



TENSION HEADACHES, MIGRAINES, AND MORE

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WHEN HEADACHES DISRUPT YOUR LIFE

Headaches come in many forms. Where you feel the pain, what other symptoms you have, and how long headaches last can vary. For many people, headaches are an occasional nuisance. For others, they can be chronic and disabling.

Some headaches can be prevented with small lifestyle changes. Drinking enough water, avoiding headache triggers, managing stress, or improving sleep can sometimes be enough. Other headaches may require more intensive interventions.

NIH researchers are working to develop more options for people who aren't helped by current treatments.

TYPES OF HEADACHES

There are many types of headaches. Understanding the type you're having can help you find the right treatment.

The most common is called a tension-type headache. These are often triggered by stress, which causes muscles in the neck, face, scalp, and jaw to tighten. Lack of sleep, dehydration, and poor posture can also lead to a tension-type headache.

The pain from a tension-type headache is usually mild to moderate and can be felt on both sides of the head. Some people have chronic tension-type headaches. These happen frequently and can last for hours to days, or even constantly.

"We define chronic headache as having more than 15 headache days per month. So, more days with headache than not," says Dr. Michael Oshinsky, a pain expert at NIH.

Other common headaches are those caused by migraine. Migraine isn't just a headache. It's a complex brain condition. Migraine headaches often occur on one side of the head. But they can also be on both sides. Migraine attacks can include nausea, vomiting, mood changes, extreme tiredness, and sensitivity to light, noise, and smells. Attacks can last for hours to days.

"Migraine is a disorder where the 'volume knob' of the nervous system has been turned up," explains Dr. K.C. Brennan, a migraine researcher at the University of Utah. "In people with chronic migraine, it stays turned up."

There are many other types of headaches. One that causes extremely painful, sudden attacks is the cluster headache.



These attacks can happen around the same time each day or every other day for several weeks.

Some people, such as combat veterans, live with post-traumatic headaches. These are headaches that linger after a traumatic brain injury or a concussion. They can last long after the injury is healed. Other, rarer types of headaches can be caused by nerve problems in the head area.

Headaches can also be caused by other health conditions. Brain injury, stroke, seizures, infections, high blood pressure, and other conditions can all lead to headaches. These are called secondary headaches.

If you have headaches that disrupt your daily life, talk with your doctor. They can help you find relief or refer you to a specialist.

Some headaches may indicate a dangerous medical problem that needs immediate medical attention.

TRYING TREATMENTS

You can help take control of your headaches by keeping a headache diary. Track your symptoms, how often they happen, and what alleviates them.

"For at least a month, just note down when you have a headache, how you treated it, how long it lasted," Oshinsky says. You can also include facts like foods or drinks consumed, sleep patterns, stress levels, and changes in daily routines.

This can help you identify what might have triggered the headaches so you can work to avoid them. Sharing your diary with your doctor can help them better understand the type of headaches you're having and suggest a treatment plan.

Over-the-counter pain relievers can help some people with occasional headache pain. Others may need to try prescription drugs.

But frequently taking painkillers for headaches may make things worse, Oshinsky explains. "If you use painkillers more than three or four times a week, once the drug is out of your system you can get a rebound headache," he says.

People with frequent or chronic headaches can try preventive treatments. These stop headaches from starting, rather than dulling the pain once they start. For example, a type of medication called CGRP drugs helps many people with migraine have fewer attacks.

But the available preventive treatments don't work for everyone. Researchers are looking for other ways to stop headaches from forming.

Brennan's team is studying a compound called glutamate. Glutamate is important for normal brain function and helps nerve cells communicate. But Brennan's team has found that it may sometimes also play a role in triggering migraines.

"We need to figure out how this unusual glutamate activity works, in what brain cell type, and under what conditions, in order to develop a more tailored approach to migraine treatment," he says.

Other treatments for headaches don't involve drugs at all. Some people get relief with a type of talk therapy called cognitive-behavioral therapy, or CBT. This includes learning coping strategies and ways to think differently about pain.

"There are changes in the brain after doing CBT, just like there are changes in the brain after using medications," says Dr. Hadas Nahman-Averbuch, who studies migraine pain at Washington University in St. Louis. Other people find relief using mind-body techniques such as mindfulness practice or biofeedback, she adds.

SMALL HEADS, BIG ACHES

Headaches are common in kids, too. Often, headaches in children and teens can be treated by drinking more water, having a healthier diet, getting enough activity, and solving sleep problems. Always talk to a doctor before giving headache medicines to a child.

Sometimes, it can be difficult to figure out what kind of pain a child is feeling. "A very young child with a migraine headache will often point to their stomach first and say, 'my stomach hurts,'" Oshinsky says.

Migraine headaches often run in families. So parents who live with these headaches may want to be on the lookout for them in their kids, Oshinsky adds.

Puberty can trigger new or worsening migraine headaches in teens, especially girls, says Nahman-Averbuch. She and her team are studying how hormone changes may affect migraine pain. They want to develop tests to predict which teens at risk of migraine will develop headaches during puberty.

"If we can predict who will develop migraine, then maybe we can do something to prevent that from happening," Nahman-Averbuch says.

Regardless of your age, it may take time to figure out the best treatment for your headache pain. Your health care team can help you find what works. "We have lots of tools at our disposal now," Brennan says, "and we're developing more."

HEADACHE WARNING SIGNS

A headache can be a sign of another serious medical problem. Seek medical care as soon as possible for:

- A sudden, severe headache, possibly with a stiff neck.
- A severe headache with fever, nausea, or vomiting that's not related to another illness.
- A headache with confusion, weakness, double vision, or loss of consciousness.
- A headache that gets worse over days or weeks, or changes in pattern or behavior.
- A headache after a brain injury.
- A headache with loss of sensation or weakness in a body part.
- Two or more headaches a week.
- A constant headache in someone who hasn't had headaches before, especially over age 50.
- Recurring headaches in children.
- New headaches in someone with a history of cancer or HIV/AIDS.

ADDITIONAL MHBP RESOURCES TO ASSIST YOU

MHBP has resources to assist you and your family's health! Whether headaches are caused by stress, brain conditions or other health conditions, MHBP can help connect you to a provider.

If you know the type of provider you would like to see, search for a provider using mhbppostal.com or call MHBP at 833-497-2416. If you have a health concern or need advice on what to do and where to go, MHBP offers a 24/7 Nurse Line, call 800-556-1555.

SOURCES:

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