-therapy that didn't work (9%)
- Pharmacy didn't have prescribed medication in stock/available (7%)
- Pharmacy didn't want to fill a prescribed medication (3%)
- Other reasons included: doctor won't prescribe any medications, medications don't work, already took the max number of doses, doctors office slow to refill prescriptions



QUALITY OF TREATMENT AT THE ER OR URGENT CARE

KEY FINDINGS

- **52% of respondents** found the healthcare providers at the ER or urgent care to be **knowledgeable about migraine**.
- **63% of respondents** believed that the ER or urgent care **trusted their description of symptoms**.
- **44% of respondents** reported that the ER or urgent care **implied that they were there seeking drugs** and not due to severe migraine symptoms.
- **29% of respondents** said the treatment they received at the ER or urgent care **did stop their migraine attack**: **37%** said it stopped their attack but **their symptoms returned less than 24 hours later**; and **27%** said the treatment **did not relieve their symptoms**.
- **27%** said the ER or urgent care **prescribed an opioid** for pain management.



SURVEY DEMOGRAPHICS

FREQUENCY	AGE	HEALTH INSURANCE TYPE
On average, respondents report having migraine:	3% 18-25	63% Commercial insurance
32% 1-14 days/month	29% 26-40	36% Medicare/Medicaid
68% 15-30 days/month	49% 41-55	2% No insurance
	13% 56-64	8% Other
	6% 65+	



PATIENT VOICES

Respondents had the following to say about their experience going to the emergency room or urgent care for migraine

"I refuse to go any more due to being treated like a drug seeker."

"The ER staff does not seem to comprehend, or perhaps believe, the severity of pain some migraines can cause patients. They leave you sitting under fluorescent lights—a migraine trigger—for many hours!"

"The treatment for migraine in ER/UC is complicated by our overstressed medical system and the fact that there are some who seek inappropriate treatment without adequate follow up."

"The ER should be a last resort. It is a miserable, uncomfortable place where you roll the dice as to how you are treated and whether you will receive pain relief."

"While my symptoms might have been taken seriously or believed, I never felt comfortable in the ER and always felt like I was a bother being there. I don't seek treatment even when advised to go to the ER by my headache specialist because I feel like there is a stigma. I work in healthcare and I know chronic pain isn't always taken seriously, especially in the ER, so I just choose to suffer at home now."

"Migraine cocktail does the trick, but knocks me out. Not good when you are the [caregiver for] a baby. Need better prevention, and even better, to find to cause of migraines."

"Many times ER staff are not educated on migraines enough to know that they all don't present the same way."

"I felt like I was shamed and not listened to by the urgent care doctor."

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