



2026 INTERVIEW SUMMARY SHEET

SPEAKER

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TOPIC

**Navigating the Migraine Chaos That Begins During
Perimenopause**

TITLE & ORGANIZATION

Assistant Clinical Professor of Neurology | Founder
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KEY TAKEAWAYS

- Fluctuations in estrogen are the primary triggers for migraine during the perimenopausal transition period.
- The goal of hormonal intervention is to promote estrogen stability and minimize these fluctuations.
- Successful treatment depends on reviewing a patient's lifelong history with hormones, including during puberty, menstruation, pregnancy, and past contraceptive use.
- Effective management often requires a team approach involving both a headache specialist and a menopause expert.
- The recent removal of the FDA black box warning for estrogen opens the door for more women to reap the benefits of estrogen therapy when it's introduced at an optimal time.

KEY TREATMENTS

- CGRP monoclonal antibodies (mAbs)
- CGRP small-molecule antagonists (gepants)
- Combined oral contraceptives
- Hormone therapy (HT)
- Intrauterine devices (IUDs)
- Oral estrogen (Premarin)
- Progestin-only pills
- Transdermal estrogen (patches and gels)
- Triptans

NOTABLE QUOTES

"Migraine is a biologic genetic disorder, that's what it is, and it has hormonal influences, and it's not anyone's fault."

"We have to really try to stop blaming stress as the major culprit, because there are plenty of women who have equal stress, but they didn't get the gene for migraine."

"I usually say that migraine does exactly as it pleases, and it's our role ... to try to help figure out what is our pattern truly like, and how can we partner with somebody who really wants to help us address that component of migraine treatment?"

PRACTICAL STEPS

- Keep a detailed headache diary that includes menstrual cycles and hormonal symptoms to identify individual triggers.
- Prioritize "nonpharmacologic" lifestyle foundations, including consistent sleep, hydration, and regular meal times, to support medical treatment.
- Discuss specific stroke risk factors, such as aura and smoking status, with a provider before starting any estrogen-containing therapy.
- If your primary doctor is hesitant about starting you on hormone therapy, look for a clinician certified by The Menopause Society for help.