Women's Headache Health Through Life Stages

A Policy Discussion

HEADACHE ON THE HILL

The Headache & Migraine Policy Forum

AHDA ALLIANCE FOR HEADACHE DISORDERS ADVOCACY

Introduction

Migraine is three times more common in women than men, affecting one in four women at some point in life.

While migraine and headache disorders disproportionately affect women during their childbearing and working years, they may experience migraine disease or another headache disorder throughout their lives.

How a woman experiences migraine and how it is managed can change between adolescence, menstrual cycles, pregnancy, postpartum and breastfeeding, as well as perimenopause and menopause. For example, as a woman ages, her cardiovascular risk increases, which can change her treatment options. It is critical that women have access to all treatment options throughout each stage of life.

That's why The Headache & Migraine Policy Forum and Alliance for Headache Disorders Advocacy hosted "Women's Headache Health Through Life Stages," a discussion on how federal policy can support optimal migraine management in all life stages. The event was held in conjunction with the Alliance for Headache Disorders Advocacy's annual Headache on the Hill fly-in, where more than 250 patients, clinicians and researchers were brought together on Capitol Hill to advocate for increased research funding and other policies to support patient-centered care, such as reform of utilization management barriers.

Congressional Keynote Speakers

U.S. Congresswoman Erin Houchin

U.S. Congresswoman Erin Houchin (R - Indiana), a member of the Energy and Commerce Health Subcommittee, is a staunch advocate for prescription drug price transparency and patient-centered care and treatment. To kick off the event, she emphasized the importance of advocating for better care, research and treatment options, especially for those with migraine and headache disorders.

For Rep. Houchin, migraine is personal. She remembers watching her father lay in a dark room while suffering painful migraine attacks with no option but to wait for it to pass.

> **"For those living with chronic migraine and severe headache disorders, this isn't just an inconvenience. It's a debilitating health condition that deserves real attention.**

By raising awareness, sharing stories and pushing for meaningful policy changes, we can ensure better access to treatments and support for those who need it."

U.S. Senator Marsha Blackburn

U.S. Senator Marsha Blackburn (R – Tennessee), a longtime advocate for patient-centered health care policy, thanked advocates for focusing not only on treatment but also on research for a disease that affects so many women.

Sen. Blackburn knows the many barriers migraine patients face when accessing care. She has co-sponsored The Improving Seniors' Timely Access to Care Act, limiting excessive prior authorization requirements that prevent patients, such as those with migraine, from experiencing treatment delays.

She also advocates for the passage of permanent telehealth legislation, such as the Telehealth Modernization Act, which moves toward restoring access to telehealth to pandemic levels.

> **"We know that telehealth is a technology that is proven to be very helpful in connecting patients to providers and addressing migraine."**

Panel Discussion

Delora Denney, MD
Highland Community Hospital and Professor of Medicine at Tulane University, Picayune, Mississippi

As a mother, practicing provider, professor and board member of the Carolina Headache Foundation, Dr. Denney is a fierce advocate for her two daughters living with migraine and patients everywhere.

Dr. Denney brought a provider's perspective to the panel as she provided information on migraine and treatment throughout a woman's life. As a woman's estrogen levels change during childhood, adolescence, menstruation, pregnancy and menopause, so does her risk for migraine and treatment options.

The two types of migraine treatments, preventive and acute, differ in how they are used depending on a patient's stage of life or the spectrum of a patient's migraine disease. For example, children have very few approved medications because most are tested in adults. Additionally, during pregnancy, there are very few acute treatments available to patients.

To address these gaps, she said,

> **"We need research for children and women living with migraine beginning at the early stages to prevent the worsening of migraine."**

Delora E. Denney

Patient Advocate and Medical Student, University of Mississippi Medical Center, Jackson, Mississippi

Delora Denney, daughter of Dr. Denney, is an accomplished soon-to-be doctor herself who has served as President of the Student Interest Group in Neurology at her medical school and Executive Director of the Carolina Headache Foundation.

Delora had her first migraine at eight years old and saw multiple providers and specialists, many of whom diagnosed her with migraine but did not know how to treat it. Without treatment, her migraine worsened, and she experienced attacks almost daily.

> **"I went from being a straight-A student to being in class crying and not being able to focus because my head hurt so much," said Delora.**

She was dismissed from her swim team and felt isolated from many of her friends.

She now understands first-hand that medical schools lack comprehensive education on headache disorders. Migraine is more common than diabetes and asthma combined, but during medical school, her education contained 30 hours on diabetes, 20 hours on asthma and only one hour on migraine and headache disorders, she said.

She spoke to her medical school about her experience and realized how she could make a change. She designed a new migraine curriculum that would take three hours and believes it could be expanded even more.

Madeline Eig
Patient Advocate,
Rockville, Maryland

During the panel, Madeline, a 17-year-old migraine advocate, shared her migraine story and what inspired her to become an advocate.

Madeline experienced her first migraine episode in kindergarten and was finally diagnosed in 3rd grade. Her education was consumed by the pain of migraine, her school nurse demonstrated the importance of good advocacy by getting her accommodations that helped ease the burden.

She began advocating herself when her accommodations were denied for her AP exams despite having those accommodations regularly during practice testing. She was told she could not access food or water that allowed her to take her medications during testing and was instead told by the College Board to take all available medications before the test. She finally won after a 13-month fight.

> **Madeline said, "I'm still expected to act the way I look and not the way I feel."**

Her experiences helped her realize that migraine and headache disorders are an invisible disability.

She is now researching how access to telehealth for migraine impacts working-age women's quality of life and has found that an accommodating environment has the largest impact on productivity and quality of life. Her work has inspired her to advocate for research funding and easily accessible accommodations.

Amaal Starling, MD
Mayo Clinic, Scottsdale, Arizona

The panel was moderated by Amaal Starling, MD, of the Mayo Clinic in Scottsdale, Arizona.

As a strong advocate for patient-centered care, Dr. Starling provided important context to facilitate discussion. She emphasized how disabling migraine is for women as the leading cause of days lived with disability for women aged 15-49. She also advocated for more accessible accommodations and more research to advance non-opioid treatments and effective treatments across all life stages.

Policy Recommendations

Prompted by the policy panel discussion, advocates are asking policymakers to:

- **Support robust National Institute of Health funding** through the fiscal year 2026 and oppose NIH budget cuts, especially for the HEAL and BRAIN initiatives.
- **Co-sponsor and pass the Safe Step Act** when it is reintroduced to protect migraine patients from the treatment barriers imposed by step therapy requirements.
- **Support $30 million fiscal year 2026 appropriations for the Veterans Affairs Headache Centers of Excellence,** which would expand and support headache care for veterans.

To learn more about topics discussed at the event, as well as HMPF's and AHDA's policy priorities and advocacy initiatives, visit:

→ **headachemigraineforum.org**

→ **allianceforheadacheadvocacy.org**

The Headache & Migraine
Policy Forum

About The Headache & Migraine Policy Forum

The Headache & Migraine Policy Forum is a national non-profit coalition with a specific focus on advancing public policies and practices that promote accelerated innovation and improved treatments for persons living with headache disorders and migraine disease.

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About The Alliance for Headache Disorders Advocacy

The Alliance for Headache Disorders Advocacy is an umbrella organization uniting headache advocates nationwide. The organization's ongoing mission is to make life better for the millions of Americans living with headache disorders in our country.