

Mastering Headache Assessment

RCP Nurses Headache Masterclass
03/10/2025

Declaration and conflict of interest

- Nil

Aims

1. A brief introduction to the science of headache and assessment.
2. My practical experience of a clinical service
 - General Neurology
 - Headache clinic
 - LP service
 - GON blocks
3. How to make neurological examination simple and meaningful

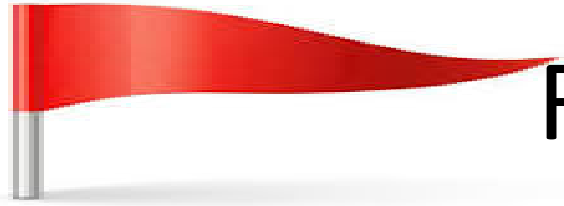
Science Of Headache

Headaches occurs

- When sensitive nerve endings called nociceptors react to headache triggers (such as stress, certain foods or odors, or use of medicines)
- These in turns send messages through the trigeminal nerve to the thalamus, the brain's "relay station" for pain sensation from all over the body (NINDS)

Good History Taking

Guides ones Assessment (Fawcett et al 2012 and smith 2003).



Red Flags

- **Age**
 - New onset or different headaches in a person >50yrs
- **Onset**
 - Sudden, abrupt onset of a severe headache (thunderclap headache)
- **Severity**
 - “Worst headache of my life”
- **Progression**
 - Headaches that are rapidly getting worse over time
- **Systemic symptoms**
 - Fever, neck stiffness, rash, weight loss
- **Neurological signs**
 - Papilloedema, focal signs, confusion, impaired consciousness
- **Aura**
 - Fixed or prolonged aura >1 hour
- **Triggers**
 - Headaches that start with exercise, sexual intercourse, coughing or sneezing
 - Alters with position (orthostatic headache)
- **Risk factors for 2° headaches**
 - HIV, cancer, malignant hypertension, post-traumatic headache

Migraine aura v TIA

1. Tightly time locked 10-30mins
2. Moves /spreads
3. Positive phenomena lights not darkness

Neurological assessment

Video

- Inspection-look for asymmetry and neurology look at shoulder and upper limbs
- Palpation-skeletal structures spinous process cervical intrathoracic facets shoulder joint and surrounding skeletal structures, Sinuses, TMJ, Muscles-temporalis and masseter, Scalp
- Movement- neck, shoulder, upper limbs, TMJ
- Reflexes, coordination, provocation, sensation
- Cranial nerves examination
- Eyes and funduscopy

Video



Remember Possible Sites of Pain

- EXTRACRANIAL

Muscles around scalp

Extra cranial arteries (GCA)

