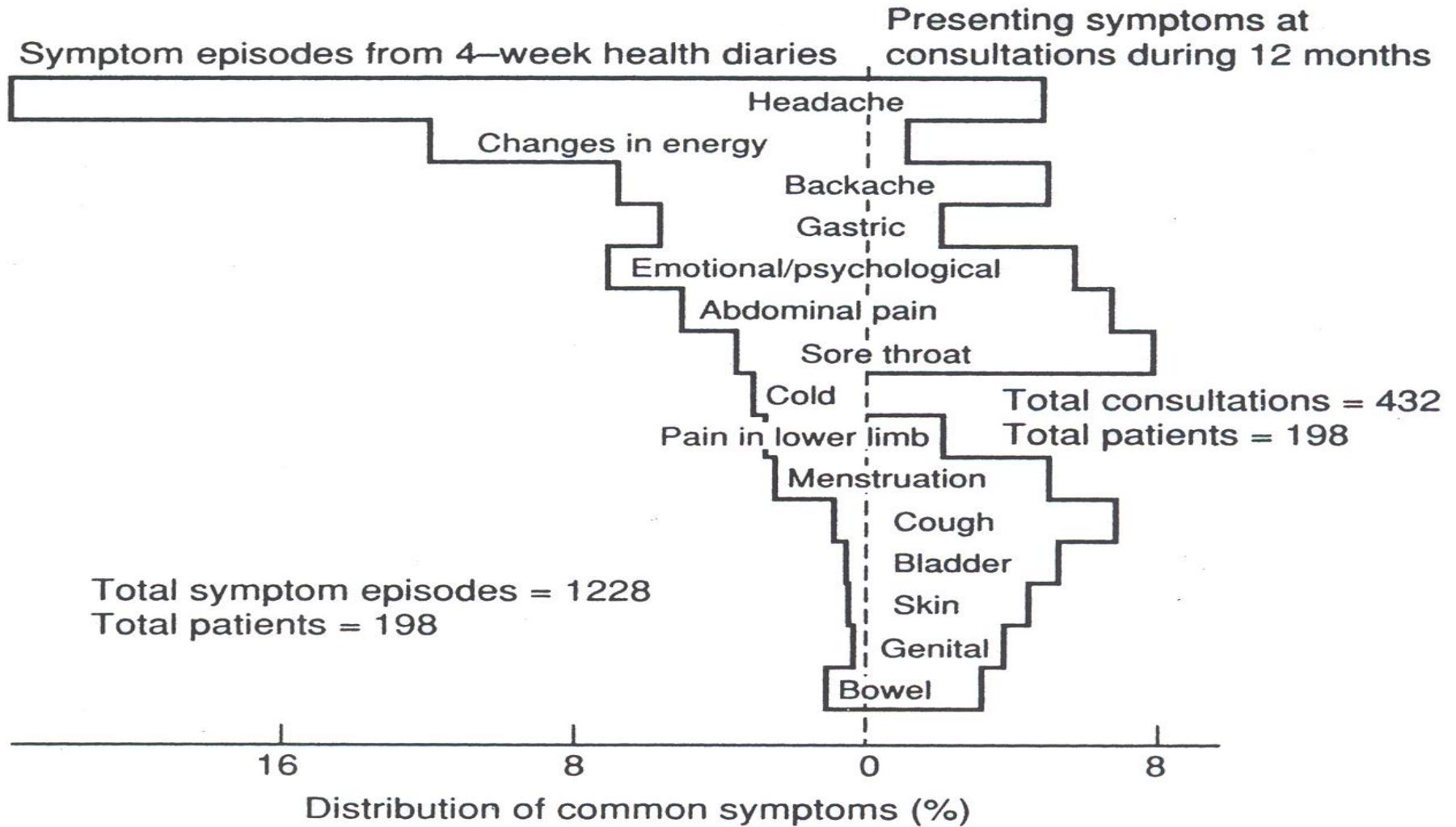


Headache: psychological aspects & management



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Frequency in Community & in GP



Relationship between episodes of symptoms recorded in health diaries and symptoms presented at consultations. (From Banks *et al.*, 1975. By permission of Oxford University Press.)

