

Types of Headaches

While headaches can be caused by medical conditions, injuries, or infections, they are sometimes not due to a specific disease or other identified medical condition. The three most common of those types of primary headaches are Tension, Cluster, and Migraine headaches.

- 1. Tension headaches** These are caused by muscle tension in the shoulders, neck, and head. The tension may come from fatigue, an uncomfortable body position, or emotional stress. Tension headaches typically begin in the morning or early afternoon and can get worse during the day. They often involve a tight pressure feeling like a band around the forehead, but pain may spread over the entire head and downward into the neck and shoulders.
- 2. Cluster headaches** These types of headaches can be very painful. The intensely sharp pain usually involves one side of the head and spreads around the eye. Cluster headaches start suddenly and generally last about an hour. Attacks come in groups -- hence the name "cluster" -- occurring several times a day or each week and continuing for 6 to 8 weeks.
- 3. Migraine headaches** Often marked by intense throbbing head pain... blurred vision with shimmering light specks... dizziness or nausea... sensitivity to light, sound, or odors. Migraines are certainly a different type of headache. It is an old affliction, described in ancient writings thousands of years ago.

Headaches that are related to other physical conditions or illnesses are often referred to as secondary headaches. These headaches may result from any number of common causes, including high blood pressure (hypertension), eye or sinus problems, and facial structure disorders.

- 1. Headaches related to high blood pressure** As the blood vessels and circulatory system throughout the body are affected by high blood pressure, headaches may result. The pain is typified by a throbbing sensation throughout the head, though the headaches are generally not chronic in nature.
- 2. Headaches resulting from eye or sinus problems** Sinus congestion or built-up pressure in the eyes due to glaucoma are examples of the types of physical problems that can occur with your eyes, ears, nose and/or throat that result in headaches. These headaches will often disappear when the underlying condition is effectively treated.
- 3. Headaches associated with facial disorders** One such disorder (originally known as temporomandibular joint or TMJ syndrome), now known as myofascial pain dysfunction (MPD), is characterized by a dull aching pain in and around the ear that is associated with chewing food. The pain may radiate to the side of the scalp causing a headache. Difficulty opening the mouth or a clicking/popping sound in the jaw joint may also be present. Once symptoms are recognized, treatment can be effective.

Secondary headaches can also be caused by other serious medical conditions such as **trauma to the head or brain, accumulation of blood in and around the brain, infections or a tumor**. Whether primary or secondary in nature, headaches can be both painful and distressing for those who suffer. It is important to keep in mind that the vast majority of headaches are not an indication of a serious medical condition. Headaches happen to millions of people every single day.

A Closer Look at Migraines

About four out of ten people get headaches at some time, mostly due to stress, tension, or anxiety. But these ordinary headaches are quite different from migraine. Migraine headaches are described as throbbing headaches that get worse with activity. But it is a complicated type of headache that actually begins before the pain is felt. Migraines can last for hours to days, sometimes making it difficult to function normally. The only escape for many sufferers may be bed rest and sleep. Scientists have found that migraines are due to disturbances in the brain that may result from certain outside influences or triggers. This knowledge has led to the development of treatments and recommended lifestyle changes for preventing the intense headaches or stopping them once they start.

Brain disturbances

The exact cause of migraines is not known, although many theories are studied. One cause of migraine is thought to be faulty functioning of certain brain cells called neurons. These cells carry electrical and chemical messages throughout the nervous system controlling how a person thinks, feels, and acts. Changes in the neurons act upon areas that control pain and the flow of blood in vessels of the head and neck. This can cause inflammation of certain nerves and make the blood vessels in the brain either tighten or swell. The result is headache pain and possibly symptoms like nausea, vomiting, sensitivity to light, and other disturbances. Brain disturbances start to increase before the actual headache begins. After the headache has passed, faulty brain activity slowly decreases. The person may experience different body changes and feelings at each phase of a migraine attack.

