

List of excluded studies in cost-effectiveness review

Publication	Reason for exclusion
1. Adelman JU, Adelman LC, Von Seggern R. Cost-effectiveness of antiepileptic drugs in migraine prophylaxis. <i>Headache</i> 2002;42(10):978-83.	Episodic migraine studies
2. Agboola F, Atlas SJ, Touchette DR, et al. The effectiveness and value of novel acute treatments for migraine. <i>J Manag Care Spec Pharm</i> 2020;26(11):1456-62.	Acute migraine studies
3. Agency for Care Effectiveness. Botulinum toxin type A for the prophylaxis of headaches in adults with chronic migraine. 2022, Agency for Care Effectiveness (ACE): Singapore	Not a full economic evaluation
4. Amanat M, Ashrafi MR. The use of anti-epileptic drugs in prevention of migraine in children and adolescents. <i>Cephalalgia</i> 2020;40(7):762-63.	Letter to editor - No data included
5. Anonymous. Potential for cost savings with prophylactic migraine therapy. <i>Drugs and Therapy Perspectives</i> 1995;6(6):14-16.	Not original data, episodic migraine
6. Anonymous. Antiepileptics for migraine prophylaxis only cost-effective with frequent episodes. <i>Expert Review of Pharmacoeconomics and Outcomes Research</i> 2003;3(1):5-12.	An editorial related to Adelman paper 196
7. Anonymous. [Utilizing the strength(s) of rizatriptan 10mg: cost effective against migraine attacks]. <i>MMW Fortschr Med</i> 2009;151(13):92-3.	Acute treatment
8. Anonymous. Rizatriptan 10mg cost-effective against migraine attacks. [German]. <i>MMW-Fortschritte der Medizin</i> 2009;151(13):92-93.	Acute treatment and duplicate of no. 7 above
9. Anonymous. OnabotulinumtoxinA (Botox): (Allergan Inc.): Indication: For the prophylaxis of headaches in adults with chronic migraine (>= 15 days per month with headache lasting four hours a day or longer). <i>Pharmacoeconomic Review Report. Canadian Agency for Drugs and Technologies in Health</i> 2019;11:11.	Included as part of the reports (Duplicate)
10. Asseburg C, Peura P, Oksanen T, et al. Cost-effectiveness of oral triptans for acute migraine: mixed treatment comparison. <i>Int J Technol Assess Health Care</i> 2012;28(4):382-9.	Acute treatment
11. Berg J. Economic Evidence in Migraine and Other Headaches: A Review. <i>Eur J Health Econ</i> 2004;5:S43-54.	Review of cost of illness studies
12. Biddle AK, Shih YC, Kwong WJ. Cost-benefit analysis of sumatriptan tablets versus usual therapy for treatment of migraine. <i>Pharmacotherapy</i> 2000;20(11):1356-64	Acute treatment
13. Bigal ME, Rapoport AM, Bordini CA, et al. Burden of migraine in Brazil: estimate of cost of migraine to the public health system and an analytical study of the cost-effectiveness of a stratified model of care. <i>Headache</i> 2003;43(7):742-54	Reporting on models of care rather than specifically migraine
14. Blanchard EB, Andrasik F, Appelbaum KA, et al. The efficacy and cost-effectiveness of minimal-therapist-contact, non-drug treatments of chronic migraine and tension headache. <i>Headache</i> 1985;25(4):214-20.	Not drug treatment
15. Blumenfeld AM. Impact of botulinum toxin type-A treatment on medication costs and usage in difficult-to-treat chronic headache: Case studies. <i>Headache Quarterly</i> 2001;12(4):241-44	Cost-minimisation analysis/not a within-trial analysis
16. Bonafede M, Cai Q, Cappell K, et al. Factors associated with direct health care costs among patients with Migraine. <i>Journal of Managed Care and Specialty Pharmacy</i> 2017;23(11):1169-76	Cost of illness study
17. Brown JS, Papadopoulos G, Neumann PJ, et al. Cost-effectiveness of topiramate in migraine prevention: results from a pharmacoeconomic model of topiramate treatment. <i>Headache</i> 2005;45(8):1012-22.	Episodic migraine
18. Brown JS, Papadopoulos G, Neumann PJ, et al. Cost-effectiveness of migraine prevention: the case of topiramate in the UK. <i>Cephalalgia</i> 2006;26(12):1473-82.	Episodic migraine
19. Brown JS, Rupnow MF, Neumann P, et al. Cost effectiveness of topiramate in the prevention of migraines in the United States: an update. <i>Manag Care Interface</i>	Episodic migraine

2006;19(12):31-8.	
