

# INTERNATIONAL CONFERENCE

“UPDATE ON  
**CHRONIC HEADACHE  
AND PAIN**”

VIRTUAL

08 OCTOBER 2022 09:00-18:00 GMT+3



## ***ABSTRACT BOOK***

of the national conference with international participation

„ *Update on chronic headache and pain*”,

dedicated to the 30<sup>th</sup> anniversary of the establishment of the Functional Neurology research unit  
at the Diomid Gherman Institute of Neurology and Neurosurgery

Chisinau, 2022



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*Dear Friends,*

It is my great pleasure to invite you to attend our national conference with international participation „ ***Update on chronic headache and pain***”, which will be set up as a Virtual event, on the 8<sup>th</sup> and 9<sup>th</sup> of October 2022 in Chişinău, Republic of Moldova.

The conference will be hosted by Diomid Gherman Institute of Neurology and Neurosurgery in collaboration with the Moldovan Society of the Study and Management of Pain (EFIC Chapter), Moldovan Society of Headache and Pain (EHF chapter), Nicolae Testemiţanu State University of Medicine and Pharmacy, Society of Neurologists of the Republic of Moldova and International Headache Society.

The conference aims to deliver a high-quality educational event for a national, regional, and international audience with the up to date, evidence-based knowledge on chronic headaches and pain. The program is provided with internationally renowned speakers, up-to-date information, and lots of interactivity.

The conference is free of charge and recommended to all interested in chronic headache and pain: students, residents, physicians, and allied specialists. The official language is English and translation in Romanian will be provided.

Please, join us in this remarkable educational event.

Your participation will be a great honor for us.

*With our best wishes,*

*Prof. Dr. Ion Moldovanu*

*President of the Organizing Committee*



## **Organizing Committee**

**President:** Prof. univ. Dr. Ion Moldovanu,

**Co-President:** Prof. univ. Dr. Grigore Zapuhlîh

### **Local members:**

1. Academician, Stanislav Groppa
2. Assoc. prof. Stela Odobescu
3. Dr. Octavian Misic
4. Prof. Vitalie Lisnic
5. Prof. Oleg Pascal
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12. Dr. Oxana Grosu

### **International members:**

1. Prof. Cristina Tassorelli, Italy
2. Prof. Rigmor Jensen, Denmark
3. Prof. Arne May, Germany
4. Prof. Ralf Baron, Germany
5. Prof. Rolf- Detlef Treede, Germany
6. Dr. Sait Ashina, USA
7. Dr. Daniel Oved, Israel
8. Dr. Silviu Brill, Israel
9. Dr. David Garcia Azorin, Spain
10. Dr. Anja Sofia Petersen, Denmark

### **Partners:**

1. Diomid Gherman Institute of Neurology and Neurosurgery, Moldova
2. International Headache Society
3. Moldovan Society for the Study and Management of Pain (EFIC Chapter)
4. Moldovan Society of Headache and Pain (EHF chapter)
5. Society of the Neurologists of the Republic of Moldova
6. Nicolae Testemitanu State University of Medicine and Pharmacy
7. EFIC



## AGENDA

8<sup>th</sup> OCTOBER, 2022, Virtual

**8.30 – 9.00 REGISTRATION**

**9.00 – 10.00 WELCOME (Moderator: Prof. Grigore Zapuhlîh, conf. Stela Odobescu)**

*Diomid Gherman Institute of Neurology and Neurosurgery Director - Mr. Grigore Zapuhlîh*

*State Secretary of the Ministry of Health of the Republic of Moldova – Mr. Ion Chesov*

*Parliamentary Commission for Social Protection, Health, and Family - Mr. Adrian Belîi*

*Vice - Rector of the Nicolae Testemițanu State University of Medicine and Pharmacy of the Republic of Moldova and President of the Society of Neurologists of the Republic of Moldova -*

*Acad. Stanislav Groppa*

*Project Directors - Prof. Dr. Ion Moldovanu and prof. Victor Vovc*

**10.00 – 14.00 SESION I**

**10.00 – 10.45 PREZENTATION I (Moderator: conf. Odobescu, S., Dr. Grosu, O.)**

*Chronic migraine: risk factors, pathophysiological mechanisms, clinical manifestation (prof. Cristina Tassorelli, Italy)*

**10.45 – 11.30 PREZENTATION II (Moderator: Dr. Roceanu, A., Dr. Lozan, T.)**

*Chronic migraine: management (Dr. Oved Daniel, Israel)*

**11.30 – 12.15 PREZENTATION III (Moderator: prof. Moldovanu, I., conf. Rotaru, L.)**

*Chronic tension-type headaches: classification, diagnosis, and management (Ass. prof. Sait Ashina, USA)*

**12.15 – 13.00 PREZENTATION IV (Moderator: conf. Odobescu, S., Dr. Grosu, O.)**

*Chronic trigeminal autonomic cephalalgias: classification, diagnosis, and management (prof. Arne May, Germany)*

**13.00 – 13.45 PREZENTATION V (Moderator: Dr. Roceanu, A., Dr. Lupușor, A.)**

*Chronic secondary headaches: classification, diagnosis, and management (prof. Rigmor Jensen, Denmark)*



