

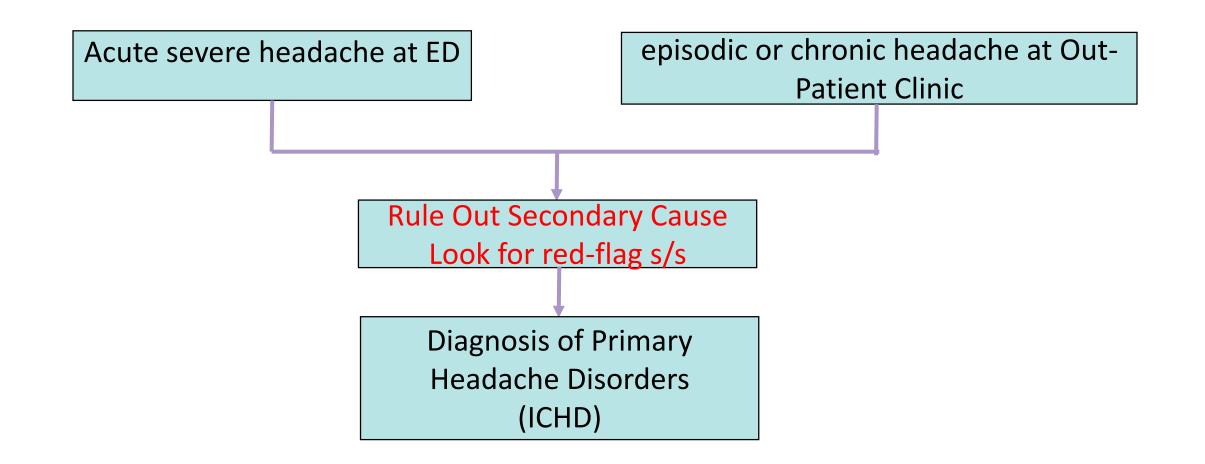
Other Types of Primary Headache Disorder

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Diagnosis of Headache



Secondary causes to rule out

Vascular cause

- Subarachnoid haemorrhage
- Cerebral venous thrombosis
- Reversible vasoconstriction syndrome

Nonvascular

- Disorder of CSF pressure

- Meningitis

- Sphenoid sinusitis

- Cervical facet disease

- Giant cell arteritis

- Carotid or vertebral artery dissection

- Intracranial neoplasm

27-year-old lady

- Intractable chronic headache for 4 months
- Refractory to numerous standard preventive therapies
- With background history of infrequent migraine without aura 1-2 times per year
- Woke up with a severe headache that had persisted
- Preceded by a very stressful event in the family
- Character of headache intense and pounding ,whole head, aggravated by routine activity,
- Nausea and sensitivity to light and sound.
- Denied red flag features pulsatile tinnitus, double vision and transient darkening of vision



Evaluation

MRA, MRV, CT Angio – Normal

LP – Normal

Routine lab – Normal

ANA, ESR, CRP - Normal

D DX

1.Chronic migraine

2.Chronic tension type headache

3.New daily persistent headache

Clinical Characteristics of new daily persistent headache



- Head pain more than 3 months that is constant
- Unremitting from onset or within 24 hours of onset
- No completely characteristic features, although migrainous features such as photophobia, phonophobia, nausea are frequently described
- Female predominance with F:M ratio 1.4-2.5
- Onset of pain is clearly remembered by the patient , although fewer than half of patients recall a triggering event

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A 26-year-old man

- Sudden onset of headache after lifting of serial increased weight during work out session at Gym.
- Headache is pulsating in character, mostly over the back of head and neck
- Lasts for about 48 hours with reduction in intensity
- No nausea and vomiting, No blurred vision
- Recurred when he does work-out session with weight-lifting after one week

Examination - NAD

MRI ,MRA and MRV - Normal Routine blood tests - Normal

Primary Exercise headache

Criteria

- A single headache episode fulfilling criterion headache brought on by and occurring only during or after strenuous physical exercise and Lasting <48 hours
- At least two headache episodes Headache Brought on by and occurring only during or after strenuous physical exercise
- Not fulfilling ICHD-3 criteria for any other headache disorder
- ✓ Not better accounted for by another ICHD-3 diagnosis.



Primary Exercise headache



- Occurs particularly in hot weather or at high altitude
- Subtypes such as 'weightlifter's headache' are also recognized.
- Is usually precipitated by sustained physically strenuous exercise.
- There are reports of prevention in some patients by ergotamine tartrate.
- Indomethacin has been found effective in most of the cases.

Other Primary Headache Disorder

1. Headaches associated with physical exertion

- Primary cough headache,
- Primary exercise headache,
- Primary headache associated with sexual activity
- Primary thunderclap headache

2. Headaches attributed to direct physical stimuli (considered to be primary headache disorders because they are brought on by physiological [non-damaging] stimuli)

- Cold-stimulus headache
- External-pressure headache

Cont: Other Primary Headache Disorder

- 3. Epicranial headaches (i.e. head pain over the scalp)
 - Primary stabbing headache
 - Nummular headache

- 4. Other miscellaneous primary headache disorders
 - Hypnic headache
 - New daily persistent headache

Other Primary Headache Disorder

-This category includes a diverse group of headache disorders that have implications for evaluation and management.

- Familiarity with this group of headache disorder has immediate implications for provision of safe and effective care of patients with headache.

Ref

Headache Classification Committee of the International Headache Society (IHS) The International Classification of Headache Disorders,3rd edition Cephalalgia,2018, Vol. 38(1) 1–211,

Summary

- Headaches with similar characteristics to above-mentioned primary headache can be symptomatic of another disorder (i.e. secondary headaches); when they first present, they demand careful evaluation by imaging and/or other appropriate tests.
- The onset of these headache can be acute, and affected patients can present to emergency departments.
- Appropriate and full investigation (neuroimaging, in particular) is mandatory in these cases.
- Careful history taking, physical examinations and looking for the red flags are the keys to have the correct diagnosis.