Social impact & cost

Headache/migraine: in **top 10 disabling** conditions (WHO)

Stovner et al Cephalalgia 2007

20% sickness absence due to HA in Denmark

Rasmussen et al J Epi Com Health 1992

Costs

Service costs for people consulting with headache = **£956 m**,

Total costs including **lost work time** = **£4.8 b**

80% of the total costs of headache due to **lost work time**

Costs are **higher** for older, those with- more severe pain scores, higher **anxiety** scores, **>14 dys pm** and those **referred**

McCrone et al J Headache Pain 2011

New and repeat visits to GPs by 10,000 pa

| Disease group | New or 1st ever episodes | Period prevalence |
|-------------------------------|---------------------------------|--------------------------|
| Migraine | 94 | 115 |
| Cerebrovascular disease | 51 | 71 |
| Neuropathy | 33 | 36 |
| Intervertebral disc disorders | 26 | 39 |
| Epilepsy | 12 | 36 |
| Dementia | 8 | 18 |
| Parkinson's disease | 5 | 15 |
| Multiple sclerosis | 2 | 7 |

Source – General Practice Morbidity Survey (1995)

Headache frequency

Headache the commonest 'neurology' symptom

- presenting to GPs RCGP *et al*: HMSO 1995
- 4% of adults consult GP for headache pa
- 97% headache managed by GP with no referral
- 2% headache referred to neurologists,
- 1% to other specialists Latinovic *et al*: JNNP 2005
- 2% referred to neurologists create 25% new neurology referrals Patterson & Esmonde: JNNP 1993

Diagnosis

- 70% of GP consulters for headache receive no specific diagnosis
Kernick et al BJGP 2008
- GP with SI are 3 times more than GPs to diagnose migraine
-
- 1/3 GP consulters have HA >14 days pm (CDH), not specifically diagnosed
Dowson et al
- 2/3 of those referred to headache clinic have CDH

