



Daily Persistent Headache Update

NEWS

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Headache is defined as a pain arising from the head or upper neck of the body. The pain originates from the tissues and structures that surround skull or brain because the brain itself has no nerves that give rise to the sensation of pain (pain fibers). Headaches can be classified as three types: 1) primary, 2) secondary, and 3) cranial neuralgias, facial pain, and other headaches.

New daily persistent headache (NDPH) is an uncommon and under-recognized primary headache disorder. Clinically, NDPH may resemble migraine or tension-type headache, unlike migraine or tension-type headaches. However, a distinguishing feature of NDPH is that the majority of patients with NDPH can pinpoint the exact date of symptoms onset. While cases can arise *de novo*, in multiple reports, a viral illness precedes the onset of headache. NDPH has two temporal profiles: a self-limited form that resolves spontaneously without treatment and a refractory, persistent form in which headaches continue unabated for years.

Diagnosis was predicted on first eliminating secondary mimics via diagnostic imaging and hematological studies. Lumbar puncture should be considered in patients who were refractory to treatment to search for alterations in CSF pressure or for an infectious process. There have been no randomized clinical trials utilizing acute or preventive therapies for NDPH. In clinical practice, treatment was aimed at matching the predominant headache phenotype; nonetheless, most therapies were generally ineffective or only partially effective. Not surprisingly, medication overuse is very common among patients with this disorder and should be identified, although in most patients, eliminating medication overuse does not alter the course of the illness. There have been reports of successful treatment combining doxycycline 100mg and montelukast 10mg dosed BID for 3 months. Anecdotally, this combination has occasionally found to provide good results. Onabotulinum toxin injections were currently under investigation and might provide a potential new effective treatment regimen.

Current Treatment Options in Neurology

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