**Session:** Concurrent Session II: Women’s Issues  
**Presentation:** Headache in Pregnancy: Presentation, Magnesium and Other Controversies, Case-based  
**Presenter:** Matthew Robbins

**Abstract:**

Key facts

1. Pregnant women presenting with acute, severe headache are at elevated risk of preeclampsia and other secondary headache disorders, particularly in the presence of elevated blood pressure and a lack of headache history.
2. Acute headache in the postpartum period also may be associated with secondary headache disorders related to obstetrical procedures, hypercoagulability, and other state-specific factors.
3. Though the natural history of migraine without aura is largely favorable in pregnancy, migraine with aura may feature an uncertain prognosis and present for the first time in the antepartum setting.
4. Many relatively safe and effective therapies are available for the acute and prophylactic treatment of migraine in pregnancy, including status migrainosus, though many agents carry trimester-specific risks.
5. Many migraine therapies are safe to administer for breast-feeding women, with the safety profile largely dependent on the milk:plasma ratio.
6. Noninvasive interventional therapies feature an alternative and likely safe treatment option for pregnant women, including peripheral nerve blocks, trigger point injections, sphenopalatine ganglion blocks, and noninvasive neuromodulation devices such as single pulse transcranial magnetic stimulation and transcutaneous supraorbital neurostimulation.
7. A migraine history elevates the relative risk of many medical and obstetrical complications during pregnancy and the puerperium, including preeclampsia and ischemic stroke.

**Selected references**


**At the conclusion of this presentation, attendees should be better able to:**

- Approach patients presenting with acute headache who are pregnant or postpartum by assessing for more specific red flags associated with unique secondary headache etiologies in this population
- Identify prognostic trends for migraine with and without aura during pregnancy and the postpartum period
- Articulate appropriate therapies available to treat pregnant and lactating women with migraine, including acute, prophylactic, and interventional strategies.
- Evaluate the risks of adverse labor and delivery outcomes in pregnant women with migraine.