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**Headache Physiopathological And Clinical Concepts**

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The book has been divided into six sections, which deal with clinical aspects, serotonin and its role in the pathogenesis of migraine, the important, but yet still mysterious, role of opiate receptors in the brain, the interrelationship between headache and other functions, the possible role of platelet aggregation in the migraine syndrome, and clinical and preclinical pharmacology of migraine.

### **Headache: Physiopathological and Clinical Concepts | JAMA ...**

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### **Headache: Physiopathological and Clinical Concepts ...**

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The information on warning features that may indicate a serious secondary cause of headache is based on clinical guidelines Referral guidelines for suspected cancer [], Guidelines for All Healthcare Professionals in the Diagnosis and Management of Migraine, Tension-Type, Cluster and Medication-Overuse Headache [], Headaches in over 12s: diagnosis and management (updated November 2015) [], The ...

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## **Headache, physiopathological and clinical concepts (Book ...**

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## **Headache, physiopathological and clinical concepts ...**

Headaches and dizziness have numerous causes and there are many different types. This page will explore some of the: Key types of headaches and causes of dizziness that may be encountered in clinical practice; Highlight red flags and other signs / symptoms which warrant referral.; Headache Classification

## **Headaches and Dizziness - Physiopedia**

In the past three decades, behavioral interventions (chiefly relaxation,

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biofeedback, and stress-management) have become standard components of the armamentarium for management of migraine and tension-type headaches. Meta-analytic literature reviews of these behavioral interventions have consistently identified clinically significant reductions in recurrent headache.

### **Behavioral Management of Recurrent Headache: Three Decades ...**

Current diagnostic criteria for migraine and cluster headaches (CHs) are based on the International Classification for Headache Disorders, second edition (ICHD-2). 1 Diagnosis of these conditions is largely based on data obtained from clinical examination and the patient's medical history, particularly features of the associated pain, eg, location, intensity, and time pattern. A lack of valid clinical laboratory diagnostic markers clearly obstructs the physician's ability to optimize and ...

### **Biological correlates of migraine and cluster headaches ...**

Epileptic seizures and headache attacks are two common neurologic phenomena characterized by paroxysmal alteration of brain functions followed by complete restoration of the baseline condition. Headache and epilepsy are related in numerous ways, and they often co-occur. Although the link between these two diseases is not completely clear, several clinical, physiopathological and therapeutic ...

### **Ictal epileptic headache revealing non convulsive status ...**

The clinical presentation for these patients consisted of nasal obstruction, epistaxis, and headache. On further physical examination, the presence of a polypoid mass was identified and, despite surgery and radiotherapy, both cases experienced recurrence.

Throughout the last decade, the field of clinical psychology has expanded dramatically. Clinical psychologists are involved in the treatment and research of a wider range of problems and disorders than they have ever been before. Evidence has been rapidly accumulating regarding the role of psychological variables and stress in the etiology and maintenance of a range of medical and psychiatric disorders. New models of psychotherapy have been developed and refined, and the specific efficacy of psychotherapeutic interventions for an increasing number of disorders (or subtypes of disorders) has been documented. However, concurrent with research that demonstrates the impact of psychosomatic factors in various disorders and the efficacy of psychological or psychosocial interventions, dramatic progress has been made with regard to the investigation of biological factors that may mediate certain disorders. That physical factors may underlie many instances of psychiatric illness has been repeatedly demonstrated. Also, the efficacy of somatic treatments for different disorders, or for subtypes of disorders, has been reported with increasing methodological rigor.

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Headaches represent one of the most common medical conditions and one of the most frequent reasons for patients seeking medical care. Wolff's Headache has become a classic in the field of head pain. Providing a compendium of facts, it stands above other texts as one of the most definitive and comprehensive textbooks on diagnosis and management. Wolff's Headache and Other Head Pain 7E provides a comprehensive overview of headache disorders. The contributors are the acknowledged world leaders in their fields. The new edition reflects the enormous growth of knowledge regarding the classification of epidemiology, mechanisms, and treatment of headaches. The book provides both practical clinical advice and a clear overview of the science which provides the foundation for that advice.

Includes established theories and cutting-edge developments. Presents the work of an international group of experts. Presents the nature, origin, implications, an future course of major unresolved issues in the area.

Includes established theories and cutting-edge developments. Presents the work of an international group of experts. Presents the nature, origin, implications, an future course of major unresolved issues in the area.

This book has been replaced by Psychological Approaches to Pain Management, Third Edition, ISBN 978-1-4625-2853-0.

Despite medical technological advances, the major killers with which we must currently contend have remained essentially the same for the past few decades. Stroke, cancer, and heart disease together account for the vast majority of deaths in the United States. In addition, due to improved medical care, many Americans who would previously have died now survive these disorders, necessitating that they receive appropriate rehabilitation efforts. One result of our own medical advances is that we must now accept the high costs associated with providing quality care to individuals who develop one of these problems, and we must avail ourselves to assist of afflicted individuals. families Despite the relative stability of causes of death and disability, the health-care field is currently experiencing tremendous pressures, both from professionals with in the field, who desire more and better technology than is currently available, and from the public and other payers of health care (e.g., insurance companies), who seek an end to increasing health-care costs. These pressures, along with an increased emphasis on providing evidence of cost-effectiveness and quality assurance, are substantially changing the way that health-care professionals perform their jobs.

The chapters of this book were prepared as task force reports under the aegis of the Biofeedback Society of America (BSA). The impetus for the present generation of task force reports can be dated back to 1982, when John D. Rugh, as President-Elect of the Society, announced that the updating of the task force reports would be given high priority during his term as President. An ad hoc Task Force Committee was appointed in 1983, and the committee set the following objectives: (1) solicit a widely based stream of input from all segments of the Biofeedback Society of America, (2) establish a peer review system to assure the highest

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degree of scholarship and an unbiased approach, (3) select for area authors only individuals who have profound knowledge of the area and who have demonstrated the ability to extend understanding by reviewing and criticizing the literature, (4) prepare all reports according to a standardized format, and (5) publish all the reports simultaneously. Input came from several sources. Many people responded with ideas and suggestions to an announcement in the BSA Newsletter that the task force reports were being revised. In 1984, a symposium was conducted at the BSA annual meeting, which included round table discussions and dialogues between task force report authors and the BSA membership.

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