

## Headaches overview

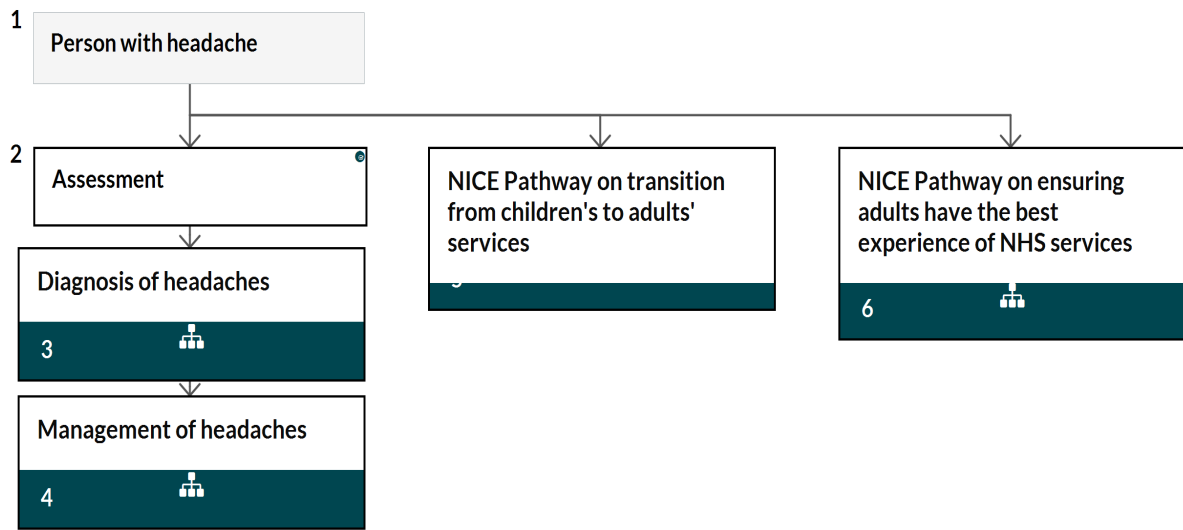
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/headaches>

NICE Pathway last updated: 12 May 2021

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Person with headache

No additional information

## 2 Assessment

### People presenting with headache

Evaluate people who present with headache and any of these features, and consider the need for further investigations and/or referral.

- worsening headache with fever
- sudden-onset headache reaching maximum intensity within 5 minutes
- new-onset neurological deficit
- new-onset cognitive dysfunction
- change in personality
- impaired level of consciousness
- recent (typically within the past 3 months) head trauma (see [the NICE Pathway on head injury](#))
- headache triggered by cough, valsalva (trying to breathe out with nose and mouth blocked) or sneeze
- headache triggered by exercise
- orthostatic headache (headache that changes with posture)
- symptoms suggestive of giant cell arteritis
- symptoms and signs of acute narrow-angle glaucoma
- a substantial change in the characteristics of their headache.

For information on referral for suspected tumours of the brain or central nervous system see [brain and central nervous system cancers in the NICE Pathway on suspected cancer recognition and referral](#).

### Further assessment for people presenting with new-onset headache

Consider further investigations and/or referral for people who present with new-onset headache and any of the following.

- compromised immunity, caused, for example, by HIV or immunosuppressive drugs

- age under 20 years and a history of malignancy
- a history of malignancy known to metastasise to the brain
- vomiting without other obvious cause.

### Headache diaries

Consider using a headache diary to aid the diagnosis of primary headaches.

If a headache diary is used, ask the person to record the following for a minimum of 8 weeks.

- frequency, duration and severity of headaches
- any associated symptoms
- all prescribed and over the counter medications taken to relieve headaches
- possible precipitants
- relationship of headaches to menstruation.

### Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

1. Classification of headache type

### 3 Diagnosis of headaches

[See Headaches / Diagnosis of headaches](#)

### 4 Management of headaches

[See Headaches / Management of headaches](#)

### 5 NICE Pathway on transition from children's to adults' services

[See Transition from children's to adults' services](#)

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**6 NICE Pathway on ensuring adults have the best experience of NHS services**

[See Patient experience in adult NHS services](#)

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## Glossary

### Acute narrow-angle glaucoma

(an uncommon eye condition that results from blockage of the drainage of fluid from the eye: symptoms of acute glaucoma may include headache with a painful red eye and misty vision or haloes, and in some cases nausea; acute glaucoma may be differentiated from cluster headache by the presence of a semi-dilated pupil compared with the presence of a constricted pupil in cluster headache)

### Giant cell arteritis

(also known as temporal arteritis, giant cell arteritis is characterised by the inflammation of the walls of medium and large arteries; branches of the carotid artery and the ophthalmic artery are preferentially involved, giving rise to symptoms of headache, visual disturbances and jaw claudication)

## Sources

[Headaches in over 12s: diagnosis and management](#) (2012 updated 2015) NICE guideline CG150

## Your responsibility

### Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They

should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Technology appraisals**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Medical technologies guidance, diagnostics guidance and interventional procedures guidance**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the

interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.