

**71% of patients cited recurrence as a reason for being dissatisfied with their acute migraine treatment.<sup>1</sup>**

## Amy, 30

*“My migraines come back over the course of a day, especially during my period.”*

### Occupation

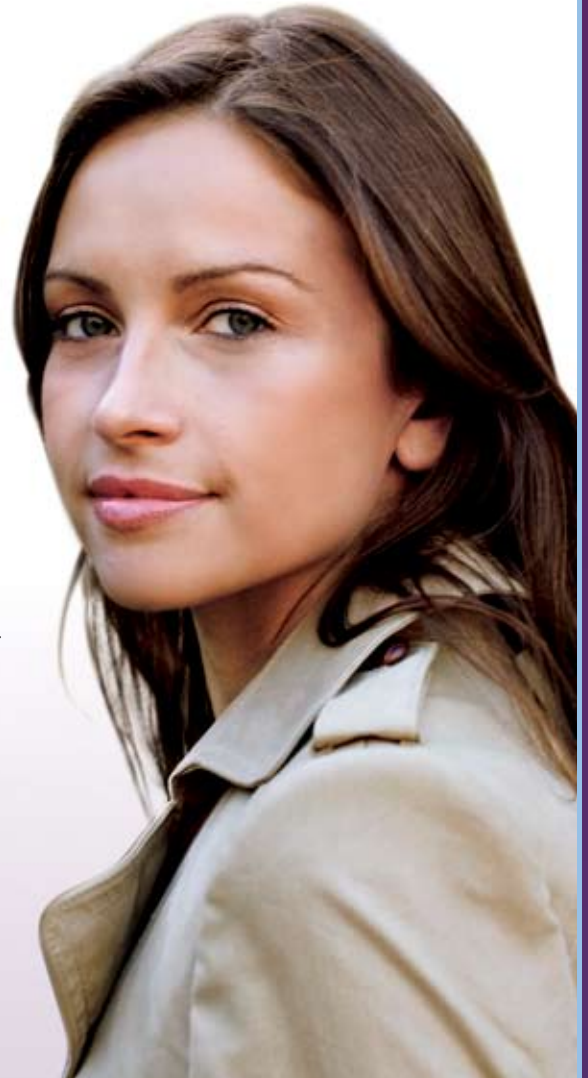
- Preschool teacher

### Migraine history

- Has suffered from migraines, both during and outside her period, for 5 years
- Misses work 1 or 2 days a month due to migraines
- Frequently has multiple migraines during a 24-hour period

### Current migraine treatment

- Uses prescription drugs, but reports that migraines frequently recur, causing redosing



NAME Amy Smith						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		X	X			
					X	

**Migraines around a woman's period are reported to occur with greater severity, persist longer, and may be more resistant to treatment.<sup>2,3</sup>**

**What is an appropriate treatment option for recurring migraines?**

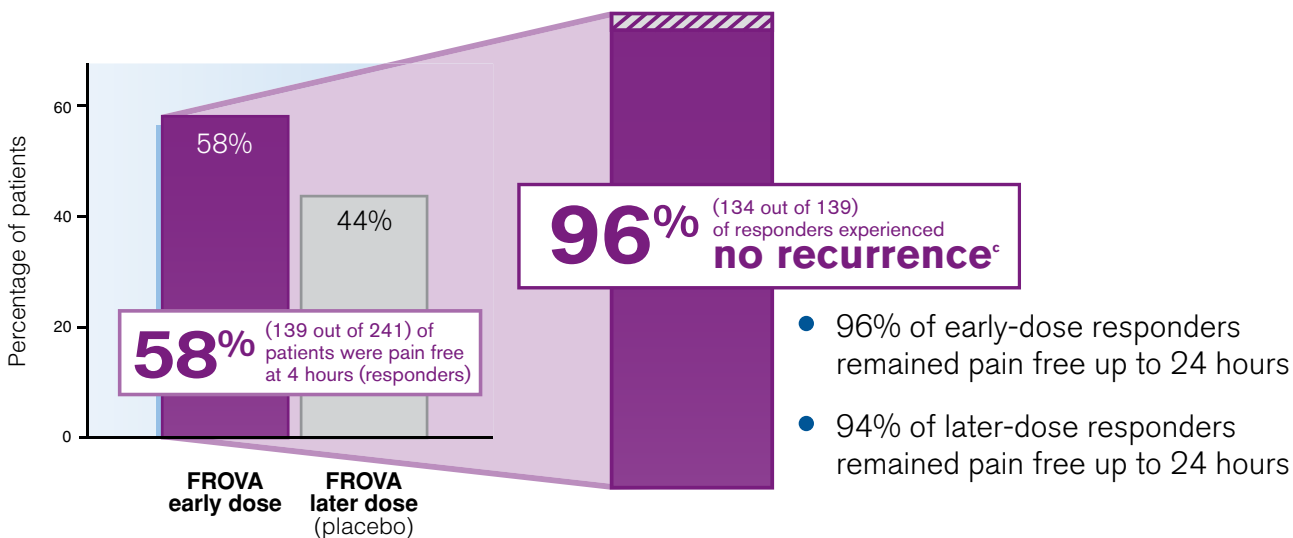
**References:** 1. Lipton RB, Stewart WF. Acute migraine therapy: do doctors understand what patients with migraine want from therapy? *Headache*. 1999;39(suppl 2):S20-S26. 2. Granella F, Sances G, Allais G, et al. Characteristics of menstrual and nonmenstrual attacks in women with menstrually related migraine referred to headache centres. *Cephalalgia*. 2004;24(9):707-716. 3. MacGregor EA, Hackshaw A. Prevalence of migraine on each day of the natural menstrual cycle. *Neurology*. 2004;63(2):351-353.

