

Headaches

Recurrent and chronic head pain can dramatically disrupt daily activities, from work to caring for the children. There are various types of headaches brought on by tension, stress or other biological and physiological mechanisms. A chronic headache is one that recurs often, from daily to every other day. In most cases, chronic headaches occur at least 15 days out of the month.



Depending on the type of headache, most are experienced by women over men. In fact, approximately 70 percent of all Americans experience a reportable headache that affects daily living (Goadsby, et al., *J Neurol Neurosurg Psychiatry* 2002).

Of this number, the majority are women. Women are prone to developing tension and migraine headaches, while men are more prone to developing a cluster headache. The three types of headaches are detailed below.

What is a Tension Headache?

A tension headache arises due to tense muscles in the neck, back and base of the head. Tension headaches are the most common form of head pain affecting up to nearly 80% of the population at least one time during life. While research is ongoing, many scientists believe that stress and poor posture are major contributors of tension headaches.

The symptoms associated with a tension headache involve tightness around the head, much like wearing a tight band around the head. Pain may range from mild to moderate along both sides of the head. Although rare, some patients report pain only on one side of the head, but most experience pain on both sides. The tension headache typically lasts for 30 minutes, although it may be experienced for up to one week at a time with little to no relief.

Tension headaches that are chronic in nature, occurring more than fifteen days out of the month, require treatment. Intermittent headaches may be resolved by over-the-counter medications combined with stress reduction therapy. However, chronic tension headaches require preventive therapy and medication, along with other forms of pain relief treatment.

What is a Migraine Headache?

A migraine headache causes severe pain and throbbing unilaterally along the head. Eye pain is common with a migraine headache. Over 29 million Americans suffers from migraine headaches, according to the National Headache Foundation.

These types of headaches present throbbing pain that is moderate to severe in nature, often aggravated by physical activity or movement. Many report that they must lie down in a dark environment and rest during an episode.

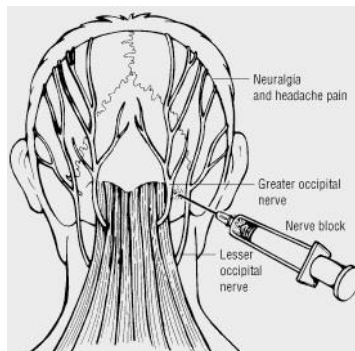
Migraines affect women three times more than men and often occur at the onset of menstruation. Ongoing research links migraine headaches to changes in the hormonal cycle, although studies have yet to be proven. What is known is that the pain can be significant and debilitating in nature, often causing the afflicted individual to miss work.

Criteria for chronic migraine headaches have been established by the International Headache Society as follows:

- Headache of migraine quality occurs at least fifteen days per month for at least three months.
- Over eight days per month the person experiences the pain and symptoms of migraine without aura and/or treats and experiences relief before symptoms truly develop.

During an attack a patient may experience nausea, vomiting or a heightened sensitivity to light that is known as photophobia. The treatment goal of chronic migraine headaches is to reduce pain and prevent the episodes from occurring.

Prescription medication may be administered and preventative meds may be given. Injections for pain may be administered, as well as therapy and massage.



Occipital Nerve Block

Migraine treatments are varied and may consist of:

- Medications – abortive and preventive such as opiates, anti-nausea and Butalbital
- Acupuncture
- Biofeedback
- Chiropractic treatment
- Massage
- Hormone and Vitamin treatments

Injection treatments for migraines continue to expand and may include:

- Botox Injections
- Sphenopalatine Nerve Blocks
- Occipital Nerve Stimulation
- Occipital Nerve Blocks
- Cervical Facet Injections
- Supra/Infraorbital Nerve Blocks
- Cervical Epidural Steroid Injections
- Supratrochlear Nerve Blocks

What is a Cluster Headache? A cluster headache affects more men than women, although the reason and mechanism is somewhat unclear. Cluster headaches may occur off and on for several weeks at a time and chronic cluster headaches may go on for months. Patients experience severe pain in cluster periods of time that can persist for days, weeks and even months.



Cluster headaches are debilitating and require pain management in order for the patient to carry out daily activities, such as work and childcare. Approximately 5% of all patients with cluster headaches have a hereditary condition that cannot be cured, but managed (Vliet, et al., *J Neurol Neurosurg Psychiatry*, 2003).

Pain relief is essential to providing the patient with a quality of life they deserve. The pain is severe and usually affects the same side of the head with each attack. While there may be periods of remission that last for months at a time, periods of clusters may also last for months.

Over-the-counter medications are not effective in the treatment of cluster headaches because the onset is sudden. As quickly as an episode presents itself, the condition may subside for a short period of time as well. Preventive medications are often administered to help prevent the onset of these abrupt episodes of head pain.

Other forms of treatment for cluster headaches include injectable medications that provide quick relief and are fast acting to combat the pain. Nasal sprays and oxygen inhalation have also been proven effective in providing relief for a cluster headache.

If your head pain is severe and chronic, occurring more than 15 days per month, it is important to discuss the issues with pain management doctor and find out what kind of pain relief is available. Be sure to provide an accurate description of your symptoms so that you and your pain relief specialist can determine the most favorable course of treatment.