**14.00 – 14.30 BREAK**

**14.30 – 17.30 SESSION II**

**14.30 – 15.15 PREZENTATION VII** (Moderator: prof. Belîi, A.)

**Chronic pain classification: CIM II** (prof. Rolf- Detlef Treede, Germany)

**15.15 – 16.00 PREZENTATION VIII** (Moderator: prof. Romanenko, V., conf. Sangheli, M.)

**Chronic neuropathic pain: classification, diagnosis, and management** (prof. Ralf Baron, Germany)

**16.00 – 16.45 PREZENTATION IX** (Moderator: prof. Pascal, O., conf. Pleşca, S.)

**Chronic musculoskeletal pain: assessment and management** (prof. Catherine Doody, Ireland)

**16.45 – 17.30 PREZENTATION XI** (Moderator: Asist. univ. Pogoneţ, V.)

**Chronic cancer pain: classification, diagnosis, and management** (Dr. Silviu Brill, Israel)

**17.30 – 18.00 CLOSING CEREMONY**

**POST – CONFERENCE WORKSHOP**

**9<sup>th</sup> OCTOBER, 2022, Virtual**

**9.00 – 14.00**

**PREZENTATION 30 min +15 min Q&A** (Moderator: Grosu, O., Burmistr, I.)

**09.10 – 09.55 Secondary headaches detection** – David Garcia Azorin, Spain

**10.00 – 10.45 Premonitory Symptoms of Migraine** - Rui Loureiro, Portugal

**10.50 – 11.35 Tips and tricks on the management of medication overuse headache** – Anja Sofie Petersen, Denmark

**11.40 – 12.25 Migraine-like symptoms at onset of ischemic stroke and stroke-like symptoms in migraine with aura** – Adrian Scutelnic, Bern, Switzerland.

**12.30 – 13.15 Flags in headache and pain medicine** – Oxana Grosu, Republic of Moldova

**13.15 – 14.00 CLOSING**



## **SPEAKERS**



**Cristina Tassorelli** is a Full Professor of Neurology at University of Pavia, director of the Department of Brain and Behavioral Sciences, University of Pavia, Director Neurology Residency Program, Director of the Headache Science and Neurorehabilitation Centre of the Neurological Research & Care Institute 'C. Mondino Foundation', and Director of the Complex Unit of Neurorehabilitation, Institute 'C. Mondino Foundation', Pavia, Italy. She completed her MD Degree at the School of Medicine and Surgery of the University of Pavia, trained as neurologist at the Department of Neurological Sciences of the University of Pavia and obtain PhD Degree in Human Psychobiology at the University of Modena. Actively participate in international scientific roles: Chair of the Guidelines for Clinical Trials of the International Headache Society (2015-2019), Member of the Board of Directors of Italian Society of Neurorehabilitation (2014-2019), Member of the Board of Directors of the International Headache Society (2009-2013), Member of the Committee for the Classification of the International Headache Society (2009-present), Scientific Secretary and Scientific Coordinator of the Italian Linguistic Group of International Headache Society (2009-2017), Chair of the Scientific Committee of the International Headache Congress, Vancouver (2017), Expert of the European Medicine Agency (EMA) (2007 – present). Participated in many International projects: EUROHEAD Project, VI Framework Programme of the European Community (2004-2007), Eurolight Project, European Community, Public Health (2007-2010), COMOESTAS Project, VII Framework Programme of the European Community (2008- 2010), New Approach to migraine treatment via selective enhancement of endocannabinoids, Migraine Research Foundation (2019-2022), BIOMIGA Project, ERANET Neuron, European Community (2020-2023). Professor Cristina Tassorelli is the acting president of the International Headache Society.



**Arne May** is a Professor of Neurology in the Department of Systems Neuroscience at the University of Hamburg and head of the headache outpatient clinic and the facial outpatient clinic of the University clinic of Hamburg. His major research interests are the basic mechanisms of facial and head pain, the chronification of pain and plasticity within the human brain. The work of his group involves human imaging studies in primary headache as well as experimental studies of trigeminovascular nociception, with the aim of understanding how to modulate facial and headache syndromes and chronicity of pain. Prior to his position at the University of Hamburg, Professor May was a clinician and conducted research into pain and headache syndromes at the University of Regensburg. Prior to this he completed his residency in the Neurology Department of the University of Essen, followed by post-doctorate studies at the Institute of Neurology in London with Peter Goadsby. Professor May is currently a member of the Board of trustees of the International Headache Society since 2013. He has published more than 300 original and review articles with an h-index of 66 and is since 2016 the Editor of *Cephalalgia* and *Cephalalgia Reports*.



**Dr. Oved Daniel** is a clinical neurologist and headache specialist and the head of the headache & facial pain clinic at Ramat Aviv Medical Center in Israel. As a clinical neurologist, he was the primary investigator of many clinical trials for the treatment of a migraine and cluster headache. He was elected as a board member of the European Academy of Neurology Scientific Panel Headache management group (EAN) 2016-2022, and he is a renown headache specialist and a speaker in many international neurologic conferences around the world. Dr. Daniel is the founder and the president of the Annual International Headache Symposium in Israel (IHSI), and until recently was a section head of the International Controversies in Neurology conferences (CONY), along with Prof. Alan Rapoport, Past President of the International Headache Society. Dr. Daniel has been a key opinion leader in Israel in this field and was rated by the FORBES as one of the best neurologists in Israel in 2018-2022. He is a member of the International Headache Society and the American Headache Society.



**Rigmor Hoejland Jensen** is a full Professor in headache and neurological pain at The University of Copenhagen. Defended her Doctoral Thesis in 1999 at the University of Copenhagen. Co-founder of The Danish Headache Center in 2001 and became the director hereof in 2011. The center was awarded as Global Excellence in Health. Published more than 500 scientific papers and supervised 28 PhD students and more than 50 pre-and postgraduate Master projects. Prior president of The European Headache Federation, a trustee in The International Headache Society, director in EHMTIC and at present director in Lifting the Global Burden of Headache. Present areas of research:

Management of headache, CSF-physiology, Idiopathic Intracranial Hypertension and preclinical models, Medication overuse headache and Cluster headache. Initiated in 2016 an International Academic Master Education in Headache Disorders at University of Copenhagen ([www.mhd.ku.dk](http://www.mhd.ku.dk)). This 2-year education programme has been very successful and at present 25 post graduate students, mostly neurologists, will attend our MHD 4.



