14. Headache management in primary care: when to refer

Most headache disorders presenting to primary care are migraine, tension-type headache or medication-overuse headache. These, usually, can be and are best managed in primary care.

Reasons for specialist referral

- **Diagnostic uncertainty** after due enquiry.
- Diagnosis of **any of the following**, which are best managed by specialists:
  - migraine with aura including motor weakness;
  - chronic migraine;
  - cluster headache;
  - trigeminal neuralgia;
  - persistent idiopathic facial pain.
- **Suspicion of serious secondary headache**, or of serious pathology where investigation may be necessary and is not available in primary care:
  - **progressively worsening** headache over weeks or longer;
  - headache brought on by **coughing**, **exercise** or **sexual activity;**
  - headache **associated with** any of the following:
    - **postural change** indicative of high or low intracranial pressure;
    - unexplained **fever**;
    - **stiffness of the neck**;
    - unexplained **focal neurological symptoms or signs** or with epileptic seizures;
    - **disorder of consciousness or memory**, or **change in personality**;
    - **weight-loss** or poor general condition;

- **new headache**:
  - in any patient that is **thunderclap** in nature (intense headache with abrupt or "explosive" onset);
  - that is **daily and persistent from onset** in a patient without a prior history of headache;
  - in a patient **older than 50** years;
  - in a patient with a history of **cancer**;
  - in a patient with a history of **immunodeficiency** (including HIV infection);
  - in a patient with a history of **polymyalgia rheumatica**;
  - in a patient with a family history of **glaucoma**;
- **unusual migraine aura**, especially:
  - prolonged aura (duration >1 hour);
  - aura featuring brainstem symptoms and/or motor weakness;
  - new aura without headache in a patient older than 50 years and in the absence of a prior history of migraine.
- Persistent **management failure**.
- **Comorbid disorders** requiring specialist management.