

Scoping Review: The Effects of Interrupted Onabotulinum Toxin A Treatment for Chronic Migraine Prevention during the COVID-19 Pandemic

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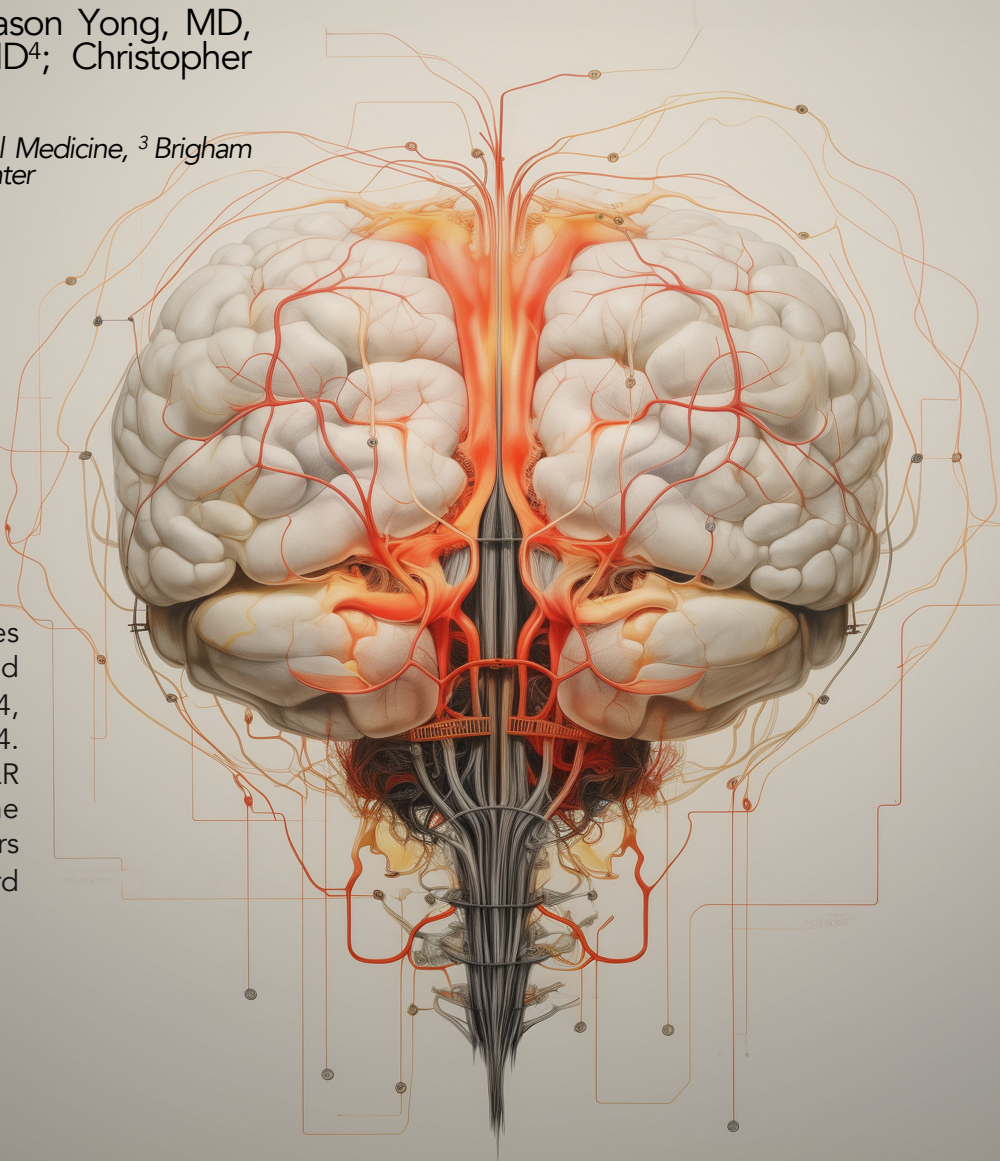
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Introduction

The coronavirus (COVID-19) pandemic significantly impacted the international medical community. Most medical centers significantly limited elective procedures, severely undermining the appropriate management of many debilitating chronic conditions. Onabotulinumtoxin A (OTA) injections for chronic migraine patients were involuntarily postponed (1). This led to significant setbacks in the group most refractory to conventional migraine treatment.

Methods

A scoping review was conducted on databases Medline and Embase with a search timeframe defined as the point of database inception to March 1st, 2024, and the search was performed on March 2nd, 2024. The search strategy was formulated by authors QR and CR and reviewed by all authors of the article. The initial data extraction was completed by two authors (QR and CR). In the event of discrepancy, a third author (DP) was consulted for final approval.



Artwork by: Sacha Moreau & Aleksy Dojnow

Results

Nine articles met the defined inclusion criteria. The studies were collectively published between 2020 and 2023, mainly under authors based in Europe (6 of 9) and the United States (2 of 9). Cross-sectional retrospective chart reviews were the most common modality of investigation (4 of 9). The study involving the highest number of subjects (n = 1172) was performed as a cross-sectional survey study, while one case series had the least (n = 20).

Discussion

The COVID-19 pandemic has significantly limited the use of OTA due to the feasibility of in-person medical consultations, resulting in marked clinical detriments in patient populations across the US, Europe, and the Middle East (2). Strategies employed to circumvent the limitations imposed during the time of crisis included the adoption of remote consultation via telemedicine as well as the use of pharmacological agents such as CGRP antagonists (3), which were patient administered. In the event of a reoccurrence of a worldwide pandemic, strategies should be implemented to prevent the cessation of needed treatment for those suffering from chronic migraine.

References

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