**Silviu Brill** is specialist in Anesthesiology and Pain Management, director of the Institute for Pain Medicine, director of the Institute for Cannabis Research Tel Aviv Medical Center, Israel. *Diplomat of European Diploma of Pain Medicine (EDPM)*. Honorary Secretary of European Pain Federation, Past President of the Israeli Pain Association. Dr Brill is Co-Chair of Task force on cannabis-based medicine and chair of the working group on Cancer Pain of European Pain Federation. Dr Brill participate in numerous national and

international committees, and has co-authored about 90 publications in journals and books chapters in various areas of pain including acute pain, neuropathic pain, CRPS, cancer-related pain, opioids and cannabinoids. His main research interest is neuromodulation, psychologic aspects of chronic pain, postsurgical, neuropathic pain and medical use of cannabinoids. Dr. Brill received grants from European Union for Development of an International Pain Registry: Pain-Out, British Chevening Medical Scholarship, Israel Science Foundation, Israel Pain Association and The Israel Cancer Association.



**Sait Ashina**, MD is an Assistant Professor of Neurology and Anesthesia at Harvard Medical School. He is a Director of the Comprehensive Headache Center at Beth Israel Deaconess Medical Center affiliated with Harvard Medical School. He is board-certified in Neurology by the American Board of Psychiatry and Neurology and in Headache Medicine by United Council for Neurological Subspecialties. Dr. Ashina graduated from the University of Copenhagen, Faculty of Health Sciences. He completed a residency in neurology at Montefiore Medical Center, Albert Einstein College of Medicine, and a clinical and research fellowship in Headache Medicine at Montefiore Headache Center and at Danish Headache Center. He is a member of the education committee of the International Headache Society. Dr. Ashina also serves as a member of the International Headache Society headache classification subcommittee for the latest edition of the International Classification of Headache Disorders. He serves on Advisory Board for the Journal of Headache and Pain and Frontiers of Neurology and is an Associated Editor of Neurology Reviews and BMC Neurology. He is training, mentoring, and educating students, residents, and fellows at Harvard Medical School. He is the recipient of the Enrico Geppi Award for excellence in headache research. Dr. Ashina is actively involved in research and has numerous publications. He is currently engaged in several research projects at Harvard Medical School. His research interests include the epidemiology of headache and chronic pain, quantitative sensory testing, human pain models, brain imaging and structural brain lesions in migraine, migraine, and vestibular dysfunction, the implication of photophobia in pathophysiology, and treatment of migraine. He is an investigator of clinical trials in trigeminal neuralgia and migraine, including clinical trials involving novel treatments in migraine.



**Rolf-Detlef Treede** is Professor of Neurophysiology at and deputy managing director of the Mannheim Center for Translational Neuroscience (MCTN) of the Ruprecht-Karls-University Heidelberg in Mannheim, Germany. After obtaining his "Dr. med." degree from Hamburg University in 1981, he joined the Department of Physiology at the University Hospital Eppendorf in Hamburg, Germany, until 1988 and again from 1990-1992. From 1988-1990 he was Visiting Scientist with the Department of Neurosurgery at the Johns Hopkins Medical Institutions, Baltimore, USA, and from 1992-2007 Professor of Neurophysiology at the Institute of Physiology and Pathophysiology of the Johannes Gutenberg University in Mainz, Germany. His wide-ranging interests in the field of pain include



the mechanisms and treatment of neuropathic pain, the cortical representation of pain, peripheral nociceptive transduction mechanisms, pain memory, pain assessment by quantitative sensory testing and clinical neurophysiology. He is President of the German Association of Scientific Medical Societies, Past President of the German Physiological Society, Past-President of the International Association for the Study of Pain, Past Chair of its Special Interest Group on Neuropathic Pain, and Past President of its German chapter. He sits on numerous national and international committees, and has co-authored about 450 publications in journals and books.



**Ralf Baron** Professor Dr med FFPMCAI is Head of the Division of Neurological Pain Research and Therapy at the Department of Neurology, Christian-Albrechts-Universitaet Kiel, in Germany. From 1999-2004, he served as General Secretary of the German Interdisciplinary Pain Society (DIVS), from 2005-2016 he served as a Management Committee Member of the Neuropathic Pain Special Interest Group (NeuPSIG) of the International Association for the Study of Pain (IASP) and from 2008-2010 as a board member of the Deutsche Schmerzgesellschaft. He has been a Councilor of the International Association for the Study of Pain (IASP) from 2010-2016. His main research interest is the pathophysiology and therapy of neuropathic pain states. He has intensive scientific collaborations with several researchers worldwide, e.g., Professor HL Fields, San Francisco, USA, and Professor TS Jensen, Aarhus, Denmark. Professor Baron is associate editor and reviewer for many scientific journals (Advisory Board Member for Nature Reviews Neurology, Associate Editor for the European Journal of Pain). He has been the recipient of the German Pain Award, the Heinrich-Pette-Award of the German Neurological Society and the Sertürner-Award. In 1998 he was awarded a Feodor Lynen fellowship by the German Humboldt Foundation and was visiting professor at the Department of Neurology, University of California, San Francisco. Professor Baron has authored more than 370 publications with his outstanding and motivated research team, and has lectured at numerous conferences and symposia worldwide.



