



## **Supporting Information**

### **Supplementary methods and results**

**This appendix was part of the submitted manuscript and has been peer reviewed.  
It is posted as supplied by the authors.**

Appendix to: Chu K, Kelly AM, Kinnear F, et al. Primary headache drug treatment in emergency departments in Australia and New Zealand. *Med J Aust* 2022; doi: 10.5694/mja2.51670.

## The HEAD study

The HEAD study was a prospective observational study of emergency department (ED) headache presentations conducted over one month, mostly March, in ten countries during 2019.<sup>1,2</sup> The study we report in this article was a secondary analysis of the Australian and New Zealand data from the HEAD study. The analysis included 44 EDs: 13 in Victoria, nine in New Zealand, eight in New South Wales, five in Queensland, four in South Australia, three in Western Australia, and two in the Northern Territory. EDs were selected from our pre-existing research network, mostly public hospitals across metropolitan and regional centres. Consecutive patients aged 18 years or more with non-traumatic headache as the primary presenting complaint were included. Inter-hospital transfers and re-presentations were excluded. Patients were included in this study if they had a final ED diagnosis of migraine, tension-type, cluster, musculoskeletal, or primary headache not otherwise specified.

1. Kelly AM, Kuan WS, Chu KH, et al. Epidemiology, investigation, management, and outcome of headache in emergency departments (HEAD study): a multinational observational study. *Headache* 2021; 61: 1539-1552.
2. Kelly AM, Chu K. Protocol, head study, headache in Emergency Departments 2018. [https://www.anzctr.org.au/Steps11and12/376695-\(Uploaded-10-01-2019-12-48-42\)-Study-related%20document.pdf](https://www.anzctr.org.au/Steps11and12/376695-(Uploaded-10-01-2019-12-48-42)-Study-related%20document.pdf) (viewed June 2022).

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Table 1. Characteristics of 1521 emergency department patients with primary headache

Characteristic	All patients	Non-ambulance patients	Ambulance patients
Patients	1521	1139 [75%]	382 [25%]
Age (years)			
Median (interquartile range)	41 (29–55)	39 (28–53)	46 (35–62)
> 50 years	481 (32%)	325 (29%)	156 (41%)
Sex (women)	1102 (72%)	821 (72%)	281 (74%)
Referred by			
Self	1272 (84%)	943 (83%)	329 (86%)
General practitioner	249 (16%)	196 (17%)	53 (14%)
Australasian Triage Scale category			
1	2 (0.1%)	1 (0.1%)	1 (0.3%)
2-3	942 (62%)	692 (61%)	250 (65%)
4-5	577 (38%)	446 (39%)	131 (34%)
Headache severity			
Mild	163 (11%)	125 (11%)	38 (10%)
Moderate	539 (35%)	424 (37%)	115 (30%)
Severe	546 (36%)	388 (34%)	158 (41%)
Unknown	273 (18%)	202 (18%)	71 (19%)
Headache duration			
< 1 day	703 (46%)	437 (38%)	266 (70%)
1-3 days	308 (20%)	251 (22%)	57 (15%)
> 3 days	486 (32%)	430 (38%)	56 (15%)
Unknown	24 (2%)	21 (2%)	3 (0.8%)
Nausea or vomiting	774 (51%)	573 (50%)	201 (53%)
Headache diagnosis			
Primary not further specified	703 (46%)	520 (46%)	183 (48%)
Migraine	684 (45%)	516 (45%)	168 (44%)
Tension-type	93 (6%)	74 (6%)	19 (5%)
Musculoskeletal	21 (1%)	15 (1%)	6 (2%)
Cluster	20 (1%)	14 (1%)	6 (2%)
Disposition			
Discharged from short-stay unit	874 (57%)	674 (59%)	200 (52%)
Discharged from emergency department	534 (35%)	385 (34%)	149 (39%)
Admitted to hospital inpatient unit	108 (7%)	76 (7%)	32 (8%)
Unknown	5 (0.3%)	4 (0.4%)	1 (0.3%)

