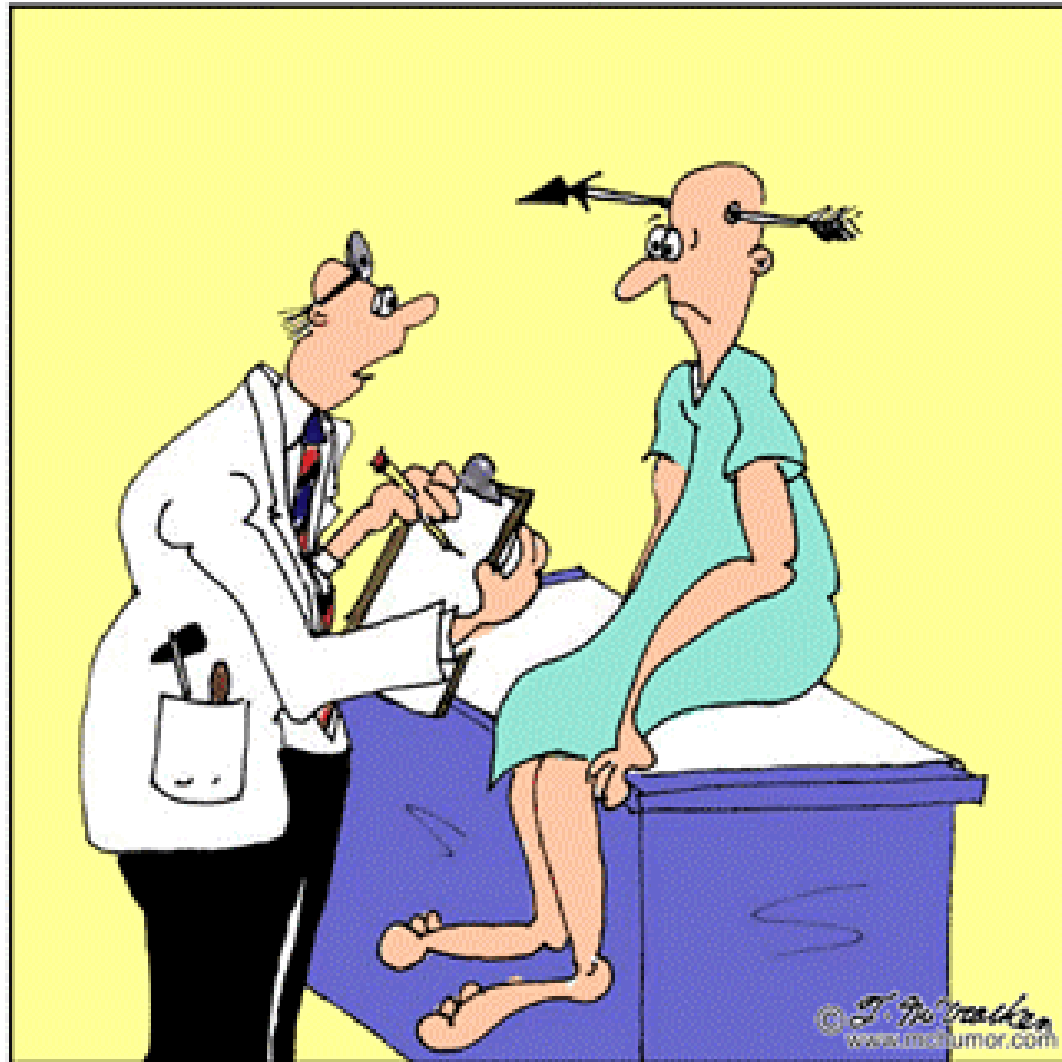


MCHUMOR

by T. McCracken



“Off hand, I'd say you're suffering from an arrow through your head, but just to play it safe, I'm ordering a bunch of tests.”

Headaches



Dr Lawrence Gould

Headaches

- 20-30% of all neurology referrals
- Importance of taking proper
- history

Headaches

Questions for patients presenting with headache

- Age, occupation, general history
- How old was the patient when the headaches began?
- Do the headaches occur in attacks?
- How frequent are the headaches?
- How long do they last if untreated?
- Where in the head is the pain?
- Is it throbbing? Is it worse on exercise?
- Is there nausea or vomiting?
- Are any focal symptoms (e.g. visual, sensory or speech disturbances) related to the attacks?
- What acute treatments have been tried?
- What long-term treatments have been tried?
- Is the patient taking the oral contraceptive pill or other hormones?



- LW
- 48 Military tactician
- 9 months continual h/a
- Severe exacerbations
- Assoc n/v & photophobia
- Eased by analgesics
- PH migraine

Analgesic Headache

- Chronic syndrome
- Background daily pain
- Superimposed exacerbations
- Frequent analgesic or triptan use
- Withdrawal with TCADs or steroids
- Diary



- Mr DT
- 56yr market trader
- 3 year Hx headache
- 6 weeks severe retro-orbital pain
- Associated nausea
- Drinks 6 pts lager/day

Cluster Headache



- Young men – alcohol
- Severe pain
- Retro-orbital
- Movement
- Autonomic features
- Periodicity
- Late Chronicity

Cluster Headache – acute treatment



- Sumatriptan –s/c or i/n
- High flow 100% oxygen
- 4-6% Lignocaine drops

Cluster Headache – Long term treatment



- Prednisolone
- Verapamil
- Lithium
- Methysergide
- Pizotifen
- Anti-epileptics
- Clonidine
- Surgery

- Ms PS
- 46 single Editor
- 2 episodes severe abrupt onset h/a
- Short duration
- Stereotyped trigger



honee?



not now, i has headache.

