



## Reducing Imaging Scans For Headaches May Delay Diagnosis



According to an article published in the January issue of *Neurosurgery*, recent guidelines that seek to reduce the use of neuroimaging tests for patients with headaches run the risk of either missing or delaying the diagnosis of brain tumours.

The article was written by Neurosurgeon Dr. Ammar H. Hawasli and colleagues of Washington University School of Medicine, St. Louis. The authors believe that guidelines limiting the use of CT scans and other neuroimaging tests for patients are not consistent with the neurosurgeon's experience with patients with brain tumour.

The intention behind these guidelines may be right and reducing the use of unnecessary and costly medical tests may be an important reason since headaches are a common reason for physician visits, but Dr. Hawasli and his co-authors still have concerns about this recommendation. "Specifically, patients with brain tumours may present with isolated headaches in the absence of other neurological symptoms and signs," they write.

In order to better illustrate their point of view, the authors analysed 95 patients with a confirmed diagnosis of brain tumour. Almost half of the patients had a combination of symptoms such as cognitive and speech dysfunction, seizures or other neurological abnormalities. Approximately one-fourth of the patients had isolated headaches, no symptoms or nonspecific symptoms.

The analysis showed that in 11 of these patients, headache was the only symptom of brain tumour. Four of the eleven patients had new-onset headaches which would have qualified for neuroimaging. However, seven of the patients had migraine or other types of headache, which, under the new recommendations, would not have qualified for neuroimaging. Thus, based on the new recommendations, neuroimaging would have been delayed in these patients or may never have been performed in nearly three to seven percent of patients with brain tumours.

The analysis thus highlights some important implications. Early diagnosis is extremely important in patients with brain tumour as it enables prompt treatment and provides a wider range of surgical options. However, the

guidelines need to be more accurate and viable. While preventing neuroimaging in patients with headaches may help reduce the economic burden but at the same time, it may result in delayed diagnoses and inferior patient outcomes.

"We support careful and sensible use of neuroimaging in which physicians exercise excellent clinical judgment to reduce waste in the medical system," Dr. Hawasli and co-authors write.

Source: Wolters Kluwer Health

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