**A-** **Demographic information**

**1-What is your main speciality?**

Neurology

Anesthesiology and Reanimation

[Physical Therapy and Rehabilitation](https://medicalparkinternational.com/en-us/Pages/Physical-Therapy-and-Rehabilitation.aspx?BranchID=29)

Others

**2- What is your subspeciality?**

Algology

Clinical Neurophysology

İntensive Care Unit

None

Other

**3- At what type of hospital do you work in?**

University Hospital

Foundation University Hospital

City Hospital

Training and Research Hospital

Public Hospital

Private Hospital

Private Clinic

**4- For how long you have been in working in you speciality?**

Resident

1-5 years

6-10 years

11-15 years

* 1. years

>20 years

**5- For how long you have been in working in your subspeciality?**

None

Resident

1-5 years

6-10 years

11-15 years

* 1. ears

>20 years

**6- The town you work at can be described as ?**

Town

City

Metropole

Other

**7-How old are you?**

20-25years old

26-30 years old

31-35 years old

36-40 years old

41-50 years old

51-65 years old

>65 years old

**8- Your gender is?**

Female

Male

Other

**B- Patient and Clinical Approach**

**Case:** Our patient is a 40 years old , college graduate, married woman with 2 kids. She has been having, mostly unilateral, throbbing headaches since 15 years old. Her pain can be triggered by menstruation, hunger, stress, fatigue, season changes and long screen exposure. Pain is accompanied by photophobia, phonofobia, nausea and vomiting. Sometimes, she sees bright lights before the pain. She has 20-25 pain per month. Her VAS score is >8. She states that her headache is worse since ten years, after the birth of her first child. She uses 25 tb of triptan per month. She also used tradition methods for pain relief.

She has atopic rhinitis, irritable bowel syndrome, anxiety disorder and obsessif compulsive disorder, essential tremor, hypertension, patent foramen ovale. Her mother, grandmother and aunt has similar headaches, her mother and father has hypertension and her father has essential tremor.

Her neurological examination is normal. She is obese (BMI :29), her nose is hyperemic and she has paranasal sinus tenderness. She has both cranial and extracranial trigger points and allodinia. She seemed depressed and anxious. She was suffering from insomina and depression.

**Q1: What is your first choice for diagnosis?**

Medication overuse headache

Headache related to psychiatric disorders

Migraine

Tension type headacde

Sinusit related headache

Nociplastic pain syndrome

Fibromyalgia

Elevated intracranial pressure

Headache related to intracranial pathologies

Other

**Q2: What is your second choice for diagnosis?**

Medication overuse headache

Headache related to psychiatric disorders

Migraine

Tension type headacde

Sinusit related headache

Nociplastic pain syndrome

Fibromyalgia

Elevated intracranial pressure

Headache related to intracranial pathologies

Other

**Q3: What is your third choice for diagnosis?**

Medication overuse headache

Headache related to psychiatric disorders

Migraine

Tension type headacde

Sinusit related headache

Nociplastic pain syndrome

Fibromyalgia

Elevated intracranial pressure

Headache related to intracranial pathologies

Other

**Q4: Which methods dou you use for diagnosis?**

Neuropsychological Examination

Lumbar puncture

Neuroimaging

Paranasal sinus CT

Not necessary

**Q5: Do you plan prophylactic treatment?**

Yes No (if no, go to section C)

**Q6: Which group of drugs do you prefer for prophylaxis?**

Beta blocker

Antidepressant

Anti-CGRP antagonist

Calcium Channel Blockers

Antiepileptics

Botulinum toxin injections

**Q7: In prophylaxis, how long would you recommend using the treatment you have chosen for the minimum period of time??**

2-4 weeks

6-8 weeks

10-12 weeks

>12 weeks

Ohers

**Q8: Would you consider bridge therapy appropriate until the effect of the prophylaxis agent begins??**

Yes No (if no, go to question 10).

**Q9: Which method would you choose for bridge therapy?**

Peripheral Nerve Blockage

Oral steroid

IV steroids

Magnesium

Anti-emetics

Others

**Q10: How do you stop the medication you think is overused??**

I'll cut immediately

I cut down gradually

I plan treatment without cutting trhe overused drug

I will continue with prophylaxis until recovery

**C—Questions about online meetings**

**1-Have you attended our meetings organized by the Global Migraine and Pain Association and broadcast live on Doctorclub platform on Tuesday evenings in 2021 with the main topics of Neurology and Algology?**

No, I did not participate

No I didn't participate but I watched the recordings

Yes I attended (Neurology meetings only)

Yes I attended (Algology meetings only)

Yes I attended (less than 5 meetings)

Yes I attended (10-20 meetings)

Yes, I attended all of them.

**2-** **Did you find these meetings are useful?**

Yes No

**3-** **Which part of the meetings do you think is more beneficial??**

History of pain videos

Case Reports

Argument

Question answer

**4-** **What part of the meetings do you look forward to and think is interesting for you to watch?**

History of Pain videos

Case Reports

Argument

Question answer

**5-** **Did you participate in the question and answer part of these meetings?**

Evet Hayır

**6-** **Do you think these meetings contributed to answering the patient question above?**

Yes, absolutely

Yes, partially

Maybe

I couldn't comment

No

**7- Did your participation in the meetings contribute to your daily practice??**

Yes, absolutely

Yes, partially

May be

I couldn't comment

No

**8-** **How did you hear about these meetings?**

Announcement came to my e-mail address

I got news from social media groups by message

I learned from my friends

I coincidence saw your promotion

Other

**9-** **Do you have any suggestions for meetings?**