

UNIVERSITY of COLORADO HEALTH

Volume 7 | Issue 6 | through September 24, 2013

Headache Clinic Offers New Way to Spell Relief

By Tyler Smith

A condition that many brush off as a temporary inconvenience or relegate to the just-get-over-it category affects tens of millions of people in the U.S. alone and is a leading cause of disability worldwide.

It's the headache, with its infamous symptoms of pounding, throbbing, stabbing and other signs of misery. Far from a minor inconvenience, the varieties of headache are the most common symptom referral to neurologists. Migraine is more prevalent than asthma and diabetes combined, affecting as many as 36 million Americans — around 3 million of them chronically — and consuming \$15.5 billion in direct and indirect costs annually, according to the American Headache Society. Some place the figure as high as \$20 billion.



Pediatric neurologist Sita Kedia, MD, left, with Marius Birlea, MD, medical director of the recently opened Headache Clinic at UCH.

Kedia plans to transition adolescents with headache issues from

Children's Hospital Colorado to UCH.

Numbers like these help to explain why University of Colorado Hospital launched a Headache Clinic in July. Open Mondays through Thursdays, the clinic is already seeing 10 to 12 patients in a full day, said Medical Director Marius Birlea, MD. Roughly half are new patients, he added.

Many options. The clinic sees referrals from general practitioners and other specialties and provides second opinions to community neurologists, Birlea said. It follows a multidisciplinary approach to care, collaborating with The Center for Integrative Medicine (TCFIM), Psychiatry, the Interventional Pain Management Practice and the Outpatient Infusion Center (OIC), he added.

Through the OIC, for example, patients with severe migraines can receive intravenously delivered medication cocktails. The Headache Clinic and the Pain Management Practice provide relief through treatments such as Botox and nerve block injections.

For those who don't tolerate drugs well or prefer a different type of treatment, TCFIM offers acupuncture, biofeedback, nutrition guidance and other medication-free approaches. Because migraine in particular is often associated with mood disorders, many patients may benefit from mental health services offered through the hospital's Outpatient Psychiatric Practice and the CU School of Medicine's Department of Psychiatry.

Birlea said he received mentoring from Laura Strom, MD, medical director of UCH's Neurology Clinic, and Ken Tyler, chair of CU's Department of Neurology. He also works closely with Sita Kedia, MD, a pediatric neurologist at Children's Hospital Colorado, which has a well-established headache program.

Child's play. The Children's Colorado program takes a three-prong approach, Kedia explained during an August 21 Grand Rounds she co-led with Birlea. A physician, two nurse practitioners, and an RN who handles headache education staff the general clinic. An integrative clinic is similarly staffed, but adds dietary and psychology services as well as yoga therapy. At the child and adolescent clinic, a physician sees referrals from the hospital's

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primary care clinics. In addition, the Children's Hospital Colorado Headache Program Clinical Registry collects clinical information to better understand the symptoms and outcomes of children and adolescents with headache, Kedia added.

At present, the UCH clinic staff include Birlea, a nurse shared with the Neurology Clinic and a nurse practitioner and physician assistant who lend a hand with new patients and follow-ups. But the Children's Colorado program offers a roadmap for the future, Birlea said.

"We will take elements of the Children's Colorado program and modify them as needed," he said. "It's a model that we can build off."

A real pain. The need for the Headache Clinic at UCH is clear, Birlea said. In June of this year, 36 percent of patient encounters in the Neurology Clinic were for head pain. Of those, more than half were for migraine. Total payments for common headache diagnoses at the clinic rose from around \$750,000 in calendar-year 2010 to more than \$1 million in 2012 — without the benefit of a specialized practice.

The pain headache patients suffer can be debilitating, Birlea said. In the case of migraine, seemingly simple things like lighting and cell phone sounds can trigger an incapacitating episode, often accompanied by nausea, dizziness and neck pain.

"It limits individuals' abilities to function," he said, "and it has a significant impact on disability costs for both individuals and for society."

Often overlooked. Despite the number of sufferers and the physical and emotional toll the condition exacts, headache lacks the type of spirited advocacy that has brought public attention to other, less common, conditions like breast cancer to the fore.

"It's so common it's overlooked," said Kedia. "Even though it's responsible for the most disability among all neurological conditions, it hasn't had a voice."

The condition has received relatively short shrift even in the training of clinicians who will be asked to treat it. At the August Grand Rounds, Birlea pointed out that the typical 140-hour neurology education curriculum for residents devotes just four to headache. Only sleep disorders got fewer hours.

Barriers exist within the two hospitals as well. Because neither UCH nor Children's Colorado, for example, have a dedicated chair in the Outpatient Infusion Center, Birlea said, migraine sufferers might have to endure longer than ideal waits for treatment.

"These patients need treatment as quickly as possible," Kedia said. "Big centers have dedicated infusion chairs. That saves unnecessary imaging and medications patients may receive if they have to come in through the emergency department."



New mind-set. But the picture could be changing. The American Migraine Foundation this year launched the "36 Million Migraine Campaign," which aims to raise \$36 million for research to fight the condition. It's enlisted Cindy McCain, wife of Arizona Senator John McCain — herself a migraine sufferer for 20 years — to chair the campaign.

Closer to home, UCH is seeking designation by the American Migraine Foundation as an <u>academic headache center</u> dedicated to multidisciplinary care, research, education, and accessible services for patients. The foundation's chairman, David Dodick, MD, is scheduled to visit the Anschutz Medical Campus in October to offer quidance in developing a business plan for the center, Birlea said.

The Headache Clinic at UCH should also serve as a natural transition for young patients treated at Children's Colorado. Kedia said she sees patients as old as 22. With the UCH clinic up and running, she plans to begin discussing making the move to the adult facility when her patients are 17 or 18.

"It's wonderful to have an outlet for adolescents who can now make the transition to University," she said. "Before this, we didn't have a way to make that referral."