CLAIMS

What is claimed is:

1. Use of an anti-CGRP antibody or anti-CGRP antibody fragment in the manufacture of a medicament for treating or preventing medication overuse headache in a patient in need thereof, wherein said anti-CGRP antibody comprises the light chain CDR 1, 2, and 3 polypeptide sequences of SEQ ID NO: 224; SEQ ID NO: 226; and SEQ ID NO: 228, respectively and heavy chain CDR 1, 2, and 3 polypeptide sequences of SEQ ID NO: 204; SEQ ID NO: 206; and SEQ ID NO: 208, respectively.

2. The use of claim 1, wherein said anti-CGRP antibody comprises the variable light chain polypeptide of SEQ ID NO: 222 and the variable heavy chain polypeptide of SEQ ID NO: 202.

3. The use of any one of the foregoing claims, wherein said anti-CGRP antibody comprises the heavy chain polypeptide of SEQ ID NO: 201 or SEQ ID NO: 566.

4. The use of any one of the foregoing claims, wherein the anti-CGRP antibody is to be administered in an amount between 100 mg and 300 mg, or is about 100 mg, or is about 300 mg.

5. The use of any one of the foregoing claims, wherein said patient is a chronic migraine patient or episodic migraine or cluster headache patient at risk of developing medication overuse headache.

6. The use of any one of the foregoing claims, wherein said medication overuse headache comprises (a) headache occurring on 15 or more days/month in said patient, wherein said patient has a pre-existing headache disorder; and (b) overuse by said patient for more than 3 months of one or more drugs taken for acute and/or symptomatic treatment of headache.

7. The use of any one of the foregoing claims, wherein said medication overuse comprises use of ergotamine on 10 or more days/month, use of a triptan on 10 or more days/month, use of one or more non-opioid analgesics (such as paracetamol (acetaminophen), acetylsalicylic acid (aspirin), another NSAID, or another non-opioid analgesic) on 15 or more days/month, use of one or more combination-analgesics (as further described below) on 10 or more days/month, use of one or more opioids on 10 or more days/month, or use of a combination of two or more drug classes (as further described below) on 10 or more days/month, wherein said triptan use optionally comprises use of one or more of sumatriptan, zolmitriptan, naratriptan, rizatriptan, eletriptan, almotriptan, and frovatriptan, and/or wherein said opioid use optionally comprises use of one or more of oxycodone, tramadol, butorphanol, morphine, codeine, and hydrocodone.

8. The use of any one of the foregoing claims, wherein said medication overuse headache comprises ergotamine-overuse headache, triptan-overuse headache, non-opioid analgesic-overuse headache, opioid-overuse headache, combination-analgesic-overuse headache, medication-overuse headache attributed to multiple drug classes not individually overused, medication-overuse headache attributed to unspecified or unverified overuse of multiple drug classes, or medication-overuse headache attributed to other medication, wherein said triptan use optionally comprises use of one or more of sumatriptan, zolmitriptan, naratriptan, rizatriptan, eletriptan, almotriptan, and frovatriptan, and/or wherein said opioid use optionally comprises use of one or more of oxycodone, tramadol, butorphanol, morphine, codeine, and hydrocodone.

9. The use of claim 8, wherein said non-opioid analgesic-overuse headache comprises paracetamol (acetaminophen)-overuse headache, non-steroidal anti-inflammatory drug (NSAID)-overuse headache such as acetylsalicylic acid (aspirin)-overuse headache, or other non-opioid analgesic-overuse headache.

10. The use of claim 8, wherein said triptan-overuse headache comprises headache occurring on 15 or more days/month and use of one or more triptans on 10 or more days/month for more than 3 months, wherein said triptan use optionally comprises use of one or more of sumatriptan, zolmitriptan, naratriptan, rizatriptan, eletriptan, almotriptan, and frovatriptan.

11. The use of claim 8, wherein said non-opioid analgesic-overuse headache comprises headache occurring on 15 or more days/month and use of one or more non-opioid analgesics (such as paracetamol (acetaminophen), acetylsalicylic acid (aspirin), another NSAID, or another non-opioid analgesic) on 15 or more days/month for more than 3 months.

12. The use of claim 8, wherein said combination-analgesic-overuse headache comprises headache occurring on 15 or more days/month and use of one or more combination-analgesics on 10 or more days/month for more than 3 months, wherein said combination-analgesic comprises drugs of two or more classes, each with analgesic effects (for example, paracetamol and codeine) or acting as adjuvants (for example, caffeine), optionally wherein said combination-analgesics combine non-opioid analgesic includes at least one opioid (such as tramadol, butorphanol, morphine, codeine, hydrocodone, or any combination thereof), barbiturate such as butalbital and/or caffeine.

13. The use of claim 8, wherein said opioid-overuse headache comprises headache occurring on 15 or more days/month and use of one or more opioids (such as oxycodone, tramadol, butorphanol,

morphine, codeine, hydrocodone, or any combination thereof) on 10 or more days/month for more than 3 months.

14. The use of claim 8, wherein said medication-overuse headache attributed to multiple drug classes not individually overused comprises headache occurring on 15 or more days/month and use of any combination of ergotamine, triptans (such as sumatriptan, zolmitriptan, naratriptan, rizatriptan, eletriptan, almotriptan, frovatriptan, or any combination thereof), non-opioid analgesics and/or opioids (such as oxycodone, tramadol, butorphanol, morphine, codeine, hydrocodone, or any combination thereof) on a total of at least 10 days/month for more than 3 months.

15. The use of claim 8, wherein said medication-overuse headache attributed to unspecified or unverified overuse of multiple drug classes comprises headache occurring on 15 or more days/month and use of any combination of ergotamine, triptans (such as sumatriptan, zolmitriptan, naratriptan, rizatriptan, eletriptan, almotriptan, frovatriptan, or any combination thereof), non-opioid analgesics and/or opioids (such as oxycodone, tramadol, butorphanol, morphine, codeine, hydrocodone, or any combination thereof) on at least 10 days/month for more than 3 months, wherein the identity, quantity and/or pattern of use or overuse of these classes of drug is not reliably established.