**Catherine Doody** is an Associate Professor in the School of Public Health Physiotherapy and Sports Science in University College Dublin (UCD) Ireland. She qualified in Physiotherapy in UCD, completed an MSc in the University of East London UK, an MSc Mindfulness Based Interventions and a PhD in UCD. Catherine has worked as a Physiotherapist in Ireland and the UK. She has held positions as Head of Subject and Associate Dean of Physiotherapy and Director of the MSc in Neuromusculoskeletal Physiotherapy and is a founder co-director of the Centre for Translational Pain Research in UCD. Catherine is a member of the EFIC Education Committee that developed the Curriculum for the European Diploma in Pain Physiotherapy (EDPP) and is an examiner for the EDPP. Her research interests are in the identification and classification of musculoskeletal pain states according to underlying pain mechanisms, in addition to the evaluation of multidisciplinary approaches to the treatment of chronic MSK pain including Mindfulness Based Interventions. She has published and presented her research widely at national and international conferences, has supervised PhD and MSc research students and has received 1M euro in research funding.



**David García Azorín** obtain Medicinal Doctor license at the Complutense University, Madrid (2011), neurology Specialist (2016) at Hospital Clínico San Carlos, Madrid, Spain. He took the board Neurology exam in 2017 from Union Européenne des Médecins Spécialistes. Principles and Practice of Clinical Research program (2018) at Harvard Medical School, Boston, United States of America. He completes headache medicine fellowship in 2019 at Hospital Clínico Universitario, Valladolid, Spain, Master of Infectious diseases in 2019 at Universidad Oberta de Cataluña, Barcelona, Spain, Master Program of Clinical Research (2019) at Dresden International University, Dresden, Germany, Master of Headache Disorders (2020) At Copenhagen University, Danish Headache Center, Copenhagen, Denmark and Doctor in Philosophy (2021) at University of Valladolid, Valladolid, Spain. David Garcia is author of 112 publications in indexed journals and book chapters. His main areas of interest are diagnosis of secondary headache disorders in the Emergency Department, characterization of other primary headache disorders, and he is currently working on headache attributed to COVID-19 and the diagnosis and management of thrombosis with thrombocytopenia syndrome following COVID-19 vaccination. He serves in many professional societies: Spanish Society of Neurology – as



executive Board member, chair of the international affairs section, neurocooperation program founder and chair, Co-coordinator of the Spanish Registry of Covid-19 and Handbook of Covid-19 for neurologists. World Federation of Neurology – as Spanish Institutional delegate. European Academy of Neurology – as Spanish institutional delegate, member of Africa task force, teaching course sub-committee, infectious diseases, member of headache panel. Union Européenne des Médecins Spécialistes – as secretary of the Neurology section, Spanish institutional delegate, examiner of the BOARD exam. International Headache Society - chair of Secondary Headache special interest group, member of Junior's committee. European Headache Federation as Fellow.



**Rui, Loureiro** is a Neurology Assistant at Centro Hospitalar do Médio Ave, EPE, Portugal. He graduated in Medicine, Instituto de Ciências Biomédicas Abel Salazar, University of Porto (Portugal) in 2005, general Internship at Centro Hospitalar do Porto (Portugal) in 2006. He completed post-graduation program in Epidemiology at the Faculty of Medicine of the University of Oporto (2006-2007), fellowship in electroencephalography and epilepsy in the Stichting Epilepsie Instellingen Nederland, Heemstede (SEIN), Heemstede, Holland (2013-2014), Complementary Internship in Neurology at Hospital de Santo António do Centro Hospitalar Universitário do Porto, Portugal (2009 – 2014). He Works as Neurology Medical Manager, Department of Development, Medical Affairs Section, Bial - Portela & C. <sup>a</sup> S.A., Coronado, Portugal (2018 – 2021) and Neurology Assistant at Hospital Distrital de Santarém, Santarém, Portugal from 2015 – 2017. He works in many Projects: *Study Neurological Symptoms 2 (AcIN2)* - prospective observational study (2009-2011), *European Huntington Disease Network* - multicentric observational study, to assess the phenotypic characteristics of Huntington Disease Patients (2009-2015), *International Citicoline Trial on Acute Stroke (ICTUS)* - randomized controlled trial, double blinded to assess the efficacy of citicoline in the treatment of acute ischemic stroke (2009-2012), *Sexual dysfunction in women with multiple sclerosis* - multicentric, observational, cross-sectional study. Implementation of the study in Neuroimmunology Unit of Hospital de Santo António, Porto, Portugal (2012). He is a member of Portuguese College of Physicians and Surgeons, Portuguese League Against Epilepsy and Portuguese Movement Disorder Society



**Anja Sofie Petersen** was born in Denmark in 1988. Studied Medicine at the University of Copenhagen, Denmark and graduated 2016, and since 2018 work as a PhD-student under professor Rigmor Jensen since 2018. Worked with headache research at the Danish Headache Center mentored by professor Rigmor Jensen since 2012. Published first article in 2014 and have currently published 20 scientific papers on headache disorders, mainly cluster headache and was cited 456 times in the last five years.



**Adrian Scutelnic** is a research fellow and neurology resident at the University Hospital and University of Bern, Switzerland. His main research interests are headache in cerebrovascular diseases and stroke prevention. He has authored many articles on migraine aura and migraine like symptoms in the onset of ischemic stroke. Now he is working on the relation between COVID infection and cerebral venous thrombosis.



**Oxana Grosu** is head of the research unit and clinician at the *Diomid Gherman* Institute of Neurology and Neurosurgery, Headache Center, Chisinau, the Republic of Moldova. She completed medical degree at the *Nicolae Testemitanu* State University of Medicine and Pharmacy (2004), neurology training at the *Diomid Gherman* Institute of Neurology and Neurosurgery in 2007, PhD program in 2011 and defended thesis on chronic migraine in 2014. From 2016 to 2018 completed a master degree in public health at the *Nicolae Testemitanu* State University of Medicine and Pharmacy school of Public Health. Master thesis on the management of chronic pain patients in the health system. She attended Montefiore Headache Center (NY, USA) in 2014 as a short stay fellowship grant from International Headache Society and 2019 – Klagenfurt Pain school as a grant from EFIC. She completed CoCoCare program from the European Academy of Neurology on the development of clinical guidelines. She is involved in a research project funded by the National Agency for Research and Development dedicated to chronic pain „*Use of the principles of 4P medicine (preventive, predictive, personalized and participative) in analyzing risk factors for the onset, perpetuation and progression of chronic pain.*” (2020-2023). She is a member of IASP, EFIC, HIS, EHF and other professional societies.



