Acute Severe Headache: Migraine vs Red Flags

Quick-reference for community pharmacists · Aligned with NICE CG150 (updated 2025) and NG228 (2022)

CALL 999: Possible Subarachnoid Haemorrhage or Meningitis

- ☐ **Thunderclap headache:** sudden and severe, maximum intensity within 5 minutes
- ☐ Described as the worst headache of the patient's life
- ☐ Headache with impaired consciousness, confusion, or seizure
- ☐ New neurological deficit: weakness, speech disturbance, visual loss
- ☐ Severe headache with neck stiffness and fever: possible meningitis

Do not supply analgesia and advise the patient to wait. Call 999 immediately. Subarachnoid haemorrhage and meningitis can both deteriorate rapidly within hours.

SAME-DAY GP / A&E: Urgent Assessment Required

- ☐ New headache with vomiting and no other obvious cause
- ☐ New headache in a patient with compromised immunity (HIV, immunosuppressants)
- ☐ Age 50 or over with new temporal headache, jaw pain on chewing, or scalp tenderness: possible giant cell arteritis
- ☐ Headache triggered by cough, Valsalva, exertion, or sneezing
- ☐ Headache worse on lying down or changing posture: possible raised intracranial pressure
- ☐ Substantial change in character from the patient's usual headache pattern

Giant cell arteritis requires same-day referral: untreated, it can cause sudden permanent sight loss within hours to days.

SELF-CARE / OTC: Known Primary Headache, No Red Flags

- ☐ Established migraine or tension-type headache consistent with the patient's usual pattern
- ☐ Tension-type: aspirin, ibuprofen, or paracetamol
- ☐ Migraine: aspirin 900 mg, ibuprofen 400 mg, or paracetamol; anti-emetic if needed
- ☐ Sumatriptan 50 mg (Imigran Recovery): OTC for confirmed migraine, age 18 to 65
- ☐ Prochlorperazine buccal (Buccastem): OTC for nausea with migraine

Warn patients using acute headache treatment more than 10 days per month about medication overuse headache. Safety-net: seek urgent help if headache changes character or is the worst ever.

Feature	More likely benign	Red flag
Onset	Gradual, over minutes to hours	Thunderclap: maximum intensity within 5 minutes
Severity	Mild to moderate (tension) or moderate to severe (migraine)	Worst headache of life; described as unprecedented
Pattern	Consistent with known personal headache history	New type of headache, or substantially changed from usual pattern
Fever	No associated fever	Worsening headache with fever: possible meningitis or encephalitis
Neurology	None, or reversible migraine aura lasting 5 to 60 minutes	New neurological deficit, confusion, personality change, or impaired consciousness
Neck stiffness	None	Neck stiffness with headache and fever: meningitis until proven otherwise
Trigger	Stress, dietary, menstrual, or sleep-related triggers	Cough, Valsalva, exertion, or sneezing; or worsening on lying down
Age / other	Any age; no scalp tenderness or jaw pain	Age 50+ with new temporal headache, jaw pain on chewing, or scalp tenderness

Key reminders: A thunderclap headache (maximum intensity within 5 minutes, worst ever) is subarachnoid haemorrhage until proven otherwise: call 999. Any new headache with fever, neck stiffness, neurological deficit, or confusion is an emergency; do not manage with OTC analgesia. Sumatriptan 50 mg is available OTC for confirmed migraine (age 18 to 65); warn patients using acute treatment more than 10 days per month about medication overuse headache.

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