20. Bruggenjurgen B, Baker T, Bhogal R, et al. Cost impact of a non-invasive, portable device for patient self-administration of chronic migraine in a UK National Health Service setting. Springerplus 2016;5(1):1249	Comparator is a non-drug treatment
21. Buonanotte CF. Costo beneficio del tratamiento de la migraña crónica con Onabotulinumtoxin A en Argentina. Cost benefit of treatment of chronic migraine with onabotulinumtoxinA in Argentina. Neurologia Argentina 2014;09(2):84-88	Cost of illness study; no comparative data
22. Canadian Coordinating Office for Health Technology A. Meta-analysis and economic evaluation of sumatriptan for migraine. Canada: Canadian Coordinating Office for Health Technology Assessment (CCOHTA), 1996.	Acute treatment
23. Caro G, Getsios D, Caro JJ, et al. Sumatriptan: economic evidence for its use in the treatment of migraine, the Canadian comparative economic analysis. Cephalalgia 2001;21(1):12-9.	Acute treatment
24. Caro JJ, Caro G, Getsios D, et al. The migraine ACE model: evaluating the impact on time lost and medical resource Use. Headache 2000;40(4):282-91.	Cost of illness study
25. Caro JJ, Getsios D, Raggio G, et al. Treatment of migraine in Canada with naratriptan: a cost-effectiveness analysis. Headache 2001;41(5):456-64.	Acute treatment
26. Ellis AG. Calcitonin Gene-Related Peptide (CGRP) Inhibitors as Preventive Treatments for Patients with Episodic or Chronic Migraine: Effectiveness and Value: Final Evidence Report. 2018; Available from: https://icer.org/wp-content/uploads/2020/10/ICER_Migraine_Final_Evidence_Report_070318.pdf .	Duplicate of included study: ICER review 2018
27. Ergun H, Gulmez SE, Tulunay FC. Cost-minimization analysis comparing topiramate with standard treatments in migraine prophylaxis. Eur Neurol 2007;58(4):215-7.	Episodic migraine
28. Evans KW, Boan JA, Evans JL, et al. Economic evaluation of oral sumatriptan compared with oral caffeine/ergotamine for migraine. Pharmacoeconomics 1997;12(5):565-77.	Acute treatment
29. Franklin M, Druyts E. ICER's assessment of lasmiditan, rimegepant, and ubrogepant for acute migraine. Journal of Managed Care and Specialty Pharmacy 2020;26(11):1464-66	Acute treatment
30. Foster SA, et al. Direct cost and healthcare resource utilization of patients with migraine before treatment initiation with calcitonin gene-related peptide monoclonal antibodies by the number of prior preventive migraine medication classes. Current Medical Research & Opinion, 2022. 38(5): p. 653-660.	Not a full economic evaluation
31. Galvan J, Slob J. [Economic evaluation of acute migraine attack treatment with triptans in Spain]. Neurologia 2006;21(2):110-1	Acute treatment
32. Gracia-Naya M, Rejas Gutierrez J, Latorre Jimenez A, et al. [Economic evaluation of acute migraine attack treatment with triptans in Spain]. Neurologia 2005;20(3):121-32	Acute treatment
33. Halpern MT, Lipton RB, Cady RK, et al. Costs and outcomes of early versus delayed migraine treatment with sumatriptan. Headache 2002;42(10):984-99.	Acute treatment
34. Hens M, Villaverde-Hueso A, Alonso V, et al. Comparative cost-effectiveness analysis of oral triptan therapy for migraine in four European countries. Eur J Health Econ 2014;15(4):433-7	Acute treatment
35. Ho MJ, Joish VN, LaFleur J, et al. Pharmacoeconomic analysis of oral triptans. Formulary 2004;39(7):356-57.	Acute treatment
36. Hwang TJ, Vokinger KN, Kesselheim AS. New Treatments for Migraine - Therapeutic Ratings and Comparative Coverage in the US, Canada, and Europe. JAMA Internal Medicine, 2022. 182(2): p. 101-102.	Not a full-length article/conference proceeding
37. Iannazzo S, Cattaruzza MS, De Filippis S, et al. Analgesic therapy for headache: consumption, appropriateness and costs. Journal of Headache and Pain 2003;4(Supplement 1):S84-S87	Acute treatment
38. Joish VN, Armstrong EP. Use of decision analysis in modeling the cost-effectiveness of oral vs SC sumatriptan. Formulary 2000;35(6):532-39.	Acute treatment
39. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Erenumab (Migraene). 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im	Not a full economic evaluation

Gesundheitswesen (IQWiG): Germany.	
40. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Galcanezumab (Migraene). 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany.	Not a full economic evaluation
41. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Galcanezumab (Migraene) - Addendum zum Auftrag A19-28. 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany.	Not a full-length article/conference proceeding
42. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Galcanezumab (Migraene) - 2. Addendum zum Auftrag A19-28. 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany	Not a full-length article/conference proceeding
43. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Fremanezumab (Migraene). 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany.	Not a full economic evaluation
44. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Fremanezumab (Migraene) - Addendum zum Auftrag A19-44. 2019, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany.	Not a full-length article/conference proceeding
45. Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen. Erenumab (Migraene). 2021, Institut fuer Qualitaet und Wirtschaftlichkeit im Gesundheitswesen (IQWiG): Germany.	Not a full economic evaluation
46. Karschney VK, Greeley DR. A Retrospective Cost Analysis of Patients Who Switched from OnabotulinumtoxinA to IncobotulinumtoxinA in a Private Neurology Practice. Am J Manag Care 2020;13(5):205-10.	No migraine specific outcome data; a cost analysis
47. Lainez MJ. The effect of migraine prophylaxis on migraine-related resource use and productivity. CNS Drugs 2009;23(9):727-38.	Non-systematic review article. No original data
48. Laloux P, Vakaet A, Monseu G, et al. Subcutaneous sumatriptan compared with usual acute treatments for migraine: clinical and pharmacoeconomic evaluation. Acta Neurol Belg 1998;98(4):332-41	Acute treatment
49. Lanteri-Minet M. Economic burden and costs of chronic migraine. Current Pain and Headache Reports 2014;18(1):385.	Review article; no original data
50. Larbig W, Bruggenjurgen B. Work productivity and resource consumption among migraineurs under current treatment and during treatment with sumatriptan - An economic evaluation of acute treatment in moderate to severe migraineurs. Headache Quarterly 1997;8(3):237-46.	Acute treatment
51. Legg RF, Sclar DA, Nemec NL, et al. Cost-effectiveness of sumatriptan in a managed care population. Am J Manag Care 1997;3(1):117-22	Acute treatment
52. Linde M, Steiner TJ, Chisholm D. Cost-effectiveness analysis of interventions for migraine in four low- and middle-income countries. J Headache Pain 2015;16:15.	Episodic migraine
53. Lofland JH, Nash DB. Oral serotonin receptor agonists: a review of their cost effectiveness in migraine. Pharmacoeconomics 2005;23(3):259-74.	Acute treatment
54. Marcus SC, Shewale AR, Silberstein SD, et al. Comparison of healthcare resource utilization and costs among patients with migraine with potentially adequate and insufficient triptan response. Cephalalgia 2020;40(7):639-49	Acute treatment
55. Mennini FS, Fioravanti L, Piasini L, et al. A one-year retrospective economic evaluation of botulinum toxin type A treatment of chronic tension headache. Journal of Headache and Pain 2004;5(3):188-91	Not migraine
56. Mennini FS, Gitto L. The costs of headache disorders. Journal of Headache and Pain 2015;16(Supplement 1):1	Not research
57. Messali A, Sanderson JC, Blumenfeld AM, et al. Direct and Indirect Costs of Chronic and Episodic Migraine in the United States: A Web-Based Survey. Headache 2016;56(2):306-22.	Cost of illness study
58. Mitchell MP, Schaecher K, Cannon HE, et al. Humanistic, utilization, and cost outcomes associated with the use of botulinum toxin for treatment of refractory migraine headaches in a managed care organization. J Manage Care Pharm 2008;14(5):442-50.	No comparator drug
59. Morris J, Straube A, Diener HC, et al. Cost-effectiveness analysis of non-invasive	Not migraine

vagus nerve stimulation for the treatment of chronic cluster headache. J Headache Pain 2016;17:43.	
