

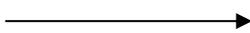
Patient History

A 55-year-old female patient with chronic migraine presented for evaluation and treatment at a neurological center in England. The patient reported that her symptoms had begun at age of 12. There was no known family history of migraines but she had suffered a significant concussion at 10, two years prior to migraine onset. During the past 15 years, she had experienced an increase in migraine severity, currently averaging 22 migraines per month. The patient stated that she had tried multiple therapeutic regimens aimed at reducing migraines: preventative medications, rescue medications (including triptans), aromatherapy, acupuncture, mouth guard, and occipital nerve blocks. In addition, she instituted such life style adjustments as bedtime routine, Pilates classes, and dietary changes leading to a weight loss of 75 lbs. Each of these approaches provided limited and temporary relief. Continuous use of topiramate caused the patient to experience suicidal ideation, leading her to seek other approaches. Through social media and her Headache Specialist General Practitioner, she learned about sTMS therapy. Her GP subsequently referred her to a neurologist specializing in headache. At the conclusion of the intake interview, her neurologist prescribed sTMS.

Medication and Treatment History

Relief Attempts

- Maxalt melt
- Amitriptyline
- Imigran
- Topiramate
- Almotriptan
- Occipital Nerve Blocks X 3



Results

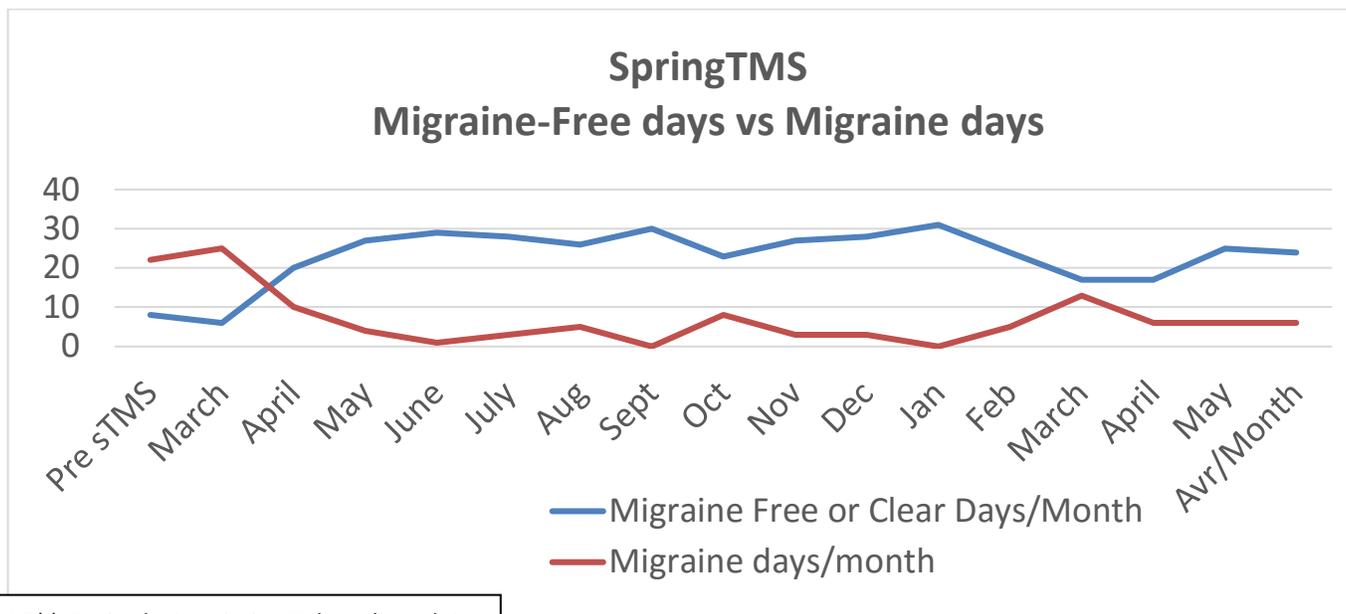
- Intense side effects
- Fatigued and confused thoughts
- Did not tolerate well
- Suicial thoughts
- Used as rescue medication
- Diminishing results with each treatment

SpringTMS Therapy

- Utilizing a risk sharing programme, patient was prescribed sTMS to abort and lessen severity of migraine symptoms.
- Prescription: Administer 4 to 8 pulses BID and additional pulses (up to 32 per 24 hours) as needed for abortive.
- Treatment commenced with daily completion of headache diary to track detailed symptoms and responses to treatments.

Results (at 15 months of sTMS)

- pre sTMS therapy, headache pain rated 9.5 out of 10. With daily sTMS therapy, headache pain rated 3 out of 10.
- sTMS therapy **reduced** number of debilitating migraine days per month from 22 **to 6**, a 72% reduction in migraines.
- Patient significantly **increased migraine free days per month** to 24, a four-fold increase in quality of life.
- Number of absences from work due to migraine now nearly zero.
- Preventive medications significantly reduced.
- Healthcare costs substantially reduced.



*Apr-16** Device lost. Missing 7 days diary data.*

Summary

Before SpringTMS

- 22 severe migraine days per month.
- Triptans used infrequently due to side effects.
- Utilized a combination of traditional and alternative migraine remedies to self-manage health.

After SpringTMS

- **6 days per month.**
- **No side effects or rebound headache from using sTMS.**
- **Patient self manages her migraine treatment using sTMS preventatively and no longer takes preventative medications.**
- **Continues to utilize combination of migraine remedies to self manage health →markedly improved health.**