Episodic headache

History: onset, severity, frequency, duration, triggers, medications

Examination: neuro exam, BP

Migraine with/without aura
Diagnosis:
- Headache lasts 4-72 hrs (untreated) with at least two of: unilateral, pulsating, moderate/severe pain, aggravation by physical activity.
- Nausea/vomiting or photophobia/phonophobia

Treatment
- Acute: NSAID +/- Domperidone 10mg (noting MHRA guidance). Triptans
- Limit analgesics/triptans to 2 days/week
- Preventative: propranolol up to 40mg tds (if no asthma) or amitriptyline up to 1mg/kg/day

Cluster Headache
Diagnosis:
- 1-8 attacks/day
- Severe, unilateral pain lasting 15-180 mins with one of: ipsilateral lacrimation, conjunctival injection, nasal congestion/rhinorhoea, ptosis, flushing.
- Agitation or restlessness

Treatment
- s/c or nasal sumatriptan / nasal zolmitriptan.
- High flow rate oxygen 10-12 L/min with non-rebreather mask.
- Refer for diagnosis

Tension type headache
Diagnosis:
- Bilateral, featureless
- Mild/moderate

Treatment
- NSAID / paracetamol (< 2x week)
- Amitriptyline if preventative required

Chronic headache (>15 days/month)

Chronic migraine
Medication-overuse headache
Chronic tension-type headache

Treatment
- Limit analgesics/triptans to 2 days/week (to prevent medication-overuse headache)
- Initiate preventative depending on headache diagnosis

Trigeminal neuralgia
Carbamazepine 100mg-400mg bd or Gabapentin 100mg tds -1200mg tds

Red flags – urgent referral
- Thunderclap headache/subarachnoid haemorrhage
- Impaired level of consciousness / fever
- New-onset neurological deficit/papilloedema
- New-onset cognitive dysfunction /change in personality
- Symptoms suggestive of giant cell arteritis (jaw claudication, ↑ESR)
- New onset headache in immunocompromised/malignancy
- Recent head trauma
- New onset headache in patients>50 yr old
- Symptoms and signs of acute narrow-angle glaucoma (unilateral, painful red eye)
- Headache with prolonged or atypical aura (> 1 hour or motor weakness)
- Progressive headache worsening over weeks
- Headache triggered by cough / Valsalva /postural

Other headaches
- ?cause

Refer to headache/neurology clinic

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