

OVER 2.7 MILLION VETERANS WITH MIGRAINE TREATED



RECOMMENDATION

“It is extremely important to Veterans living with migraine and other headache diseases to have access to effective, evidence-based treatments. Often, Veterans share with me that they prefer non-medication treatment options. One such option includes neuromodulation, or headache devices. I’ve prescribed different types of devices, and have found that they can improve Veterans’ headaches as well as other important medical problems negatively impacting their lives, including insomnia and PTSD.”

*-Jason J. Sico, MD, MHS, National Director of Headache Centers of Excellence Program at U.S. Department of Veterans Affairs**

HOW DOES CEFALY WORK?

CEFALY works by targeting the primary pathway for migraine pain: the trigeminal nerve. It uses external trigeminal nerve stimulation (eTNS) — a precise electrical impulse — to stimulate and desensitize the trigeminal nerve over time.



ACUTE TREATMENT

Use the ACUTE program at the first sign of a migraine attack to relieve pain.



PREVENT TREATMENT

Use the PREVENT program every day to prevent future migraine attacks.

*Disclaimer: use and appearance of this quote does not imply or constitute endorsement by this individual or the Department of Veterans Affairs or its components.

THE FACTS

- 1 in 3 service members experience severe headache and debilitating migraine following deployment.
- Service members with combat deployment are 3 times more likely than U.S. civilians to experience migraine.
- Women are 3 times more likely than men to experience migraine.
- Mild Traumatic Brain Injury (mTBI) is a significant risk factor for chronic migraine.
- Depression was more likely (81%) in patients with a history of mTBI.
- Migraine is linked to physical pain, stress, anxiety and depression.



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