

PRÊMIO RECEBIDO POR AUTORES CEFALIATRAS BRASILEIROS

## The Charles R. Ream, MD, Award for Excellence – 2003

The editorial board of *Current Therapeutic Research*® considered a number of papers for the fourth annual Charles R. Ream, MD, Award for Excellence. Many were worthy to be chosen. However, for a number of reasons outlined below, “Intravenous Lysine Clonixinate for the Acute Treatment of Severe Migraine Attacks: A Double-Blind, Randomized, Placebo-Controlled Study,” by Krymchantowski and Silva,<sup>1</sup> was selected as the winner.

The investigators chose to treat severe migraine headaches with a non-steroidal anti-inflammatory drug (NSAID). Heretofore, only milder migraine headaches have been treated with NSAIDs, and treatment has generally been delivered orally. In this case, however, the authors addressed the question of whether an IV NSAID can help patients with severe migraine.

Among the interesting design features of this study was an unusual randomization scheme. The first 2 patients were given lysine followed by 3 patients on placebo and then 3 in the lysine group. However, the physician who prepared the medications did not assess the patients. Thus, the observers remained unaware of treatment assignment. A suitable – and many think proper – end point, *pain-free* status, was chosen. This end point is unequivocal and lends itself to assessment based on the percentage of patients in each treatment group who achieved the pain-free state. Having these data in hand, physicians can rationally discuss with the patient his or her chance of receiving the desired treatment outcome. In addition, the reduced use of rescue medication significantly indicated that treatment was superior to placebo. Unfortunately, there was no long-term follow-up and there were no questions about whether the patients would be interested in continuing to use the study medication. The authors recognized these issues and were frank about them in the discussion section of the article.

The paper was well written. Dropouts were discussed in the abstract, adverse events were clearly presented, and the appropriately couched conclusions were not overblown. Although the authors had demonstrated that IV lysine was effective and reasonably well tolerated in their study group, they concluded that IV NSAIDs “cannot be used routinely in the outpatient environment” and recommended a search for better medications in the NSAID class.

This paper is a solid contribution to the literature. It follows the high standards established by Dr. Ream and continued by the journal: the study was well designed and well carried out, and the results were written so they could be read easily and so they dealt with some important facts (eg, study details, dropouts, responder analysis, discussion of institutional approval). Many of these features are outlined in the guide to authors found on the journal’s Web site (<http://www.CurrentTherapeuticRes.com>).

The winners will receive a crystal globe representative of the international role of *Current Therapeutic Research*® and of their contribution to worldwide medical research. In addition, they will receive a certificate and the thanks of the editorial board, staff, and publishers of the journal, as well as from the readers of *Current Therapeutics Research*®, for their fine work.

*Michael Weintraub, MD*  
*Editor-in-Chief*

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### Reference

1. Krymchantowski AV, Silva MT. Intravenous lysine clonixinate for the acute treatment of severe migraine attacks: a double-blind, randomized, placebo-controlled study. *Curr Ther Res Clin Exp* 2003;64:505-513.