## ABSTRACTS

CZU:616.833.15-002-092-08

### ***TRIGEMINAL – AUTONIMIC CEPHALALGIAS: from Pathophysiology to Therapeutic Strategies***

***Arne May, MD, PhD***

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Trigeminal autonomic cephalalgia (TAC) is a relatively new term, first proposed by Goadsby and Lipton for a group of primary headaches with pain and autonomic involvement in the area of the trigeminal nerve. Although the headache syndromes of this group, namely cluster headache, paroxysmal hemicrania, and SUNCT/SUNA, clearly share typical clinical features, in most cases a sub-classification is possible and reasonable as therapeutical regimen and response differ. Functional imaging showed that all of these syndromes share a specific activation pattern during the attacks with a prominent activation in the hypothalamic grey matter. This underlines the conceptual value of the term “TAC” for the group of headaches focusing around the trigeminal-autonomic reflex and moreover emphasizes the importance of the hypothalamus as a key region in the pathophysiological process of this entity.

Although the TAC forms a homogenous group of primary headache syndromes with a shared pathophysiology, they are clinically clearly distinguishable and react to different highly specialized treatments. Whereas the acute cluster headache is treated with oxygen inhalation and triptans, the other TAC syndromes may benefit from indomethacin treatment. Recently, the sphenopalatine ganglion came to the fore, based on the observation that functionally blocking this ganglion stops cluster headache attacks and may even have a preventative effect. The most recent treatment option for migraine, namely CGRP-antibodies are clearly effective in some patients but more data need to be published. This lecture will focus on the clinical picture and pathophysiological basis of the TAC and delineate the central and peripheral aspects of this puzzle and will outline the most effective treatment options.

***Key words:*** *trigeminal – autonomic cephalalgias, cluster, SUNCT, SUNA,*



CZU:616.8-009.7-08

***CHRONIC SECONDARY HEADACHES: CLASSIFICATION, DIAGNOSIS AND  
MANAGEMENT***

***Rigmor Hoejland Jensen, MD, PhD***

*Danish Headache Center, The University of Copenhagen*

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Most patients that seek help for their chronic headaches present with a long history of headache, often many years. They may have difficulties in the presentation hereof and therefore it is extremely difficult to take a proper headache history, with eventual triggers and evolution over time. Patients are afraid to suffer from a serious disorder and we as doctors are afraid to overlook it. A secondary headache is defined as a symptom of something else in contrast to the primary headaches as migraine and tension-type headache. A secondary headache can represent anything from a trivial problem as dehydration or a cold to a serious life-threatening disorders as a subarachnoid hemorrhage. Further, the patient can suffer from both a primary headache and one or several secondary headaches, as the ICHD classify headaches not patients. I will try to cover the ideas behind the classification, describe some of the most frequent secondary headaches and their management and discuss the red and green flags.

***Key words:*** *headache, secondary headache, chronic headache.*

CZU:616.857-002.2-08- p.15

***CHRONIC MIGRAINE: MANAGEMENT***

***Oved Daniel, MD***

*Headache & facial pain clinic at Ramat Aviv Medical Center, Israel.*

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Chronic migraine is defined as  $\geq 15$  headache days per month for  $> 3$  months and fulfilment of ICHD-3 criteria for migraine on  $\geq 8$  days per month. In this presentation we will discuss about the management of patients with chronic migraine, i.e., choosing the right prophylactic therapy while avoiding migraine triggers and limiting the use of acute headache medications that are associated with medication overuse headache. Preventive treatments can be classified as first-line, second-line and third-line options. However, choice of medication and the order of use depend on local practice guidelines and local availability, costs and reimbursement policies. Prophylactic interventions may include pharmacotherapy, behavioral therapy, physical therapy, and other strategies. Management often requires the simultaneous use of these different therapeutic modalities as well as Identification and treatment of comorbid disorders.

***Key words:*** *migraine, chronic migraine, management.*



CZU:616.8-009.7-002.2-07-08

***CHRONIC MUSCULOSKELETAL PAIN: ASSESMENT AND MANAGEMENT***

***Catherine Doody, MD, PhD***

*School of Public Health Physiotherapy and Sports Science in University College, Dublin,  
Ireland*

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The evidence suggests the use of a biopsychosocial approach for the assessment and management of people with chronic musculoskeletal pain to best capture the multidimensional aspects of pain. A biopsychosocial approach can inform a tailored approach to the management of chronic musculoskeletal pain. This presentation will discuss the assessment of the multiple domains of chronic musculoskeletal pain, including sensory and affective qualities, temporal dimensions, location and distribution of pain using valid and reliable methods. Assessment of chronic musculoskeletal pain will also include identification of the different pain mechanisms that may contribute to the generation and maintenance of chronic musculoskeletal pain within the context of the biopsychosocial model. The evidence for best practice care and clinical guidelines for chronic MSK pain will be discussed, including physical activity and exercise-based interventions.

***Key words:*** *musculoskeletal pain, biopsychosocial approach, assessment, management.*

CZU:616.8-007.7-002.2-07-02-08

***CHRONIC NEUROPATHIC PAIN: CLASSIFICATION, DIAGNOSIS AND  
MANAGEMENT***

***Ralf Baron, MD, PhD***

*Division of Neurological Pain Research and -therapy, Department of Neurology, University  
Hospital, Kiel, Germany*

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Painful neuropathy represents a major medical problem and treatment has been unsatisfactory. A hypothetical concept was proposed in which pain is analyzed on the basis of underlying mechanisms and sensory abnormalities. If a systematic clinical examination of the patient and a precise phenotypic characterization is combined with a selection of drugs acting at those particular mechanisms, it should ultimately be possible to design optimal treatments for the individual patient.

