



# Clinical Update

## *For Telephone Triage Nurses*

July - August 2010

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- Headache in Adults

### Headache in Adults

During the course of a year, the majority of adults suffers headaches. Headache is typically in the top five adult calls for a medical call center. There are serious causes of headache and so triagers need to approach these calls with caution.

#### Pain Severity

It is important to assess and, if possible, quantify the severity of the headache. Doing so will improve the quality of triage and reduce under and over-referral.

Pain severity can be defined as

- ◆ **Mild** (1-3): doesn't interfere with normal activities
- ◆ **Moderate** (4-7): interferes with normal activities or awakens from sleep
- ◆ **Severe** (8-10): excruciating pain, unable to do any normal activities

#### Common Causes – Usually Not Serious!

- ◆ **Migraine Headaches:** Are also referred to as vascular headaches. The headache is moderate to severe in intensity, described as throbbing or pulsing in nature, and usually unilateral. Associated symptoms include nausea and vomiting. Some individuals will have visual or other neurological warning symptoms (aura) that a migraine is coming.
- ◆ **Muscle Tension Headaches:** Most headaches are caused by muscle tension. The discomfort is usually diffuse and may be described as a "tight band" around the head. It may radiate down into the neck and shoulders. The discomfort can be aggravated by emotional stress.
- ◆ **Sinusitis:** Headaches occur with frontal sinusitis. The headache is usually located in the forehead area and the individual has associated sinus symptoms (nasal discharge, congestion, post nasal drip).
- ◆ **Viral illness:** A mild to moderate headache frequently accompanies many febrile illnesses (cold, flu, pharyngitis). Sometimes the headache is related to fever. A moderate headache that persists after the fever has resolved is a red flag that something more serious may be causing the headache.
- ◆ **Caffeine Withdrawal:** This occurs in individuals who drink large amounts of caffeine (e.g., coffee, tea, colas, energy drinks) and suddenly stop. Some caffeine drinkers will note a headache upon arising that goes away after their first cup of coffee.

These common causes of headache are usually not serious. In many cases, people can self-treat these at home with over-the-counter pain relievers.

Please now closely review the potentially serious causes on the next page. Your nursing assessment should include questions targeted at the listed clues and key features.

Regards to all of you,  
David Thompson, MD



**Schmitt-Thompson**  
Clinical Content

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### Less Common But More Serious Causes of Headache

Cause	Clue or Key Symptom
<ul style="list-style-type: none"> <li>◆ <b>Acute Glaucoma:</b> The affected individual will have eye pain and sometimes blurred vision.</li> </ul>	 Severe pain in one eye.
<ul style="list-style-type: none"> <li>◆ <b>Brain Tumor:</b> Approximately 60-70% of patients with a brain tumor will complain of headaches. The headache is typically described as dull, slowly but steadily worsening over weeks, worse in the morning, and frontal in location.</li> </ul>	 Headache is a chronic symptom (recurrent or ongoing AND lasting more than 4 weeks). New headache in persons over 50 years of age.
<ul style="list-style-type: none"> <li>◆ <b>Carbon Monoxide Exposure:</b> Frequently there will be a group (e.g., the entire family) of people with the same symptoms. Nausea and weakness are other common symptoms.</li> </ul>	 Other family members (or roommates) with new-onset headaches
<ul style="list-style-type: none"> <li>◆ <b>CNS Bleed:</b> Subarachnoid hemorrhage needs to be considered in any severe sudden onset headache. A typical presentation is the "worst headache ever". Subarachnoid hemorrhage is a life-threatening problem.</li> </ul>	 "Worst headache" of life. Severe headache and sudden onset (reaching maximum intensity within seconds).
<ul style="list-style-type: none"> <li>◆ <b>Temporal Arteritis:</b> The other term for this is Giant Cell Arteritis. Typically this presents as a unilateral headache in an individual over 55 years old. There may be tenderness of the scalp over the area of the temporal artery.</li> </ul>	 New headache in persons over 50 years of age. Tenderness of temporal artery. Any blurred vision.
<ul style="list-style-type: none"> <li>◆ <b>Meningitis:</b> Accompanying symptoms may include fever, confusion, stiff neck.</li> </ul>	 Stiff neck (can't touch chin to chest)
<ul style="list-style-type: none"> <li>◆ <b>Preeclampsia:</b> Should be considered in any patient who is more than 20 weeks pregnant and any postpartum patient in the first four weeks after delivery. Clinical presentation typically consists of persistent headache, visual symptoms (spots or flashing lights), epigastric pain, hand and face swelling, sudden weight gain (e.g., 3 lbs in one week), proteinuria, and blood pressure &gt; 140/90.</li> </ul>	 Headache and any visual symptoms in latter half of pregnancy. Sudden weight gain. Face swelling. Elevated blood pressure (over 140/90).

### References:

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- ◆ Edlow JA. Diagnosis of subarachnoid hemorrhage in the emergency department. *Emerg Med Clin North Am.* 2003;21(1):73-87
- ◆ Attia J, Hatala R, Cook DJ, et al. Does This adult patient have acute meningitis? *JAMA.* 1999;282:175-181

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