Dowson et al Headache 2003

Comparison between GP & GPwSI classification

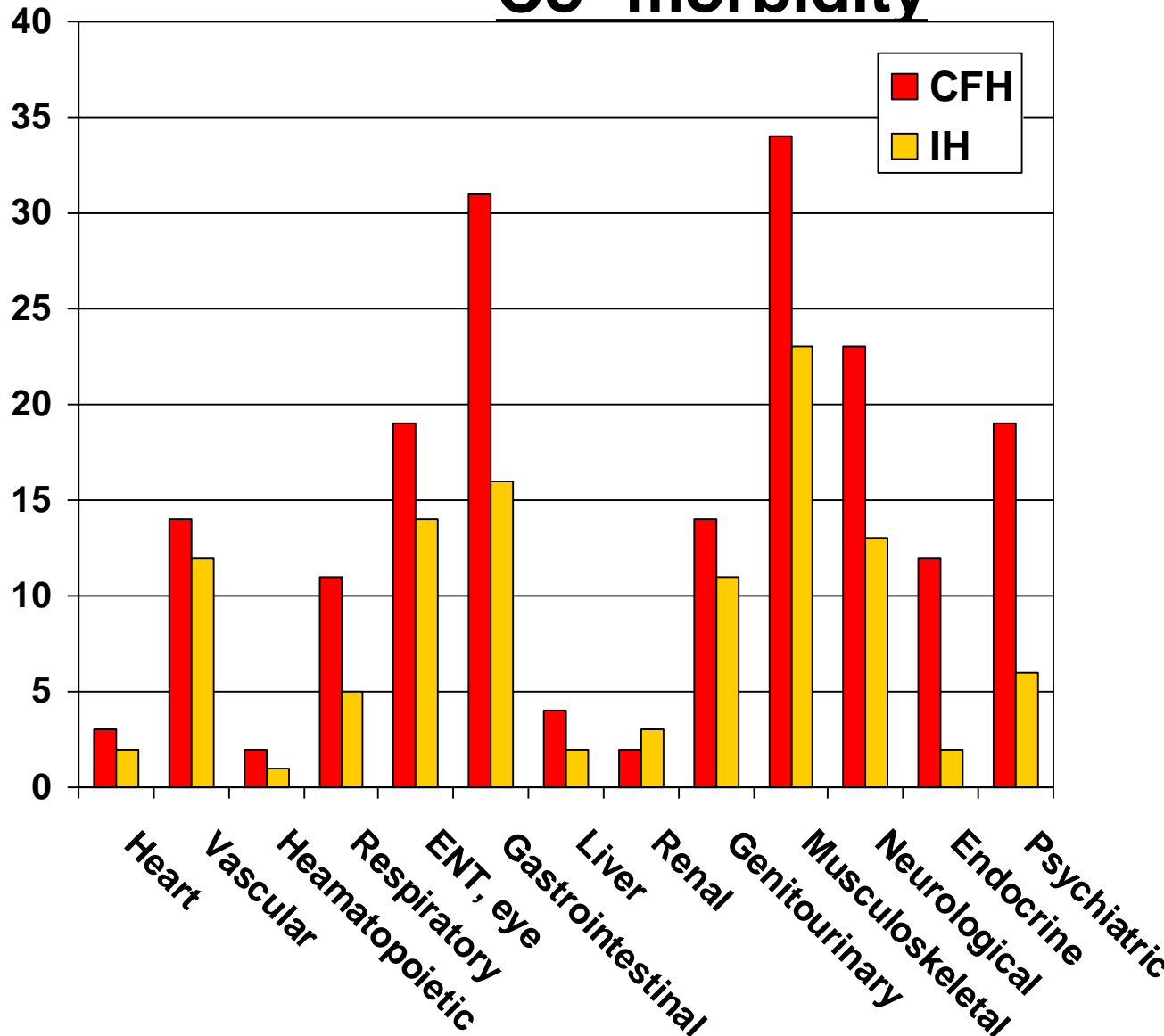
| | GP | GP | GP | |
|----------|-----------------|------------------|------------------|------------------|
| GPwSI | Migraine | Other headache | Tension headache | GPwSI Total |
| Migraine | 55 | 84 | 8 | 147 (62%) |
| CDH | 17 | 45 | 14 | 76 (32%) |
| other | 3 | 10 | 1 | 14 |
| Total | 75 (32%) | 139 (59%) | 23 | 237 |

Difference between patients in GP with CDH & migraine

| Patients characteristics | CDH n=78 | Migraine n=152 | P-value |
|-----------------------------|------------|----------------|---------|
| Headache disability (MIDAS) | 32 | 19 | 0.001 |
| Number of headaches (3mo) | 55 | 16 | <0.001 |
| Cases of anxiety | 37% | 23% | 0.04 |
| Cases of depression | 12% | 6% | 0.09 |
| Satisfaction with GP | 54% | 68% | 0.04 |

Why is Chronic Frequent Headache (>14d pm) different from infrequent headache (IH)?

Co-morbidity



50% CFH subjects had co-morbidity requiring daily medication

Similarity between patients managed by GPs & referred to neurologists

| | <i>Headache consulters n = 255</i> | <i>Referred to neurologist n = 48</i> |
|--|--|---|
| Age Mean | 42 | 44 |
| Disability score (MIDAS) Mean | 23 | 28 |
| Impact score (HIT-6) Mean | 61 | 62 |
| Anxiety (HADS-A) | 27% | 26% |
| Depression (HADS-D) | 7% | 9% |

Differences between GP headache consulters & referred


| | GP consulters for headache <i>n</i> = 255 | Referred to neurologist <i>n</i> = 48 | <i>p</i> -value |
|---|--|--|-----------------|
| Headache-related symptoms mean | 7 | 9 | 0.011 |
| 'My headaches do not <i>worry</i> me' (reverse scored) median (IQRrange) | 4 (3 to 4) | 4 (4 to 5) | <0.001 |
| 'My headaches make me feel <i>anxious</i> ' median (IQRrange) | 3 (2 to 4) | 4 (3 to 4) | 0.04 |
| No of consultations with GP for headache in 6 months mean | 0.8 | 1.8 | <0.001 |

