Headaches Cheat Sheet

by Siffi (Siffi) via cheatography.com/122609/cs/22840/

Recurrent Headaches

Migraine
Trigeminal autonomic Cephalgia
Tension Type

Daily/Constant Headaches

Chronic	New
Medication overuse	SAH
Hemicrania Contiua	Meningitis
Tumour	Raised ICP
	Low Pressure HA
	Giant Cell Arteritis

Structures that cause HA

Neck
Eyes
Teeth
TMJ

Difference between migraine + TIA

Migraine	TIA
Multiple previous episodes	New Event
Gradual onset	Sudden Onset
Short duration	Lasts 24 hours
Progression + regression pattern	No increasing/decreasing symptoms

Examination - MSK

Postural abnormalities:
Flattened tx spine
Forward Head
Increased Lordosis
Kyphosis/scoliosis
Rotated Pelvis
Upper Cervical Pain Sign
Tenderness over C2/C3/Reproduction of HA = Cervicogenic

Examination - Serious HA

Gait
Stance
Posture
Temperature
Blood Pressure
General Obs
CN Screening:
Facial symmetry/drooping
Ptosis
Size & Shape of Pupils
Active facial movements
Pupillary light reaction & Accommodation
Ocular position + EOM
Fundoscopy
TMJ Exam
Otoscopy
Cx Spine Screening
Palpation of: Lymph nodes, scalp tenderness, temporal arteries and sinuses
Upper & Lower Limb reflexes (Plantar Response)
Upper and Lower Limb Strength Testing
Nuchal Rigidity (Kernig's + Brudzinksis)

Red/Orange Flags

Orange Flags	Red Flags	Related HA
Systemic Symptoms + Fever	Neoplasm in history	Neoplasms + metastasis
	Neurological deficit	Intracranial disorders
	Onset - Sudden/Severe	SAH/vascular
	>50 years old	Neoplasms,GCA, other vascular disorders
	Pattern change/recent onset	Neoplasms/vascular/non-vascular disorders
	Positional HA	Intracranial Hyper/hypotension
	Precipitated by Valsalva movements	Posterior fossa malformations

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Red/Orange Flags (cont)

Papilloedema	Intracranial hypertension
Progressive HA	Neoplasms/nonvascular
Pregnancy	Preeclampsia/cerebral sinus thrombosis/hypothyroidism, anaemia, diabetes
Painful eye + Autonomic features	Posterior fossa pathology, pituitary/cavernous sinus
HA after trauma	Subdural Haematoma + vascular HA
Pathology of immune system	Opportunistic infections
Medication overuse	Drug incompatibility, overuse HA
Systemic Symptoms	- Infection/nonvascular intracranial disorders

Further Investigations

FBC	Infection + anaemia
ESR/CRP	Temporal artertis/infection/inflammatory, malignancy, multiple myeloma
MRI	
CT	

Guidelines for CT & MRI

- Unexplained/Abnormal Vital Signs
- Decreased Alertness/Cognition
- Onset of HA with exertion
- S&S of increased intracranial Pressure
- HA worsens under observation
- Nuchal Rigidity
- Focal Neuro Signs
- First Severe HA in patient >50y
- Sudden Onset of "worst HA ever"

Referrals

Thunderclap	**REFER IMMEDIATELY TO HOSPITAL - 999**
CNS infection	**REFER IMMEDIATELY TO HOSPITAL**
Raised ICP	Refer **Urgently** for specialist assessment (A&E/urgent same day GP)
Trigeminal autonomic Cephalgia	Refer for specialist assessment - GP
Giant Cell Arteritis	Refer **urgently** for specialist assessment (urgent/same day GP)
Intracranial Hypotension	Refer for specialist assessment - GP

- Complicated Migraine
- Uncertain Diagnosis
- Headaches increasing in frequency
- Psychological factors
- Chronic, daily HA - needs multidisciplinary care
- Unresponsive to conservative care

Referral Patterns

Type of Headache	Site	Radiation
Migraine	temporofrontal region - UNILATERAL	Retro-orbital + occipital
Cluster	Over/above one eye	Frontal + Temporal Regions
Cervicogenic	Occipital Region	Parietal region - unilateral, vertex/skull, behind the eye
Temporal arteritis	Forehead & Temporal	Down side of head
Tension	frontal, over forehead & temples	occipital

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