Approximately 28 million people in the United States suffer from recurrent typical migraine, and another 20 million have atypical or migrainous headaches. Four percent to 5% of this population have chronic daily headache consisting of chronic tension-type headache and transformed migraine. Analgesic overuse is rampant. Analgesics, particularly caffeine and butalbital containing agents, are known to perpetuate primary headache disorders, if taken frequently.

Even though migraine and related headache disorders are common, they are still underdiagnosed, undertreated, and often mistreated.

This issue is dedicated to primary headache disorders, covering various aspects of diagnosis, pathophysiology, and treatment. Discussion on treatment also includes nonpharmacologic approaches and alternative therapies. Separate articles discuss headaches in children and hormonally related headaches in women.

Triptans are specific antimigraine agents, introduction of which has revolutionized the treatment of acute migraine and cluster headache. The rational use of triptans is discussed in detail in this issue. Diagnosis and treatment of headaches in the emergency room is of utmost importance to the practicing physician. Even at the present time, most patients get opioids in the emergency room with only partial, incomplete, or no benefit at all. The article on headache in the emergency room gives many effective alternate approaches to acute headache treatment in the emergency room.

The primary purpose of this issue is to enable the physician to appreciate primary headache disorders as a major health problem with a great impact on the patient's lifestyle, productivity, and ability to enjoy life. This issue also will help to familiarize the physician with rational approaches to treatment. I am very happy to point out that the authors are clinicians who specialize in the treatment of primary headache disorders with considerable clinical experience in the field and solid understanding of the complexities of these conditions. Future issues will discuss acute and prophylactic pharmacotherapy in further details.

Thank you very much.

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