

Clinical Recommendation Review: Chronic Headache & Migraine

2003 AMERICAN ACADEMY OF NEUROLOGY (AAN)¹ AND 2018 AMERICAN HEADACHE SOCIETY (AHS)² RECOMMENDATIONS:

- **“All people with migraine will benefit** from education and migraine-related lifestyle guidance,” notes the American Headache Society (AHS) position statement.
- **“A large body of literature supports the efficacy of behavioral intervention for migraine.** Behavioral migraine treatment goals include: reducing migraine frequency and severity, improving the patient’s functioning and engagement in life and, for some individuals, limiting reliance on medication,” notes the AHS quick guide, available on their “Behavioral Treatment for Migraine” [website](#).
- The American Academy of Neurology (AAN) supports cognitive behavioral therapy (CBT), biofeedback, and relaxation as effective migraine prophylaxis modalities.
- As noted in the AHS position statement, the US Headache Consortium suggests that behavioral therapies may be particularly valuable for patients who prefer non-drug options or have not responded to pharmacologic treatments, have significant stress or poor stress-coping skills, are pregnant or nursing, or are at risk of acute medication overuse.

RECOMMENDED MECHANISMS/INTERVENTIONS VIA AHS POSITION STATEMENT²:

- “Empirically validated behavioral treatments with **Grade A evidence** for the prevention of migraine, including CBT, biofeedback, and relaxation therapies, should be considered in the management of migraine.”
- Many additional behavioral interventions can be used to treat migraine, such as healthy lifestyle habits, diaphragmatic breathing, progressive muscle relaxation, guided imagery, and mindfulness.
- Biobehavioral therapies may be used alone or in conjunction with pharmacologic and interventional treatments. Evidence suggests that combining biobehavioral interventions with pharmacotherapy provides **greater benefits than either modality alone**.

HOW LIN ALIGNS WITH AAN AND AHS GUIDANCE:

Delivers Evidence-Based Behavioral Therapies at Scale: Lin Health provides CBT, relaxation, mindfulness, and education shown to reduce migraine frequency, severity, and disability.

Personalized, Coach-Guided Support: Patients receive ongoing guidance to improve stress coping, modify triggers, and strengthen self-management skills.

Adjunctive, Non-Pharmacologic Care: Insurance-covered and designed to complement medications and procedures, including for patients with partial response or medication limitations.

¹ Behavioral/Physical Treatments for Migraine. The AAN Encounter Kit - Headache. Published online June 2003. <https://www.aan.com/globals/axon/assets/2354.pdf>

² American Headache Society. The American Headache Society position statement on integrating new migraine treatments into clinical Practice. Headache: The Journal of Head and Face Pain. 2018;59(1). doi:<https://doi.org/10.1111/head.13456>