Similarity between 97% not referred & 2% referred to neurologists

- headache GP attenders have severe headache impact and disability; referred group are not more clinically severe
- 30% headache GP attenders have anxiety/depression; referred group are not more symptomatic

Patients seen by GP (97%) for headache compared to patients referred to neurologists

Referred more likely to report

- more other symptoms
- more **worry** about their headaches
- having headache makes them **anxious**
- cost £10 more in frequent GP cons in 6 mo,
 £200 to see a specialist

GPs views- why they refer

- *‘ultimately they (patients) say that's all very interesting and thank you very much for the time you've taken, but **I still want to see someone ...**’*
- *‘everybody feels they need a scan — as soon as they've got a headache **they feel they need a scan**’*

Morgan et al BJGP 2007

Patients views

- *‘the one that was really **frightening** I ended up in Mayday Hospital because... I thought I might be even **having a heart attack because I was so worried** about the headache...they decided that I should have a brain scan....But the results came back as negative.’*
- *‘I got **so worried** because it had gone on for so long ...they said we’ll send you for a scan for peace of mind,...which showed it was all right. I relaxed a bit, I suppose **you get stressed which makes the headache worse.***

Reasons for new neurology visits

| | |
|----------------------|-----|
| Headache | 25% |
| Epilepsy + collapse | 20% |
| Neuropathy | 14% |
| Pain | 7% |
| Parkinson's + tremor | 5% |
| Dizziness | 5% |
| Weakness | 3% |
| Stroke type disease | 3% |
| MS | 3% |
| Numbness | 3% |
| Other | 11% |

More needed than referral + scan

- Strong beliefs about the negative consequences of headaches are strong predictors of poor outcome

Goldstein et al: Psychol Health 2011

- Scanning for CDH with anxiety is cost effective in the short run as fewer referrals, but anxiety recurs by 1 year

Howard et al: JNNP 2005

- 1/3 of patients seen by neurologists for headache- dissatisfied

Fitzpatrick et al: Soc Sci Med 1983

New developments

- training for GPs with SI in headache is recommended in all districts
- Patients referred to GPwSI & to neurology OP similar headache impact & disability scores
- GPwSI service cheaper £150 vs £200

BASH 2001, RCP 2011

Ridsdale et al BJGP 2008

Patient satisfaction with GPwSI

hospital clinic attenders **satisfaction** scores **72%** of maximum,
GpwSI clinic attenders **79%** ($p=0.002$)

Patients attending GPwSI clinic specifically **more satisfied** with:-

- waiting time,
- ease of access,
- being listened to and understood,
- help they had received,
- extent to which their needs were met,
- it relieving their symptoms,
- ability to deal more effectively with their problems, and
- Overall it is **‘the kind of service they wanted.’**

Headache school people related symptoms, thoughts, feelings + behaviours

Body Symptoms

- Blurry vision
- Dizziness
- Nausea
- Slurry speech
- Tiredness

Thoughts

- “I’m dying”
- “I’m going mental”
- “I’ve got a brain tumour”
- “I can’t cope today”

Feelings

- Sad
- Anxious
- Angry
- Stressed

Behaviours

- Go to room and sit down
- Tell people to be quiet
- Stop in the middle of doing an activity
- Sleep

CBT approach?

US research similar reduction of migraine to drugs can be achieved by:

- **Relaxation**
- **CBT**

Likely to benefit those patients who accept psychosocial issues affect their headache & an active approach + less drug side-effects

Symvoulakis et al 2007, SIGN 2008

We have developed a booklet and 3 individual sessions with a therapist & will test this in a trial

Thanks

- The MRC
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- The Migraine Trust
- The NIHR

- Collaborators

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