The Impact of Migraine on Europe

100m
adults across Europe aged 15-69 are estimated to have migraine

Migraine is the 2nd highest cause of years lived with disability worldwide & the highest among women aged 15-49

The direct and indirect costs of migraine are over €95bn per annum – 93% are due to indirect lost productivity costs

People with migraine are estimated to lose 2–7 workdays per year due to migraine and those with frequent migraine up to 46 workdays per year

The impact of migraine on work life

72% of people with frequent migraine feel that their migraine has impacted on their professional life

- 53% have difficulty concentrating at work
- 26% think their condition is misunderstood
- 24% feel judged for taking days off work
- 11% have changed jobs due to migraine
- 10% report losing jobs due to migraine

Although 63% of people with frequent migraine reported their condition to their employer only 18% were offered support

1 This is based on a prevalence of 28.5% amongst those aged 15-69 living in the European Union (EU), taken from the Global Burden of Disease (GBD) study 2017, which includes (a) individuals in the population who have had at least one episode in past 12 months fulfilling International Classification of Headache Disorders (ICHD) criteria and (b) 70% of instances of ‘medication overuse headache’, considered to be a sequel of migraine (see Sterner et al., 2018, Global, regional, and national burden of migraine and tension-type headache, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. The Lancet Neurology, 17(11), 954–976); GBD 2017; This figure has been calculated using cost estimates provided by the EuroLight study which, on the basis of a 15% adult migraine prevalence (derived from a systematic review of studies), estimated that migraine costs the EU €60 billion per annum. Using these cost data, this figure was re-calculated using the GBD 2017 prevalence estimate for the EU (28.5%), resulting in an estimated cost of €97 billion per annum; *Linde, M., Gustafsson, A., Sterner, L., Sterner, T., J. Barnett, J., Katsarava, Z., Andre, C. (2012). The cost of headache disorders in Europe: The EuroLight project. European Journal of Neurology, 19(5), 703–711; 'Sterner, L. J., Andre, C., & Andre, C. (2008). Impact of headache in Europe: a review for the EuroLight project. J Headache Pain, 9(5), 139–146; *At least four ‘migraine days’ a month; *Results from the ‘My Migraine Voice’ survey (for Europe), conducted between 2017-18 (comprising more than 11,000 people who had at least four ‘migraine days’ per month from 31 countries)
Improving the Experience of Work for People with Migraine

What is migraine?

Migraine is a serious neurological condition associated with recurrent and debilitating headaches of moderate to severe intensity that can affect the ability to perform daily activities.

The Work Foundation has conducted research to explore how to improve the experience of work for people living with migraine. It had three aims:

1. Demonstrate that migraine is a serious condition with a substantial — but addressable — cost and impact on individuals’ working lives.

2. Establish what a ‘migraine friendly’ workplace looks like.

3. Recommend what steps can be taken to make workplaces more migraine friendly and thus improve the experience of work for people with migraine.

What does a ‘migraine friendly’ workplace look like?

People with migraine can benefit from ‘good’ work and ‘high performance working’ practices:

- Increased autonomy and control helps manage workload and perceived triggers.
- Manageable demands reduces the risk of stress (a trigger).
- Social support from managers and colleagues helps with condition management.
- Workplace flexibility to manage hours more easily and work from home.

An effective workplace health management system:

- Promote good health and wellbeing educating employees on how to live a healthy lifestyle and manage health conditions.
- Take preventative action which enables early identification of a health issue and referral to a specialist if needed and intervene.
- Ongoing health management to sustain performance over time ensuring effective case management.

Access to reasonable adjustments:

- Disregard disability-related sickness absence.
- Flexible working practices.
- Provide access to drinking water.
- Access to a quiet room.
- Time off for medical appointments.

How to improve work-related outcomes for people with migraine in Europe

A range of policy options can be deployed (in different ways and/or adapted) by policymakers at EU and/or Member State level to improve the experience of work for people living with migraine.

Making laws compelling or obliging different actors (e.g. employers) to act more responsibly. European standards set a minimum legal ‘duty of care’ safeguarding workers’ rights.

Advice and guidance through the sharing of good practice, information and training to secure better work practices by influencing employee and employer behaviour, equipping them with tools to manage migraine in the workplace effectively.

EU and national strategies and targets, supporting data collection, monitoring and reporting, provide overall coordination, oversight of national policies and help track progress to ensure better employment outcomes.

Specific employment programmes delivering better working practices job retention and/or specific support to aid a quick – and sustained – return to work.

Awareness raising and campaigning to promote high standards in working conditions, promoting ‘migraine literacy’ among employers and supporting a ‘culture of care’, risk prevention, and better health management at work.

Read the full report at www.theworkfoundation.com