Triptans are recommended by the 2013 Canadian Headache Society guidelines as a component of care for moderate to severe migraine sufferers. Between 43 and 76% of patients experience migraine relief at 2 hours after taking any type of available triptan. Triptans are equally or more effective for relieving migraines at 2 hours compared to other drugs such as acetaminophen, non-steroidal anti-inflammatory drugs, acetylsalicylic acid and ergots. Triptans are generally safe but excessive use can lead to medication overuse headaches.

Although guidelines recommend the use of triptans on 9 days per month or less, there are currently no quantity limits on publicly-funded triptans in Ontario.

Near the end of 2013, most triptans in Ontario were paid for by private drug plans or out-of-pocket. The overall volume of triptans dispensed through Ontario’s public drug plan is more than 5 times lower than the national average... but among those accessing publicly-funded triptans, Ontario dispenses more units of triptans per person compared to all other provinces studied.

Physicians may not prescribe triptans because:
- Triptans are perceived to be unsafe
- Alternative drugs are perceived to work just as well
- There is little awareness of how to access publicly-funded triptans

Ontarians without drug coverage often cannot afford triptans. Other less expensive drugs may not be optimal alternatives.

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How to use this information:
- Refer to the 2013 Canadian Headache Society Guidelines on the safe and appropriate treatment of migraines
- If patients are appropriate candidates, try them on triptans and monitor their response to these drugs. Switch triptan types if necessary to find the best triptan for a patient in terms of effectiveness and safety.
- Visit the Ontario Public Drug Programs website to learn how you can access triptans through the Ontario Drug Benefit, and which patients are eligible.