Triggers

People with migraine are usually sensitive to certain triggers, which can affect how often, how long, and how intense the attacks are. These triggers can include a number of factors related to a person's diet, medications, lifestyle, hormones, and the surroundings in which they live. Eliminating or controlling the trigger factors may help reduce the frequency and severity of attacks. Each person with migraines needs to determine from experience just what seems to bring on an attack. Common triggers include:

CERTAIN FOODS -- LIKE CHOCOLATE, CAFFEINE, WINE -- OR FOOD ADDITIVES; IRREGULAR SLEEP PATTERNS, OR LACK OF SLEEP; EMOTIONAL STRESS OR ANXIETY; CERTAIN ACTIVITIES, OR LACK OF ANY EXERCISE AT ALL; ENVIRONMENTAL FACTORS SUCH AS STRONG SMELLS, TOBACCO SMOKE, LIGHT GLARE, WEATHER CHANGES; HORMONAL INFLUENCES: MENSTRUATION, BIRTH CONTROL PILLS, MENOPAUSE, ESTROGEN REPLACEMENT DRUGS; MEDICATIONS.

Common Migraine Types

There are a number of migraine types, and at different times a person can experience more than one type. The two most common are migraine without aura and migraine with aura.

Migraine without aura

This is the most typical form of migraine attack, once called "common migraine." It can last for hours or days and begin at any time of the day. A person may have only a few of these attacks in a lifetime or up to several each week. Migraine without aura may affect only one side of the head and have a pulsating quality of moderate or severe intensity. It is often aggravated by routine physical activity. During the headache, the person may have nausea and/or vomiting. Sensitivity to light or sound may also be experienced.

Migraine with aura

Once known as "classic migraine," this type affects about 20% of persons with migraine. It moves through several phases, including a prodrome, the aura, headache itself, and postdrome.

Prodrome

About 60% of persons who suffer this type of migraine experience a prodrome phase before a migraine attack. The term comes from Greek meaning "coming before an event." Symptoms of the prodrome, which can come hours or even days before a migraine attack, are different for each person. They can include emotional changes -- such as irritability or depression -- strange smells, sensitivity to light or sound, yawning and drowsiness, increased thirst and frequent urination, and food cravings.

Aura

The aura usually occurs just before or during the headache. Visual disturbances are the most common symptoms. The most dramatic visual symptoms include jagged, shimmering or flashing specks of light, a blind spot in a particular area, and distorted images, such as objects appearing smaller than they are. As part of the aura, body movements (motor symptoms) or speech may be affected. There might be strange sensations in the hands and mouth. A typical aura lasts less than an hour (generally 5 to 20 minutes) but can continue much longer. In some cases, an aura can occur without the headache, but this event is still considered a migraine attack. Although the migraine with aura type of headache most commonly occurs on one side of the head, it can shift from one side to the other. The pain is often described as intense, throbbing, pulsating, and stabbing. The person may not feel like eating or become nauseated, possibly vomiting. Vision may blur, and the person grows light-headed and has difficulty concentrating. In some cases, the person's skin may generally grow pale, although hands/feet may get cold and turn slightly blue.

Migraines with aura can occur several times a month, but not on a predictable, regular basis, and may possibly disappear for some months and then return.

Postdrome

During this period, which follows the migraine headache, the pain gradually goes away. People may experience a wide range of symptoms at this time, often including fatigue and loss of appetite.

Who Gets Migraines?

Although migraines are a complicated headache disorder they occur more often than many people realize. Almost 9% of Americans -- about 23 million people -- suffer from the disorder. Migraines are about three times more common in women at all ages. The disorder can begin as early as age 12 or occur at any age thereafter. But most people who develop migraines first experience them between the ages of 25 and 55. Migraines seem to be hereditary. If a parent or other close relative suffers from migraines a person is much more likely to get them. About one-third of migraine sufferers become severely disabled by the attacks or need bed rest to recover. This can limit activities at home, work, or school.

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