Table 2. Pre-hospital drug treatment of primary headache

<b>Drug</b>	<b>All patients</b>	<b>Non-ambulance patients</b>	<b>Ambulance patients</b>
<b>Patients</b>	<b>1521</b>	<b>1139</b>	<b>382</b>
<b>Self-medicated by patient</b>			
Non-opioid analgesics	600 (39%)	465 (41%)	135 (35%)
Paracetamol	507 (33%)	385 (34%)	122 (32%)
NSAIDs	284 (19%)	239 (21%)	45 (12%)
Opioid analgesics, any	177 (12%)	140 (12%)	37 (10%)
Codeine	109 (7%)	87 (8%)	22 (6%)
Oxycodone	41 (3%)	31 (3%)	10 (3%)
Tramadol	32 (2%)	26 (2%)	6 (2%)
Other opioids	15 (1%)	10 (0.9%)	5 (1%)
Anti-emetics	68 (4%)	48 (4%)	20 (5%)
Triptans	86 (6%)	68 (6%)	18 (5%)
Any of the above self-medicated drugs	721 (47%)	555 (49%)	166 (43%)
<b>Given by ambulance service</b>			
Non-opioid analgesics	94 (6%)	N/A	94 (25%)
Paracetamol	89 (6%)	N/A	89 (23%)
NSAIDs	11 (0.7%)	N/A	11 (3%)
Opioid analgesics, any	96 (6%)	N/A	96 (25%)
Fentanyl	60 (4%)	N/A	60 (16%)
Morphine	31 (2%)	N/A	31 (8%)
Other opioids	7 (0.5%)	N/A	7 (2%)
Anti-emetics	139 (9%)	N/A	139 (36%)
Triptans	2 (0.1%)	N/A	2 (0.5%)
Methoxyflurane	25 (2%)	N/A	25 (7%)
Any of the above ambulance drugs other than methoxyflurane	217 (14%)		217 (57%)
<b>Self or ambulance</b>			
Non-opioid analgesics	673 (44%)	N/A	N/A
Paracetamol	581 (38%)	N/A	N/A
NSAIDs	295 (19%)	N/A	N/A
Opioid analgesics	264 (17%)	N/A	N/A
Anti-emetics	197 (13%)	N/A	N/A
Triptans	87 (6%)	N/A	N/A
Any of the above self- or ambulance drugs	845 (56%)	N/A	N/A

NSAID = non-steroidal anti-inflammatory drug.

N/A = not applicable.

Table 3. Emergency department drug treatment of primary headache

<b>ED drug treatment</b>	<b>Initial and secondary drugs</b>	<b>Initial drugs</b>	<b>Secondary drugs*</b>
Patients	1521	1139	382
None	264 (17%)	N/A	N/A
Non-opioid analgesic	1036 (68%)	853 (56%)	346 (23%)
Paracetamol	876 (58%)	698 (46%)	243 (16%)
NSAIDs	673 (44%)	499 (33%)	223 (15%)
Oral	633 (42%)	476 (31%)	206 (14%)
Parenteral	40 (2.6%)	23 (2%)	17 (1%)
Opioid analgesics, any	495 (33%)	353 (23%)	213 (14%)
Oxycodone	224 (15%)	136 (9%)	111 (7%)
Codeine	214 (14%)	160 (11%)	67 (4%)
Another oral opioid	107 (7%)	68 (4%)	56 (4%)
Any parenteral opioid	58 (4%)	37 (2%)	32 (2%)
Anti-dopaminergic	478 (31%)	307 (20%)	190 (12%)
Prochlorperazine	251 (17%)	150 (10%)	107 (7%)
Metoclopramide	218 (14%)	149 (10%)	74 (5%)
Droperidol	34 (2%)	20 (1%)	14 (0.9%)
Ondansetron	321 (21%)	242 (16%)	97 (6%)
Chlorpromazine infusion	281 (18%)	130 (9%)	160 (11%)
Triptans	46 (3%)	21 (1%)	25 (2%)
Corticosteroids	23 (2%)	9 (0.6%)	14 (0.9%)

NSAID = non-steroidal anti-inflammatory drug.

N/A = not applicable.

\* Secondary drugs were given > 30 minutes after the initial drug was administered. It is unknown whether they were used as rescue medication.