Several international consortia (German Research Network on Neuropathic Pain, IMI-Europain, Neuropain) established a large data-base that includes epidemiological and clinical data



as well as standardized symptom questionnaires and quantitative sensory testing. More than 2000 patients with different neuropathic pain states have been examined.

Using a subgroup analysis different somatosensory profile could be identified that might be indicative of the underlying pathophysiological mechanism. Several recent clinical trials using this sensory profile-based classification could identify a differential treatment effect in subgroups of patients. Consequently, cohorts in clinical trials should be stratified and potentially enriched with patients who likely respond to the study drug based on the sensory profile. This approach has the potential to minimize pathophysiological heterogeneity within the groups under study and to increase the power to detect a positive treatment result. In clinical proof-of-concept trials the study population can be enriched prospectively on the basis of "a priori" defined entry criteria. This enrichment with patients who potentially require a specific treatment will increase the likelihood for positive trial outcomes.

Neuropathic pain conditions are insufficiently defined or missing in the current version of the ICD. A precise classification is necessary to document the public health burden and the therapeutic challenges. Different from previous editions of the ICD, the new codes for neuropathic pain will be concise and embedded in a systematic classification of chronic pain. They will cover the epidemiologically most relevant conditions and provide clear diagnostic criteria which match the grading system for evidence supporting the diagnosis of neuropathic pain in clinical practice and research.

**Key words:** *pain, neuropathic, chronic pain, trial, classification*

CZU:616.831-009.7-036.1-08

## **TIPS AND TRICKS ON THE MANAGEMENT OF MEDICATION OVERUSE HEADACHE**

**Anja Sofie Petersen, MD**

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**Background:** Medication overuse headache is a prevalent cause of chronic headache and has a 1-year prevalence of 1%- 2% in the general population and in up to 50% in specialized clinics. It is caused by an excess use of pain killers and it can, for many patients, be treated by removing the medication overuse.

**Results:** In the literature, the evidence is clear that medication overuse does occur and restricting the acute medication is an effective treatment. When the correct diagnosis has been made, the withdrawal therapy can, in many cases, be achieved by simple counseling. The excess



use of acute medication may reflect a poorly controlled primary or secondary headache. Therefore, the restrictions on the intake of acute medication may be favorably coupled with preventive medication in many cases. Medication-overuse headache can be prevented by careful information and adhering to the maximal recommended use for triptans and combination therapies (<10 days per month) or simple analgesics (<15 days per month).

**Conclusion:** Medication overuse headache can, for the majority of patients, be treated and prevented, but it requires that the medication overuse is detected, and the correct treatment is initiated.

**Key words:** medication overuse, headache, secondary headache

CZU:616.858-009.7-07-08

## **PAIN PRESENCE IN PARKINSON'S DISEASE PATIENTS. PRELIMINARY RESULTS OF THE COHORT STUDY.**

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**Background.** Pain is frequent in Parkinson's disease (PD) and has a great impact on quality of life.

**Material and methods:** 102 consecutive PD patients, (mean age  $61.51 \pm 8.87$  y.o.; disease duration  $65.78 \pm 41.34$  mo.; 55 women (53.9%), 47 men (46.1%)) were evaluated for pain presence and divided into: (1) "BP pain + " and (2) "BP pain -"

**Results:** There were similar: ages ( $61.02 \pm 9.61$  vs.  $62.51 \pm 7.69$  y.o.) and levodopa equivalent daily dose ( $729.85 \pm 483.29$  vs.  $708.31 \pm 357.50$ ), in groups. Pain was present in 64 patients (62.7%) of all study group and in 90 % of cognitively preserved patients; more frequent in women (36p (56.3%) vs. 28p (43.8%),  $p > 0.05$ ), motor fluctuations (21p (72.4%) vs. 8p (27.6%),  $p > 0.05$ ), dyskinesia (16p (64.0%) vs. 9p (36.0%),  $p > 0.05$ ) and restless leg syndrome patients (8p (72.7%) vs. 3p (27.3%),  $p > 0.05$ ). Akinetic-Rigid Score ( $0.83 \pm 0.80$  vs.  $0.64 \pm 0.56$ ,  $p > 0.05$ ), and quality of life score (PDQ39:  $59.70 \pm 25.46$  vs.  $53.84 \pm 35.76$ ,  $p > 0.05$ ) were insignificant higher in "BP pain + "patients. They had longer disease duration ( $74.19 \pm 39.99$  y.o. vs  $53.29 \pm 41.06$  y.o.  $p=0.017$ ), higher scores for: depression (Beck DI:  $16.36 \pm 11.97$  vs.  $8.09 \pm 6.42$ ,  $p=0.000$ ), psychological (SCOPA-PS:  $10.28 \pm 6.20$  vs.  $4.77 \pm 2.82$ ,  $p=0.000$ ) and non-motor symptoms (NMS:  $66.27 \pm 39.25$  vs.  $46.68 \pm 32.56$ ,  $p=0.015$ )

**Conclusions:** Pain is common in PD patients, especially in those with a long disease duration and with motor complications. It is associated with depression and other non-motor symptoms.

**Key words:** Parkinson's disease, pain, non-motor



CZU:616.831-005.1-02-07-06+616.857-09

***MIGRAINE LIKE SYMPTOMS AT THE ONSET OF ISCHEMIC STROKE AND STROKE-LIKE SYMPTOMS IN MIGRAINE WITH AURA***

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***Background and Objectives:*** In general, suddenly occurring neurologic deficits, i.e., negative neurologic symptoms, are considered symptoms of focal cerebral ischemia, while positive irritative symptoms with gradual onset are viewed as characteristics of migraine aura. Nevertheless, cortical spreading depolarization, the pathophysiological basis of migraine aura, has also been observed in acute ischemic stroke. The aim of our study was to determine the frequency of migraine aura-like symptoms at ischemic stroke onset and stroke-like symptoms in migraine with aura.

