

Medication overuse headache (MOH) should be suspected if headache develops or worsens in a person who is taking acute and/or symptomatic medications for treatment of a previously diagnosed primary headache disorder.

The International Classification of Headache Disorders (ICHD) includes the following diagnostic criteria for medication overuse headache:

- Headache occurring on 15 or more days per month in a patient with a pre-existing headache disorder *and*
- Regular overuse for more than 3 months of one or more drugs that can be taken for acute and/or symptomatic treatment of headache.

For ergotamine, triptans, opioids and combination analgesics intake must be 10 days or more per month to be considered overuse.

For simple analgesics such as nonsteroidal anti-inflammatories (including aspirin) and paracetamol intake must be 15 days or more per month to be considered overuse.

The headache must not be better accounted for by another ICHD diagnosis



If clinical features are consistent with medication overuse headache (MOH) consider NICE Guidance on management: <https://www.nice.org.uk/guidance/cg150/chapter/Key-priorities-for-implementation#medication-overuse-headache> - See excerpt of relevant section:

Medication overuse headache

- 1.3.36 Explain to people with medication overuse headache that it is treated by withdrawing overused medication. [2012]
- 1.3.37 Advise people to stop taking all overused acute headache medications for at least 1 month and to stop abruptly rather than gradually. [2012]
- 1.3.38 Advise people that headache symptoms are likely to get worse in the short term before they improve and that there may be associated withdrawal symptoms, and provide them with close follow-up and support according to their needs. [2012]
- 1.3.39 Consider prophylactic treatment for the underlying primary headache disorder in addition to withdrawal of overused medication for people with medication overuse headache. [2012]
- 1.3.40 Do not routinely offer inpatient withdrawal for medication overuse headache. [2012]
- 1.3.41 Consider specialist referral and/or inpatient withdrawal of overused medication for people who are using strong opioids, or have relevant comorbidities, or in whom previous repeated attempts at withdrawal of overused medication have been unsuccessful. [2012]
- 1.3.42 Review the diagnosis of medication overuse headache and further management 4–8 weeks after the start of withdrawal of overused medication. [2012]



Provide patient with Medication Overuse Headaches Patient Information Leaflet