



Abstracts

Articles appearing in the February 2021 issue

Prevalence of Occipital Neuralgia at a Community Hospital-Based Headache Clinic

Background Occipital neuralgia (ON) is a paroxysmal disorder involving lancinating pain that originates in the neck or skull base with superior radiation toward the apex. ON more commonly occurs in patients with other coexisting headache disorders. There are limited data regarding the prevalence of ON. This study aims to demonstrate the prevalence of ON in a community hospital-based headache clinic.

Methods This IRB-approved retrospective study was conducted at the Cambridge Health Alliance Headache Clinic. Medical records of patients presenting with headache as a chief complaint were reviewed from January 2010 to September 2015.

Results Of 800 study patients, 81% were females (n = 648). A total of 195 patients were diagnosed with ON, and 146 patients had a positive occipital Tinel sign on examination. Isolated ON was present in 15.38% (n = 30) of patients. Multiple regression analysis demonstrated that the odds of ON were higher in patients with chronic migraine vs episodic migraine (adjusted odds ratio = 2.190 [95% confidence interval: 1.364–3.515]), even when adjusted for significant covariates.

Conclusion ON occurred in nearly 25% of patients presenting with a chief complaint of headache to a community hospital-based headache clinic. Among patients with ON, 15% presented with ON as the chief complaint without another coexisting headache disorder. As such, up to 85% of ON cases occurred in patients having an additional headache type. Approximately 75% of patients with ON had a positive occipital Tinel sign on examination. Elevated body mass index, higher age at presentation, and chronic migraine increased the odds of having ON. Undiagnosed or inadequate treatment of ON can increase the frequency and intensity of other comorbid headache disorders.

[NPub.org/NCP/9616a](https://pubmed.ncbi.nlm.nih.gov/33816166/)

Genetic Testing for Parkinson Disease: Are We Ready?

Purpose of Review With the advent of precision medicine and demand for genomic testing information, we may question whether it is time to offer genetic testing to our patients with Parkinson disease (PD). This review updates the current genetic landscape of PD, describes what genetic testing may offer, provides strategies for evaluating whom to test, and provides resources for the busy clinician.

Recent Findings Patients with PD and their relatives, in various settings, have expressed an interest in learning their PD genetic status; however, physicians may be hesitant to widely offer testing due to the perceived low clinical utility of PD genetic test results. The rise of clinical trials available for patients with gene-specific PD and emerging information on genotype-phenotype correlations are starting to shift this discussion about testing.

Summary By learning more about the various genetic testing options for PD and utility of results for patients and their care, clinicians may become more comfortable with widespread PD genetic testing in the research and clinical setting.

[NPub.org/NCP/9616b](https://pubmed.ncbi.nlm.nih.gov/33816167/)

Practice Buzz

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