Headaches associated with exertion

- Cough, coital or exercise
- Positional
- Intense short lived
- Recurrent
- If 1 or 2 attacks investigate
- Indomethacin, nifedipine or beta-blocker

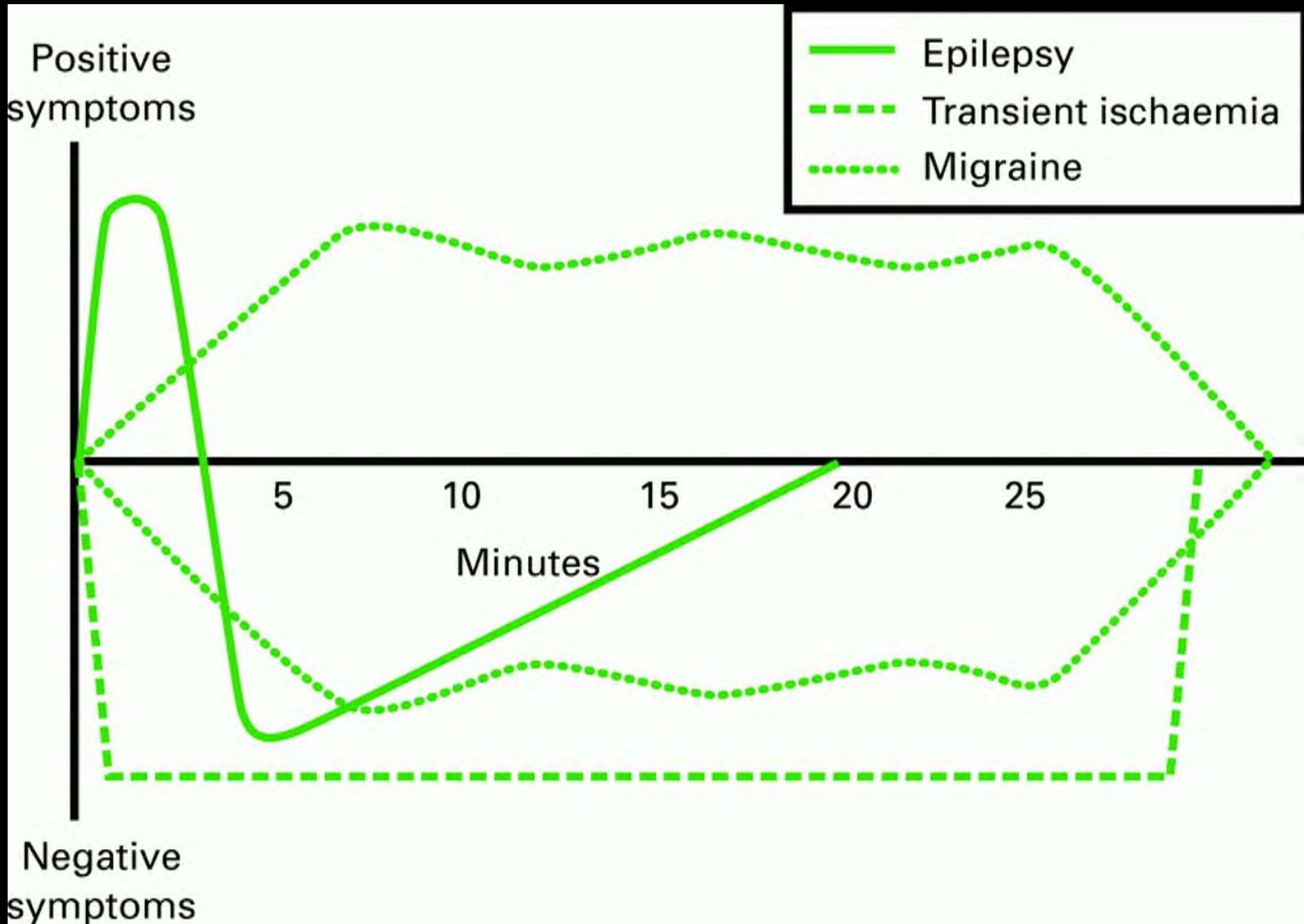
- 52 long suffering housewife
- 2 episodes of left sided paraesthesiae
- PH - hypertension



Migraine Equivalents



- Migraine aura
- Peri-menopausal
- PH migraine
- Differential - ischaemia



Migraine Treatment - Lifestyle



- Diet
- Alcohol
- Caffeine
- Environment
- Sleep/stress
- Exercise
- Trauma

Migraine Treatment - Acute

- Non-pharmacological
- Treat early (max 2-3x/week)
- Adequate dose of analgesic
- Add anti-emetic
- Oral triptans
- Parenteral triptan
- Back-up/adjunct

Migraine Treatment - Prophylactic

- TCAD
- Beta-blocker
- Pizotefen
- Valproate
- Topiramate
- Gabapentin
- Riboflavin, Mg, CoQ
- PFO

Headaches to Refer

- First or worst headache
- Sudden onset
- Awoken by headache
- Temporal artery tenderness
- Focal neurology
- Meningism
- Seizures
- Recent onset progressive headache