***Methods:*** We interviewed 350 consecutive patients with ischemic stroke and 343 with migraine with aura using a structured questionnaire. Stroke diagnosis was confirmed by imaging and migraine with aura was diagnosed according to the current criteria of the International Headache Society. Patients with wake-up strokes or severe cognitive deficits that precluded a useful interview were excluded from the study.

***Results:*** Seventy-eight stroke patients (22.3%) reported visual symptoms, 145 (41.4%) sensory symptoms, 197 (56.3%) a paresis and 201 patients (57.4%) more than one symptom, compared to 326 migraine with aura patients (95%) with visual symptoms ( $p < 0.001$ ), 175 (51%) with sensory symptoms ( $p = 0.011$ ), 50 (14.6%) with paresis ( $p < 0.001$ ) and 211 (61.5%) with more than one symptom ( $p = 0.27$ ). Among stroke patients, migraine-like symptoms were frequent: 36 patients (46.2%) with visual disturbance and 78 (53.8%) with sensory symptoms experienced irritative sensations. Paresis-onset in stroke lasted longer than 5 minutes in 43 patients (21.8%). Spreading of sensory and motor symptoms occurred in 37 (25.5%) and 37 (18.8%) patients, respectively. Stroke-like negative symptoms in migraine with aura occurred in 39 patients (12%) with visual symptoms, in 55 (31.4%) with sensory symptoms, and paresis appeared suddenly in 14 patients (28%). More than one symptom in succession occurred in 117 stroke (58.2%) and in 201 migraine with aura patients (95.3%;  $p < 0.001$ ).

***Conclusion:*** Many stroke patients experience migraine-like symptoms at stroke onset and many migraine with aura patients stroke-like symptoms. Though overall the symptom frequencies of the two groups are significantly different, to clarify the differential diagnosis in an individual patient requires additional history elements, physical findings or results of ancillary investigations.

***Key words:*** *stroke, migraine, aura, ischemic stroke*



CZU:616.831-009.7-02-08

## ***FLAGS IN HEADACHE AND PAIN MEDICINE***

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The presentation will focus on flags and their utility in headache and pain medicine. The subject is very large and applied in different areas of medicine. To understand the flag concept, we must discuss about the level of concern about something (it could be health problem, symptom, sign, or laboratory result). Like traffic light that tell us to go or not to go. If everything is ok (no warning signs, we can proceed if something is rising a concern we must act). In front of a patient, we need to decide if there is a level of concern. If there is none, management can begin, no additional work up is required. If there is some concern, we could consider work up plan, additional referral, or examination. We could start a trial treatment but will need to monitor the patient over time and revise the management if necessary. If there is a high level of concern, we must act and we need to evaluate the urgency. Is it a medical emergency that requires immediate action or something that could wait a few days, but still requires urgent referral. Red flags should be regularly considered and re-evaluated. It is not enough to simply consider red flags at the initial assessment. In medicine, a red flag is a sign or symptom that alerts us to the possible presence of a serious or life-threatening condition that may be easily overlooked by the non-specialist in both primary and secondary care They are not diagnostic on their own and may mean little if not supported by other findings in the history and examination, but they raise suspicions and help us stratify risk. Red flags have medicolegal significance. Failing to ask about them can lead you to miss a serious diagnosis and suggests that you did not consider it or attempt to rule it out. Unnecessary referrals and diagnostic testing need to be balanced against the risk of missing a diagnosis. The red flag concept is of immense value in facing this challenge. Generally, every discipline or even every disease have their own red flags but there are some common ones stratified as acute red flags and chronic red flags. The FLAGS Framework encourages clinicians to not simply rely on one red flag, but rather to consider the context of the patient and the context of the red flag/s, including symptom progression and co-morbidity.

***Key words:*** *headache, pain, flag system, red flags.*



**Brief report**

**Moldovan Society of Headache and Pain**

**Society of the Neurologists of the Republic of Moldova**

**Diomid Gherman Institute of Neurology and Neurosurgery**

The National Conference with international participation " **Update on chronic headache and pain** " has come to an end, bringing famous names in the headache and pain field virtually to Chisinau.

It was a unique scientific and educational event, which was hosted by the Diomid Gherman Institute of Neurology and Neurosurgery in collaboration with the Society of Neurologists, the Society for the Study of Pain (EFIC chapter), the Society of Headache and Pain (IHS chapter) and Nicolae Testemițanu State University of Medicine and Pharmacy from the Republic of Moldova.

The scientific program was endorsed by two professional societies in the field: the International Headache Society and the EFIC – European Pain Federation. It included 13 international speakers from 8 countries: USA (1), Italy (1), Israel (2), Germany (3), Denmark (2), Spain (1), Portugal (1), Ireland (1). As moderators were well-known personalities from the Republic of Moldova, Romania, and Ukraine.

The main event took place on October 8, 2022, being separated into 2 sessions. The first session dedicated to chronic headache was opened by Professor Cristina Tassorelli (Italy) – the acting president of the International Headache Society who spoke about the pathophysiological mechanisms that determine the chronicity of migraine. He followed the lecture of the president of the Israeli Headache Society, Mr. Oved Daniel, who explained the progress in the treatment of chronic migraine. The session dedicated to chronic headaches was completed with relevant information regarding the management of chronic tension-type headaches presented by ass.prof. Sait Ashina (USA), vegetative trigeminal headaches – Prof. Arne May (Germany) and secondary headaches – Prof. Rigmor Jensen (Denmark).