In a double-blind, placebo-controlled study<sup>1,a</sup>

## With FROVA<sup>®</sup>, responders experienced low recurrence rates through 24 hours

Among patients who were *pain free*<sup>b</sup> at 4 hours<sup>1</sup>

P=0.003  
(n=241)



Among patients who received FROVA early<sup>1</sup>

**80% did not require rescue medication for 24 hours postdose.**

The most common adverse events experienced in all treatment groups were dry mouth, dizziness, and drowsiness.

FROVA is indicated for the acute treatment of migraine attacks with or without aura in adults where a clear diagnosis of migraine has been established. FROVA is not intended for the prophylactic therapy of migraine or for use in the management of hemiplegic or basilar migraine.

<sup>a</sup> This was a multicenter, double-blind, placebo-controlled, 2-way crossover study to prospectively evaluate whether FROVA would provide greater relief if given early in a migraine attack. Patients recorded migraine severity at fixed time points postdose (at 1, 2, 3, 4, and 24 hours).<sup>1</sup>

<sup>b</sup> Pain free was defined as no recurrence, no second dose of study medication, and no rescue medication in the 24 hours following dosing.<sup>1</sup>

<sup>c</sup> Migraine recurrence was defined as patients who were pain free at 4 hours but reported a return of headache of any severity (grade 1, 2, or 3) within 24 hours.<sup>1</sup>

### Important Safety Information

The safety and effectiveness of FROVA have not been established for cluster headache, which is present in an older, predominantly male population. FROVA should not be given to patients with cerebrovascular syndromes, peripheral vascular disease, uncontrolled hypertension, ischemic heart disease, or to patients who have symptoms or findings consistent with ischemic heart disease, coronary artery vasospasm, including Prinzmetal's variant angina or other significant underlying cardiovascular disease. FROVA should not be given to patients within whom unrecognized coronary artery disease is predicted by the presence of risk factors without a prior cardiovascular evaluation. The development of a potentially life-threatening serotonin syndrome may occur with triptans, including FROVA treatment, particularly during combined use with selective serotonin reuptake inhibitors (SSRIs) or serotonin norepinephrine reuptake inhibitors (SNRIs). If concomitant treatment with FROVA and an SSRI or SNRI is clinically warranted, careful observation of the patient is advised, particularly during treatment initiation and dose increases. The most common side effects associated with use of FROVA are dizziness, fatigue, paresthesia, flushing, headache, dry mouth, hot or cold sensation, skeletal pain, chest pain, and dyspepsia.

**Reference:** 1. Cady R, Elkind A, Goldstein J, Keywood C. Randomized, placebo-controlled comparison of early use of frovatriptan in a migraine attack versus dosing after the headache has become moderate or severe. *Curr Med Res Opin.* 2004;20(9):1465-1472.

R<sub>x</sub> only

FROVA<sup>®</sup> is a registered trademark of Vernalis Development Limited.

FROVA first  
for female migraine sufferers



**Frova**<sup>®</sup>  
frovatriptan succinate  
2.5mg Tablets

Please see enclosed full Prescribing Information.

**ENDO**<sup>®</sup>  
PHARMACEUTICALS

CHADDS FORD, PENNSYLVANIA 19317

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