

## Book Review

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### Diagnosing and Managing Headaches.

by Seymour Diamond, M.D.  
160 pages, \$17.95  
*Professional Communications, Caddo, Okla., 1994.*

Seymour Diamond is a shrewd and speedy clinician, as I witnessed while visiting his clinic in Chicago some years ago. He taught me the invaluable question, "How many types of headaches do you experience?" which a patient with two headaches can usually distinguish, and if analyzed separately, clarifies a confused history, thereby unmixing mixed headaches.

This small soft-covered book, intended for the internist needing guidance in headache (for which he has had little, if any, training), provides an excellent account of headache types encountered clinically. As all good clinicians, Dr. Diamond puts most stress on an accurate and detailed history indicating the major points that need to be evaluated: 5 to 10 minutes usually suffices—if a diagnosis can be attained. However, what to do when we cannot reach a diagnosis, is not covered; we need to bear in mind that we cannot always diagnose patients; also that we cannot always be right. If we are correct in 19 of 20 (95%) cases, then we are doing well.

The next step is a full systemic and neurological examination, the latter being the Achilles heel of the internist.

It is only when these first two steps have been completed that the appropriate investigations can be organized—a battery of tests will fail to diagnose headache, hence the current "negative scan headache patient." I agree that an EEG is not helpful in headache diagnosis (and I would have left it out), and that an MRI has many advantages over the CT scan, especially in subarachnoid hemorrhage. Magnetic resonance angiography is an-

other major advance and may rapidly replace contrast angiograms.

Scattered throughout the book are gems: "How long does a bottle of 100 aspirin tablets last?"; the importance of continuity of care so that patients know that "they are not alone in combating their disease." In a section on special patient considerations, we read "in managing children with headache, the physician must be concerned with reassuring the patient about diagnosis and treatment."

The sections on headache in pregnancy and headache in the emergency department are also clear and helpful. Each chapter ends with 6 to 10 salient references. Diamond has selected authors who, like himself, know and have the feel of the subject—in depth.

In Chicago, underlying depression is common in the elderly giving rise to daily headaches worse in the morning and evening. In London, musculoskeletal pain from the neck is more common, and some patients become despondent and depressed especially when a physician says the headache is of psychogenic origin; such a patient then resorts to an osteopath, chiropractor, or acupuncturist who assures them, by words and therapy, that their pain is organic. In the "windy city," migraine gives rise to tinnitus; not in London.

Leaving minor quibbles aside, I can visualize many residents carrying this excellent small book in their doctor's bag and thanking Dr. Diamond for succinct advice. Many reprints, and further editions in the future will surely be required.

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