The second session was dedicated to chronic pain and was opened by Professor Rolf-Detlef Treede (Germany) who presented the Chronic Pain Classification recently introduced in the International Classification of Diseases, version 11 (ICD 11) by the World Health Organization and recommended to all countries for use from February 2022. Presentations followed on chronic neuropathic pain – Prof. Ralf Baron (Germany), chronic musculoskeletal pain – Prof. Catherine Doody (Ireland) and cancer-related pain – Prof. Silviu Brill (Israel).



On October 9, a workshop dedicated to young specialists was held that discussed practical aspects of the diagnosis and management of chronic pain. It was organized with the Junior Committee of the International Headache Society.

There were 380 registered participants from Moldova, Romania, USA, Peru, India, Thailand, Tunisia, Turkey, Finland, Great Britain, Chile, Ukraine, Israel, Brazil, Poland, Mexico, Portugal, Australia, and Russia, almost 300 participants connected to the conference.

For all interested parties, the recordings of the presentations are available on the event web page: [https://durere.md/conferinta\\_2022](https://durere.md/conferinta_2022)

Chronic pain is a poorly developed topic in the Republic of Moldova and through this event an attempt is made to increase awareness of this topic among professionals, civil society, and decision-makers.

Sincerely

On behalf of the Organizing Committee,

*Dr. Oxana Grosu, MD, PhD,*

*Master Public Health,*

*consultant Headache Center,*

*head of the scientific research unit,*

*Diomid Gherman Institute of Neurology and Neurosurgery,*

*Vice – president of the Society of Neurologists from the Republic of Moldova,*



 International Headache Society

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MINISTERUL SĂNĂTĂȚII AL REPUBLICII MOLDOVA

ORDIN  
mun. Chișinău

05 octombrie 2022

nr. 928

**Cu privire la organizarea conferinței  
naționale cu participare internațională  
„Durere cronică: actualități și perspective”**

Pentru organizarea eficientă a întrunirilor științifico-practice cu tematică medicală și farmaceutică, în scopul îmbunătățirii continue a calității serviciilor medicale și farmaceutice, precum și întru perfecționarea nivelului profesional al medicilor și farmaciștilor, în baza articolelor 195, 212, 213, 214 ale Codului Muncii, Hotărârii Guvernului nr. 10 din 05.01.2012 pentru aprobarea Regulamentului cu privire la detașarea salariaților entităților din Republica Moldova, în temeiul prevederilor art. 121 al Codului Educației al Republicii Moldova, Ordinului Ministerului Sănătății al Republicii Moldova nr. 435 din 12.05.2022 „Cu privire la reglementarea sistemului național de educație medicală și farmaceutică continuă”, Regulamentului cu privire la organizarea și funcționarea Ministerului Sănătății, aprobat prin Hotărârea Guvernului nr. 148 din 25.08.2021,

**ORDON:**

1. A organiza, în perioada 08-09 octombrie 2022, conferința națională cu participare internațională on-line „Durerea cronică: actualități și perspective” în cadrul proiectului de stat „Utilizarea principiilor medicinei 4P (preventive, predictive, personalizate și participative) în analiza factorilor de risc pentru debutul, perpetuarea și progresarea durerii cronice”, 20.80009.8007.01, pentru medicii neurologi.
2. A desemna în calitate de organizatori Societatea de Studiu al Durerii din Republica Moldova; Societatea de Cefalee și Durere din Republica Moldova; Societatea Neurologilor din Republica Moldova, Societatea Internațională de cefalee (IHS) și EFIC, care vor asigura buna desfășurare a evenimentului menționat, în conformitate cu agenda (anexa nr.1).
3. Participanților la conferința națională cu participare internațională on-line „Durerea cronică: actualități și perspective” li se acordă **12 credite** de educație medicală continuă, **seria MNR, codul XXII și numerele 729-878** pentru certificatele de participare, în conformitate cu pct. 16 și 31 din Regulamentul cu privire la reglementarea sistemului național de educație medicală și farmaceutică continuă aprobat prin Ordinul Ministerului Sănătății nr. 435 din 12.05.2022.
4. Conducătorii instituțiilor medico-sanitare vor permite participarea la eveniment a specialiștilor din subordine, conform listei (anexa nr. 2).
5. Controlul executării Ordinului în cauză se asumă dlui Ion Prisăcaru, Secretar de Stat.

MINISTRU

Ala NEMERENCO



**CERTIFICATE OF ATTENDANCE**  
THIS IS TO CERTIFY THAT

[Redacted Name]

**HAS ATTENDED THE CONFERENCE**  
**"UPDATE ON CHRONIC HEADACHE AND PAIN"**

08 OCTOBER 2022  
CHIȘINĂU, THE REPUBLIC OF MOLDOVA

12 CME credits Ord. 928 MNR XXII

CHAIR OF THE ORGANIZING COMMITTEE  
PROF. DR. MOLDOVANU ION

CO - CHAIR OF THE ORGANIZING COMMITTEE  
PROF. DR. ZAPUHLIŢH GRIGORE



### FOTO REPORT

**INTERNATIONAL CONFERENCE**

**PROF. CRISTINA TASSORELLI, ITALY**

Активация V



**INTERNATIONAL CONFERENCE**



**PROF. RIGMOR JENSEN, DENMARK**

Активація W



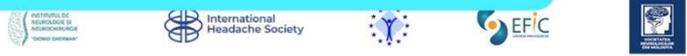
**PROF. ARNE MAY, GERMANY**



**INTERNATIONAL CONFERENCE**



**DR. OVED DANIEL, ISRAEL**



Beth Israel Lahey Health  
Beth Israel Deaconess Medical Center



## Chronic tension-type headaches: classification, diagnosis, and management

**Sait Ashina, MD, FAHS**

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