Cluster headache is a rare and extremely painful primary headache disorder characterized by recurring unilateral (on one side of the head) attacks. Cluster headache is one of the most painful conditions an individual can experience. Often referred to as “suicide headache,” cluster headache is known to be even more excruciating and debilitating than migraine.

The frequency of cluster headache:
- Typically occurs in bouts for 6-12 weeks\(^1\)
- Lasts 15 minutes to 3 hours\(^1\)
- Can strike up to 8 times a day\(^1\)

The impact of cluster headache:
- Affects approximately 1-2 people in every 1,000\(^2\)
- Patients take their own lives 20x more than the national average\(^2\)
- 79% of patients reported they were either "Not at all satisfied" or "A little satisfied" with current treatment options\(^3\)
CLUSTER HEADACHE CAN BE A COSTLY STRAIN

Work hours lost due to cluster headache:
- 78% for absenteeism
- 23% for short-term disability

Overall direct costs of cluster headache can total over $3,000 per person, per year

20% of patients with cluster headache have lost their job due to their condition

CURRENT STANDARD OF CARE FOR CLUSTER HEADACHE TREATMENT IS NOT ALWAYS EFFECTIVE

Treatment strategies can prove challenging for cluster headache patients, as there is a critically unmet need for viable therapies.

For example, approved therapies like injectable sumatriptan can pose challenges for patients:
- Triptan non-response
- Limitations on the number of uses per day
- Reimbursement and quantity restrictions

EMERGING THERAPIES

Upcoming innovations have the potential to provide cluster headache patients with alternative treatment options for currently unmet needs.

- Neuromodulation is an area of medicine that can potentially be used in novel ways to give patients alternative treatment options for pain associated with primary headache, especially as varying applications of neuromodulation have already proven effective and safe. Through the transmission of therapeutic signals, neuromodulation blocks certain pain signals and thereby provides relief for the patient.

- Calcitonin gene-related peptide (CGRP) monoclonal antibodies are part of a new class of medicine being studied in cluster headache.

REFERENCES
3. Data on file. electroCore, LLC.