**2021 INTERVIEW SUMMARY SHEET**

**Topic**  
Difficult Diagnoses: Rare Headache Types

**Speaker**  
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### KEY TAKEAWAYS

- New daily persistent headache occurs abruptly and never goes away. In contrast, chronic migraine usually starts with episodic headache, which progresses over time.

- Hypnic headache occurs during sleep and wakes people up.

- Hemicrania continua is a continuous headache on one side of the head and is more common in women than in men.

- New daily persistent headache is similar to hemicrania continua but is usually on both sides of the head.

- Thunderclap headache happens suddenly, reaches maximal severity in a minute, and lasts five or more minutes.

- Exertional headache or exercise headache is a primary headache that happens in patients with migraine.

- There are over 200 types of headache, according to the International Headache Society.

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### QUOTES

"If you are going to have strong power to show some medication to be effective in clinical trials, you must collect many patients to join. And since these headaches are very rare, doctors do not have enough patients to do the clinical trials."

“Sometimes it's due to infection, sometimes due to neuroinflammation. Right now, people do not know the exact cause of new daily persistent headache.“

“For patients with hemicrania continua, they just don't need to be worried because this headache is easily treated: 100% responsive to indomethacin.”

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### PRACTICAL STEPS

- Misdiagnosis of rare headaches is common, so you’ll need to describe your symptoms and headache history very clearly for a proper diagnosis.

- If you are seeing a neurologist and your headache is not well managed, you will need to consult a headache specialist.

- There are many treatments available for rare headache types. Keep searching for the right specialist to properly diagnose your headache type and find the appropriate treatment.

- If you experience sudden, severe head pain it's important to go to the ER immediately, because it could be potentially fatal.

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### TREATMENTS CITED

- **Calcium channel blockers** (Isoptin, nimodipine)
- **CGRP monoclonal antibodies**
- **Coffee before sleep** (for hypnic headache)
- **Corticosteroids**
- **Depakote**
- **Diamox**
- **Ergotamine**
- **High-flow oxygen for cluster headache**
- **Indomethacin**
- **Lithium**
- **Melatonin**
- **Propranolol**
- **Sumatriptan**
- **Topamax**
- **Tricyclic antidepressants**
- **Triptans (oral, subcutaneous, intranasal)**

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