 **Treatment of Migraine with Rizatriptan Standing Order**

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| Issue date: |  | Review date: |  |

This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

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| **Standing Order Name** | Treatment of Migraine with Rizatriptan |
| **Rationale** | To give effective relief for a patient suffering from a migraine where other medication has not been effective. |
| **Scope (condition and patient group)** | Adult patients presenting with symptoms consistent with a migraine, who have tried pain relief for this migraine and/or previous migraines such as paracetamol, codeine or non-steroidal anti-inflammatory medications without relief.Patients must have had migraines diagnosed in the past and be presenting with the same symptoms as previous migraines. |
| **Red Flags** | Sudden onset severe headache lasting > 1 hour, unless consistent with previous migraine or other recurrent headaches.Aura occurring for the first time in women on combined oral contraceptivesHeadache with meningism or fever.Neurological signsSeizures |
| **Assessment** | Ask patients about the following features to determine that presenting symptoms are consistent with a migraine.Without aura:* Severe unilateral or bilateral headache, often centred around the eye
* Nausea and vomiting
* Photophobia and phonophobia
* Exacerbation by movement and exercise
* Patient preference to lie in the dark
* Family history
* Duration- several hours or up to 3 days, recurrent episodes

With aura:* Aura usually precedes headache
* Duration is usually minutes or tens of minutes
* Visual aura- often a gradual spread of bright zig zag edge of disturbed vision
* Sensory aura- eg unilateral paraesthesiae or pins and needles
* Other neurological features eg mild confusion or difficulty finding words
* Unilateral weakness
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| **Indication** | **Treatment of migraines in patients that have found pain relief to be ineffective.** |
| **Medicine** | **Rizatriptan** 10mg orally disintegrating tablet |
| **Dosage instructions** | Give 10mg orally STAT at onset of headache A further dose may be repeated after 2 hours, if migraine recurs and there was initial relief. |
| **Route of administration** | Orally |
| **Quantity to be given** | Up to 2 x 10mg tablets |
| **Contraindications** | Uncontrolled or severe hypertensionIschemic heart disease including previous myocardial infarctionStroke or coronary vasospasm Monoamine oxidase inhibitor (MAOI) now or in the previous 14 days.Propranolol, which increases the plasma concentration of rizatriptan |
| **Precautions** | * Do not give if patient is pregnant or breastfeeding
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| **Indication** | **Nausea and/or vomiting in migraines*** Promotes gastric emptying, which may help with absorption of pain relief
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| **Medicine** | **Metoclopramide** 10mg tablet or injection |
| **Dosage instructions** | Give 10mg STAT. If giving injection, give over 3 minutes |
| **Route of administration** | Oral or intravenous |
| **Quantity to be given** | 1 x 10mg tablet or injection |
| **Contraindications** | Gastro-intestinal obstruction |
| **Precautions** | * Extrapyridamal side effects in young and old women
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| **Additional information** | Do not give Rizatriptan during the aura phase of the migraine, as it is ineffective. |
| **Follow-up** | Consider referral to a Medical or Nurse Practitioner for migraine prophylaxis |
| **Countersigning and auditing** | Countersigning is not required. Audited monthly.**OR** Countersigning is required within ***XX*** days |
| **Competency/training requirements** | All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training in this standing order. |
| **Supporting documentation** | Healthpathways at [www.healthpathways.org.nz](http://www.healthpathways.org.nz) Best Practice Journal issue 62 July 2014 at [www.bpac.org.nz](http://www.bpac.org.nz) New Zealand Formulary at [www.nzf.org.nz](http://www.nzf.org.nz) Individual medicine data sheets at [www.medsafe.govt.nz](http://www.medsafe.govt.nz) BMJ Best Practice <http://bestpractice.bmj.com> Standing Order Guidelines, Ministry of Health, 2012Medicines (Standing Order) Regulations 2012 (Standing Order Regulations) |
| **Definition of terms used in standing order** | Aura- A sensation that precedes the onset of certain disorders such as migraine.Photophobia- extreme sensitivity to light.Phonophobia- a fear of loud sounds.Paraesthesiae - an abnormal sensation, typically tingling or pricking (‘pins and needles’). |

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| **Medical Centre or Clinic:** |  |

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| **Signed by issuers** |

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Nurses operating under this standing order** |

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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