

Headache Version 2.0 NINDS CDE Project

Subgroup in Headache: Imaging and Neurophysiology Completed by: Todd Schwedt (Chair)

1. Approach for selection of elements (How did you go about drafting the recommendations and/or reviewing the current tools/instruments, and did you have any criteria for selection and classification?)

The Imaging and Neurophysiology subgroup reviewed and revised the version 1.0 common data elements. Initially, we reviewed the topics that each CRF described and determined that a case report form on magnetoencephalography (MEG) was needed. A subgroup member volunteered to serve as the person primarily responsible for each of the case report forms. Additional members of the subgroup volunteered to assist with each of the case report forms according to their level of expertise on the topic. Following the initial drafting and revising of each case report form, the subgroup revised and circulated the updated case report forms to the rest of the subgroup for review. Each case report form was then discussed via teleconference and further revisions were made according to subgroup consensus.

2. Differential application to types of Headache (Do the instruments/elements you recommended differ between the types of Headache?)

No

3. Recommendations Summary Table:

Instrument / Scale / CRF	Domain	Sub-domain	Classification
Name			(e.g., Core, Supplemental
Name and acronym of the			- Highly Recommended,
instrument/measure that is			Supplemental,
recommended for inclusion			Exploratory)
In the CDES	Accessments and	Imaging Diagnostics	Supplemental
Anatomical imaging	Assessments and	Imaging Diagnostics	Supplemental
	Examinations		
Cortical Evoked Potentials	Assessments and	Imaging Diagnostics	Supplemental
	Examinations		
Functional Magnetic	Assessments and	Imaging Diagnostics	Supplemental
Resonance Imaging	Examinations		
Magnetic Resonance	Assessments and	Imaging Diagnostics	Supplemental
Angiography	Examinations		
Magnetic Resonance	Assessments and	Imaging Diagnostics	Supplemental
Spectroscopy	Examinations		



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Name			(e.g., Core, Supplemental
Name and acronym of the			- Highly Recommended,
instrument/measure that is			Supplemental,
recommended for inclusion			Exploratory)
In the CDEs	A	Lucito Discontin	C I I . I
Magnetoencephalography	Assessments and	Imaging Diagnostics	Supplemental
	Examinations		
Nexisentine Diale Deflect		lucerie - Die su estin	Cumplemental
Nociceptive Blink Reflex	Assessments and	Imaging Diagnostics	Supplemental
and Pain-Related Evoked	Examinations		
Potentials			
Positron Emission	Assessments and	Imaging Diagnostics	Supplemental
Tomography	Examinations		
Quantitative Sensory	Assessments and	Imaging Diagnostics	Supplemental
Testing	Examinations		
Transcranial Magnetic	Assessments and	Imaging Diagnostics	Supplemental
Stimulation	Examinations		

4. Comparison to other Headache standards (Are there any notable similarities/differences in the CDE recommendations as compared with other standards?)

No

5. Issues unique to Headache (Were there any issues encountered when developing the CDE standards which are unique to Headache or which highlight a unique concern about Headache data collection?

The Imaging and Neurophysiology techniques included within these headache CDEs are used to study other pain and neurological conditions using the same methodology. Since the clinical manifestations of most headache disorders are episodic, documenting the timing of the testing/imaging in relation to symptoms is necessary (e.g. testing/ imaging during a headache; testing/imaging between headaches).

6. Unmet needs; unanswered questions (What unmet need / unanswered questions were identified via the CDE process in Headache? What areas are in need of further research and development?)

Although it is an issue that is not unique to imaging of Headache, there are multiple methods for collecting, postprocessing, and analyzing imaging data. The existence of numerous different techniques can make it challenging to reproduce study results when data are collected by different investigators. Standardizing the methods for imaging data collection, postprocessing, and analyses would likely advance the field more efficiently.