Authors have reported the results of a pilot study of hypothalamic deep brain stimulation (DBS) in 6 patients suffering from refractory chronic cluster headache. The stereotactic coordinates were those published by Leone et al. (2001). In one patient the implantation procedure had to be interrupted because of a panic attack with autonomic disturbances. Among the 5 implanted patients, 3 had excellent relief: 2 are pain-free, 1 has less than 3 attacks/month. One patient had only transient remissions during 2

On Behalf of the University Centre for Adaptive Disorder and Headache (UCADH) and the Casimiro Mondino Foundation of Pavia, Italy, the Cluster Headache Award is given yearly to a research group which, following the tradition of the Headache Centre over the last three decades, has given a relevant contribution in the field of cluster headache. The prize is acknowledged on the basis of a peer reviewed manuscript published the previous year. The members of the Scientific committee are the following: G. Nappi (Chairman), K. Ekbom M. Fanciullacci, P. Goadsby, GC. Manzoni, NT. Mathew, M. Moskovitz, F. Antonaci (Secretary). The winner of the 3rd Edition (year 2006) is the following paper: Hypothalamic stimulation in chronic cluster headache: a pilot study of efficacy and mode of action. Written by: Schoenen J, Di Clemente L, Vandenheede M, Fumal A, De Pasqua V, Mouchamps M, Remacle JM, de Noordhout AM. Appeared in Brain. 2005 Apr;128(Pt 4):940-7.

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It is well known that headache disorders are amongst the top 10 causes of disability in Europe. Four of these are important in primary care because they are common and are responsible for almost all headache-related burden. Management of these belongs largely in primary care. In the last six months the European Headache Federation in conjunction with European Headache Alliance, and Lifting the Burden has been working on writing Principle of management of headache in primary care, a project considered to be strategic for primary care physicians (PCP). The purpose of these principles, that will be spread in Europe, is to help PCP correctly diagnose these few disorders, manage them well, recognise warnings of serious headache disorders and refer for specialist care when appropriate. The development process was review of all published

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years, after which he went into remission which lasts since 7 months. Mean voltage was 3.5V, diplopia being the major factor limiting its increase. In a patient with total remission, attacks resumed 3 months after turning off the stimulator. After 1 month, the hypothalamic stimulation induced resistance against the attack-triggering agent nitroglycerin and tended to increase pain thresholds at extracephalic, but not at cephalic, sites. It had no detectable effect on neurohypophyseal hormones or melatonin excretion. Unfortunately, 1 patient died from an intracerebral haemorrhage that developed along the lead tract several hours after surgery. We decided therefore to switch to a pilot study of occipital nerve stimulation (ONS). Short term results were disappointing with ONS, but after a longer follow-up of >4 mths the therapeutic effect was comparable to that of DBS. Four out of 5 patients achieved subtotal remission; the 5th patient decided to interrupt treatment after 2 months because of lack of efficacy. This year the prize amounts to €2500,00 and has been awarded by the Award Secretary (F. Antonaci MD, Phd) to Jean Schoenen (Depts of Neurology and Preclinical Sciences, Liège University, Belgium) during the award section during the Migraine Trust International Symposium in London — 20th September 2006). GSK Italy has kindly sponsored the Award. Fabio Antonaci (Pavia)

EHF task force on principle of management of headaches in primary care

(continue from page 1)

treatment guidelines in use in Europe, and harmonization through selection of whatever recommendations within them carried greatest weight. Evidence-based based recommendations were always preferred to those without explicit supporting evidence. Discordance between recommendations was resolved through direct reference to original evidence or, where this was lacking, through consensus of expert opinion. The aim of these principles was to give straightforward and easily-following guidance to PCP who were assumed to be non-expert. There was recognition that availability of drugs and reimbursement policies varied from country to country. For that reason, different possible options were considered and are set out whenever appropriate, but otherwise the emphasis was on unambiguous advice. The work of the committee is expected to end in December.
EHF NEWS
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This newsletter seeks to provide timely and accurate information from the most knowledgeable sources. The newsletter is mailed to EHF members, national drug companies and medical journalists in line with information given by board members. The views expressed in the articles in EHF News are those of the authors and do not necessarily reflect those of the EHF and the Publisher.

What’s on...
• Academic Year 2006-2007, “La Sapienza” University of Rome, Italy
  Master’s Degree in Headache Medicine
  Information: www.uniroma1.it/headache
  paolo.martelletti@uniroma1.it
• 5th-7th October 2006, Castrocaro Terme (FC), Italy
  European Headache Federation School, 2006 course (International School on Adaptive Disorders and Headache)
  Information: neuronet@libero.it
• 28 June—1st July 2007, Stockholm, Sweden
  The 13th Congress of International Headache Society
  Information: www.ihc2007.com
  ihc2007@stocon.se
• 17th-21th May 2008, Istanbul, Turkey
  VII International congress on Headache in children and adolescents
  Information: congress@topkon.com
  http://www.topkon.com