Nasal Sinuses

Orbits

TMJ

- INTRACRANIAL

Meninges

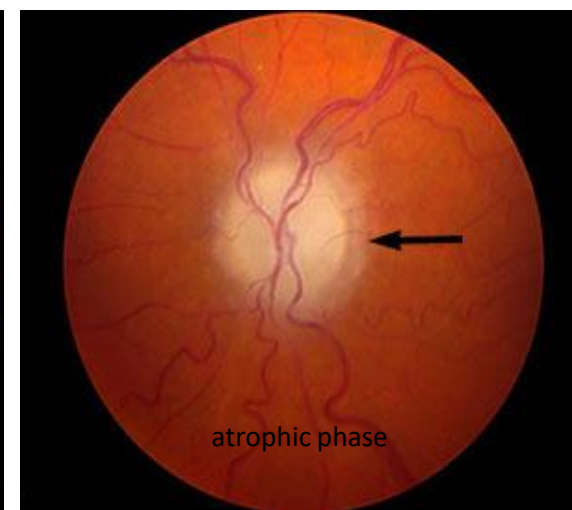
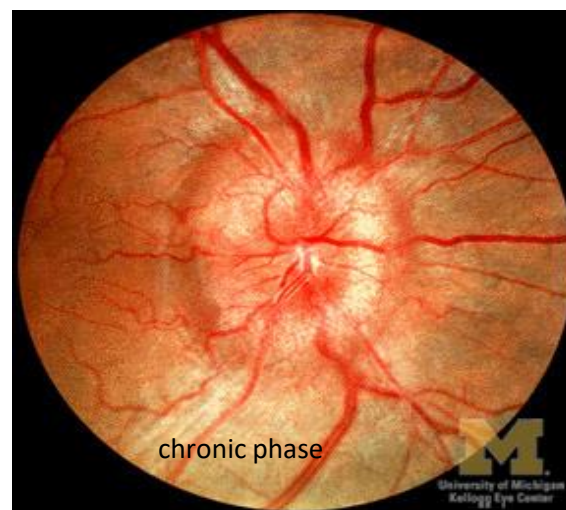
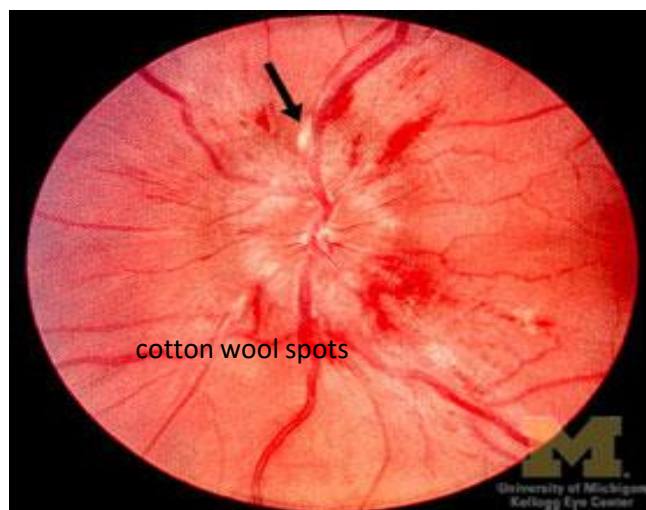
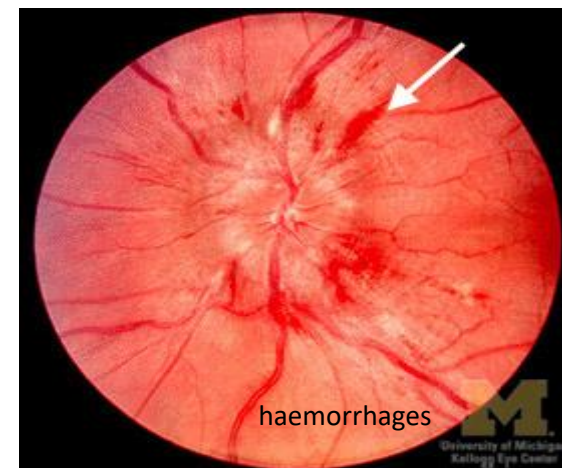
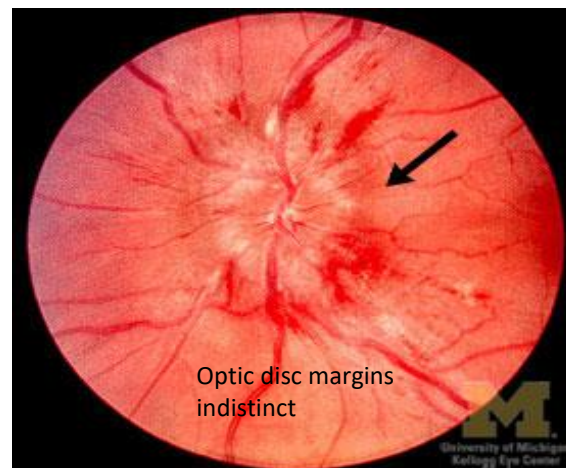
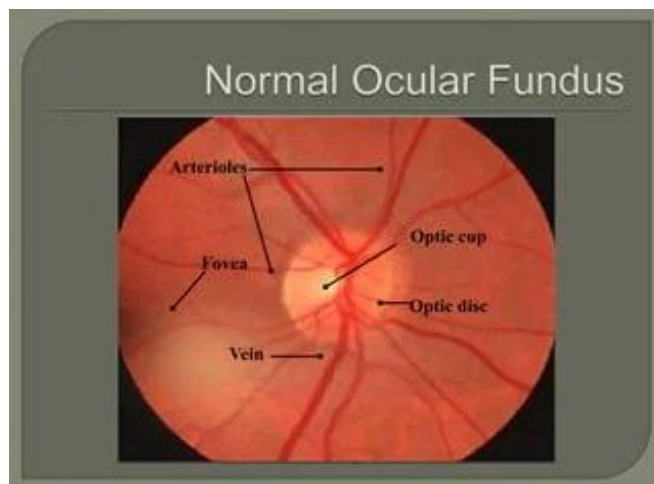
Large veins and venous sinuses

- Neck- Kids with medulloblastoma can present with neck pain

- Eyes

Fundoscopy and Papilledema

<https://kellogg.umich.edu/theeyeshaveit/opticfundus/papilledema.html>



Fundoscopy and Papilledema

- Patient may report transient black-outs of vision, especially upon standing
- Optic disc margins indistinct
- Optic disc elevated above retinal surface
- These signs may be ophthalmoscopically subtle
- In acute phase, may see hemorrhages and cotton wool spots
- In chronic phase, optic disc elevation and blurred margins, but no hemorrhages or cotton wool spots
- In atrophic phase (optic nerve axons have died), optic disc shows mixture of pallor and swelling
- Vision usually normal or near normal unless atrophy has set in

Don't Forget

- Blood pressure

Medication and Social History

- Not only advise on new medications but also advising on reducing or stopping medications/medication review
- Social history- about family, work, sleep, stress.

Take home message

- We can make neurological examination very difficult or very simple.
- Good history taking will guide your assessment and tests
- If in doubt do not hesitate to seek help.
- In my opinion holistic headache assessment also helps to formulate a better treatment plan.

References

1. Fawcett T *et al.*; Taking a patient history: the role of the nurse
Nursing Standard (2012)
2. Smith R; Thoughts for new medical students at a new medical
school. BMJ. 2003 Dec 20;327(7429):1430-3.
3. <https://kellogg.umich.edu/theeyeshaveit/opticfundus/papilledema.html>
4. <https://www.ninds.nih.gov/health-information/disorders/headache#:~:text=Headaches%20occur%20when%20pain%2Densitive,from%20all%20over%20the%20body.>

Any Questions

Thank You