60. Naprienko MV, Smekalkina LV, Safonov MI, et al. [Real-world migraine burden: clinical and economic aspects]. Zh Nevrol Psikhiatr Im S S Korsakova 2019;119(1):31-37.	Not a within trial analysis
61. Peretto EM, Weis KA, Mullins CD, et al. An economic evaluation of triptan products for migraine. Value Health 2005;8(6):647-55.	Acute treatment
62. Pokladnikova J, Maresova P, Dolejs J, et al. Economic analysis of acupuncture for migraine prophylaxis. Neuropsychiatr 2018;14:3053-61.	Not a drug trial
63. Ramsberg J, Henriksson M. The cost-effectiveness of oral triptan therapy in Sweden. Cephalalgia 2007;27(1):54-62	Acute treatment
64. Rothrock JF, Bloudek LM, Houle TT, et al. Real-world economic impact of onabotulinumtoxinA in patients with chronic migraine. Headache 2014;54(10):1565-73.	Before and after study
65. Royle P, Cummins E, Walker C, et al. Botulinum toxin type A for the prophylaxis of headaches in adults with chronic migraine. England: NIHR Health Technology Assessment programme, 2012	Included as part of the reports (Duplicate)
66. Ruggeri M. The cost effectiveness of Botox in Italian patients with chronic migraine. Neurol Sci 2014;35 Suppl 1:45-7.	Conference abstract – full paper included
67. Schoenbrunner AR, Khansa I, Janis JE. Cost-Effectiveness of Long-Term, Targeted OnabotulinumtoxinA versus Peripheral Trigger Site Deactivation Surgery for the Treatment of Refractory Migraine Headaches. Plast Reconstr Surg 2020;145(2):401e-06e	Non-drug comparator
68. Shauly O, Gould DJ, Patel KM. Cost-Utility Analysis of Surgical Decompression Relative to Injection Therapy for Chronic Migraine Headaches. Aesthet Surg J 2019;39(12):np462-np70.	No drug/placebo comparison
69. Slof J, Lainez JM, Comas A, et al. [Almotriptan vs. ergotamine plus caffeine for acute migraine treatment. A cost-efficacy analysis]. Neurologia 2009;24(3):147-53	Acute treatment
70. Smelt AF, Blom JW, Dekker F, et al. A proactive approach to migraine in primary care: a pragmatic randomized controlled trial. Cmaj 2012;184(4):E224-31.	Non-drug intervention
71. Smith DG. Cost-effectiveness of migraine treatment: a commentary. Value Health 2003;6(4):436-7	An editorial; not research
72. Taylor FR. Cognitive behavioral therapy plus amitriptyline for chronic migraine in children and adolescents: A randomized clinical trial. Headache 2014;54(5):930-31	Not a drug trial
73. Tepper SJ, et al. Effectiveness of erenumab and onabotulinumtoxinA on acute medication usage and health care resource utilization as migraine prevention in the United States. Journal of Managed Care and Specialty Pharmacy, 2021. 27(9): p. 1157-1170.	Not a full economic evaluation
74. Tfelt-Hansen P, JH Hauchildt. Behandling af migræne med triptaner – en kommenteret udenlandsk medicinsk teknologivurdering. 2008, Danish Centre for Evaluation and Health Technology Assessment (DACEHTA): Denmark	Not chronic migraine
75. Thompson M, Gawel M, Desjardins B, et al. An economic evaluation of rizatriptan in the treatment of migraine. Pharmacoeconomics 2005;23(8):837-50	Acute treatment
76. Vickers AJ, Rees RW, Zollman CE, et al. Acupuncture of chronic headache disorders in primary care: Randomised controlled trial and economic analysis. Health Technology Assessment 2004;8(48):iii-35.	Not a drug trial
77. Warner JS. Cost effective treatment of chronic daily headache. Headache Quarterly 1997;8(1):36-41.	Not a full economic evaluation
78. Wonderling D, Vickers AJ, Grieve R, et al. Cost effectiveness analysis of a randomised trial of acupuncture for chronic headache in primary care. BMJ 2004;328:747-49.	Not a drug trial
79.. Yu J, Smith KJ, Brixner DI. Cost effectiveness of pharmacotherapy for the prevention of migraine: a Markov model application. CNS Drugs 2010;24(8):695-712	Episodic migraine