

# In Conversation

## A Physician Discusses COVID-19 & Migraine Treatment

A discussion with **CARRIE DOUGHERTY, MD**



### Q How is the stress of the COVID-19 pandemic impacting migraine patients?

**Dr. D:** Stress can be a trigger for migraine attacks. Some patients, especially working mothers with small children, are juggling multiple roles right now. They have to be “on” all the time. The point where the work day ends and home life begins isn’t clear anymore.

There’s also the issue of more screen exposure, along with posture and musculoskeletal issues because people are sitting at a computer for longer. These factors can provoke attacks.

### Q Can people with migraine still access treatment?

**Dr. D:** Medicare and some commercial insurers now provide reimbursement for virtual and even phone consultations, so we can offer telemedicine visits to our patients. Our office remains open with abbreviated hours.

We had to fight to continue providing botulinum neurotoxin injections for migraine patients who rely on those. The heads of our facility saw the injections as elective procedures, which hospitals have stopped due to COVID concerns. We also continue to provide infused treatment for patients.

There’s a pretty strong push to keep patients out of the ER. They feel judged there, and they’re likely to get unnecessary imaging and potentially harmful narcotics. Patients are generally proactive about preventive care.

### Q Do you see any upside to the current situation?

**Dr. D:** Yes, there are definitely benefits. Some people with migraine now have more flexibility in terms of scheduling. They can follow their natural sleep cycle, because they don’t have to get up early to commute or take kids to school. They can coordinate their day.

Work-from-home policies can help decrease the stigma of migraine. Under normal circumstances, patients having a migraine day might work from home while their co-workers are all at the office. Standardizing telework has leveled the playing field. There’s less opportunity for judgement, for seeing the person with migraine as getting special treatment.

### Q What is the takeaway for policymakers?

**Dr. D:** Telemedicine is a valuable tool for migraine treatment, even beyond COVID-19. The same goes for reducing the prior authorization burden. If insurers can streamline that process for patients with the coronavirus, it would be nice to see less paperwork across the board.

Policy changes designed to help during COVID-19 could still benefit migraine patients once we get back to more normal circumstances.



**Alliance for  
Patient Access**

*Carrie Dougherty, MD, is a  
neurologist and a member of the  
Alliance for Patient Access.*

**MAY 2020**