

Priority Topic: HEADACHE

Key Features:

A useful way to study this topic is to make a table with all the possible diagnoses and their appropriate investigations and treatments

1. Given a patient with a new-onset headache, differentiate **benign from serious pathology** through history and physical examination.

What you should study:

- ✓ [Approach to Acute Headache AAFP 2013](#)
- ✓ [Migraine AIM 2017](#)
- ✓ [Chronic Daily Headache AAFP 2014](#)

2. Given a patient with worrisome headache suggestive of **serious pathology** (e.g., meningitis, tumour, temporal arteritis, subarachnoid bleed):

- a) Do the **appropriate work-up** (e.g., biopsy, computed tomography [CT], lumbar puncture [LP], erythrocyte sedimentation rate).
- b) Make the **diagnosis**.
- c) Begin timely appropriate **treatment** (i.e., treat before a diagnosis of temporal arteritis or meningitis is confirmed).
- d) **Do not assume** that relief of symptoms with treatment excludes serious pathology.

What you should study:

- ✓ [Giant Cell Arteritis AIM 2016](#)
- ✓ [Meningitis Primer NATURE 2016](#)
- ✓ [Primary Brain Tumour Dx and Tx AAFP 2016](#)
- ✓ [Non-traumatic Subarachnoid Hemorrhage AAFP 2013](#)
- ✓ [EM Cases Episode 14 Part 1: Migraine and SAH](#)

3. Given a patient with a history of **chronic and/or relapsing headache** (e.g., tension, migraine, cluster, narcotic-induced, medication-induced), **treat appropriately**, and avoid narcotic, barbiturate dependence.

What you should study:

✓ [Chronic Daily Headache AAFP 2014](#)

4. In a patient with a history of suspected subarachnoid bleed and a negative CT scan, **do a lumbar puncture**.

What you should study: It is now generally accepted that a negative CT Head within 6 hours of typical headache onset effectively rules out subarachnoid hemorrhage

✓ [SAH - CT & LP for diagnosis AHA 2012](#)

5. In a patient suffering from **acute migraine** headache:

a) **Treat** the episode.

b) Assess the ongoing **treatment plan**. (referral when necessary, take a stepwise approach).

What you should study:

✓ [Migraine AIM 2017](#)

✓ [Acute Migraine Treatment AAFP 2018](#)