Residents: how is headache care in general, including emergency

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Introduction
Headaches are pains in any region of the head with variable intensity, as well as its location. They can be localized or diffuse, acute or chronic, associated or not with other symptoms and have numerous causes. More than 90% of people report a history of headache during their lifetime. In addition, an overload is observed in emergency units and outpatient clinics due to inadequate initial care for a headache.

Objective
1) Conduct an epidemiological survey of headache care in emergency care units, analyzing the conduct of resident physicians. 2) Estimate the resolvability of headache cases in the emergency room and provide actions through continuing education if a deficiency in the care provided by professionals is demonstrated.

Methods
This is a descriptive observational study (cross-sectional cohort) in which we applied an online questionnaire to resident physicians who will be providing treatment in general to the patients in the city of Catanduva and neighboring cities. This is a semi-structured interview aided with self-administered questionnaire (annexed in online in private cloud to guarantee confidentiality) which was sent via email and WhatsApp. Before joining the study, the participants filled out the informed consent form. After applying the forms, Excel spreadsheet was generated in order to process the statistical analysis. The inclusion criteria was: be a resident physician in any area of activity. The exclusion criteria: resident withdrawal at any time during the study. Number of the project in the ethics committee: 44857315.5.0000.5430

Results
A total of 115 residents physicians answered the questionnaire. The average age is 27.6 years and the majority are specializing in Clinical Surgery, Internal Medicine and Clinical Specialties. Twenty residents reported they didn’t see any headache patient and the other 95 cared weekly for an average of 4.87 patients with this complaint, in which most part of the symptoms were mild to moderate. 49.5% of the residents classified headache as a symptom of another comorbidity. 6.1% of the resident physicians claimed migraine is equivalent to headache. 22% would use opioids to treat headaches. 60% of the residents didn’t know or didn’t research further about the damage of opioids for headache. 35% didn’t know or had a superficial knowledge about chronic daily headache or abuse medication use headache. 98% of the residents had at least 1 episode of headache in their life, but only 31% searched medical care due to the pain.

Conclusion
The epidemiological survey has shown a significant piece of overall treatments being inadequate based upon Brazil’s “National Protocol of Diagnosis and Management of Headaches in Urgent Care Units” established by the Brazilian Academy of Neurology – Headache’s Scientific Department from Brazilian Headache Society. The application of well-structured classes and clinical case discussions during residency to these future specialists will serve them significantly better.

Keywords: Headache, Treatment, Symptoms, Medical attendance, Migraine.