



# Multispecialty consensus on diagnosis and treatment of headache

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Patients experience headache more than any other type of pain. Headache accounts for over 10 million physician visits annually.<sup>1,2</sup> Relatively few headache sufferers receive appropriate diagnosis and adequate care. Migraine sufferers are often the most dissatisfied patients; half of those who consult stop seeking medical care for their headaches. Only 28% of sufferers are very satisfied with their usual treatment.<sup>3,4</sup> Migraine has major implications for the patient's job and for his or her family and social life.<sup>4,5</sup> Migraine sufferers experience significant disability, lost work days, and diminished quality of life, accounting for over \$13 billion a year because of missed work days.<sup>4</sup>

An estimated 18% of women and 6% of men have migraines; about half never receive a medical diagnosis.<sup>6</sup> There have been a number of advances in the diagnosis and treatment of migraine and great strides in understanding its pathogenesis. In the service of education and patient care, the American Academy of Neurology (AAN) has led the multidisciplinary US Headache Consortium to develop an evidence-based practice parameter on migraine. Seven organizations participated in the Consortium: the American Academy of Family Physicians, the AAN, the American Headache Society, the American College of Emergency Physicians, the American College of Physicians, the American Osteopathic Association, and the National Headache Foundation. This unique collaborative organization worked to develop a unified approach to treating migraine. Physicians from all seven groups actively participated in the project to ensure that all aspects of migraine diagnosis, treatment, and prevention were considered.

The practice parameter contains five parts: Overview of Program Description and Methodology; Neuroimaging in Patients with Nonacute Headache; Pharmacological Management of Acute Attacks; Behavioral and Physical Treatments; and Pharmacological Management for Prevention of Migraine. The goals of the practice parameter are to reduce attacks, improve the response to medication, and restore pa-

tients' ability to function. The sections describe strategies for: 1) preventing migraine; 2) understanding its causes; 3) involving the patient in the treatment plan; 4) following progress; and 5) measuring success. The practice parameters also help physicians select patients who are likely to benefit from the prevention and treatment strategies by providing information about organized pharmacologic and non-pharmacologic approaches.

The evidence-based practice parameter for the migraine patient will be widely disseminated and can provide a basis for future outcomes research. This effort, one of the first, and certainly the most extensive, cooperative projects to develop practice parameters across disciplines, reflects the concern for the migraine patient of the physician-members of the organizations, as evidenced by their willingness to collaborate on this rigorous project. The guidelines are intended to improve care and outcomes for all migraine sufferers.

The practice parameter for migraine is now available on the *Neurology* web site (<http://www.aan.com>) and by request through AAN Customer Service (800-879-1960). A short version of the practice parameter is being prepared for publication in *Neurology*.

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