



# Know your headache

Migraines<sup>1-5</sup>

Tension headaches<sup>1-3,6</sup>

Sinus headaches<sup>6,7</sup>

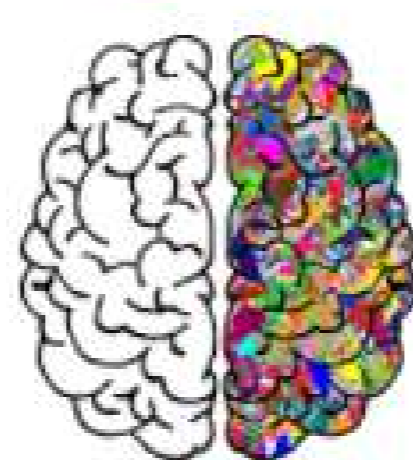
Cluster headaches<sup>1-3,8</sup>

Medication overuse headaches<sup>1,3,9-12</sup>

What You can do

References

## Migraines<sup>1-5</sup>



Migraine is more than just a simple headache; it is a collection of neurological symptoms that can be debilitating. During a migraine attack, people will experience moderate-to-severe pulsating pain on one side of the head, with one-third of attacks affecting the entire head. Visual disturbances, nausea, vomiting, dizziness, extreme sensitivity to sound, light, touch and smell, and tingling or numbness in the extremities or face can also be present during an attack. A migraine typically lasts between 4 to 72 hours. Some of the signals before an attack are experiencing appearance of strange light (aura), unpleasant smell, or confusing thoughts.

Migraines frequently occur in people with a family history, and are three times more common in women than men; but it can be controlled with certain medications lifestyle changes.

## Tension headaches<sup>1-3,6</sup>



Headaches starting from tension or stress are the most common. Tension headaches usually involve mild to severe pain that occurs on all areas of the head as a band of pain or as stiffness in the jaw or neck. Some people experience the pain as a tight hold or an intense pressure on their head. The pain may gradually intensify and become more severe. Tension headaches are thought to be caused by multiple reasons including tight muscles in the shoulders, neck, scalp and jaw, and are often triggered by stress, depression, or anxiety.

Tension headaches can be chronic in some people and may occur 15 days or more per month for at least 3 months. It may be hard differentiate between tension and migraine headaches, but people with tension headaches do not usually experience nausea, vomiting, or sensitivity to light, sound or smell, which is common with migraines.

## Sinus headaches<sup>6,7</sup>



Although rare, sinus headaches cause a dull, pulsing pain across the face and front of the head where sinuses are located. The symptoms usually include nasal congestion, runny nose, and pressure on the face and forehead. The pain typically increases in the morning and worsens with head movements and when bending or lying down.

People often get confused between sinus headache and migraine or tension headaches. True sinus headaches (called rhinosinusitis) are almost always occur due to bacterial or viral sinus infection, leading to thick nasal discharge, inability to smell, and facial pain or pressure along with a fever. The headache subsides when the sinus infection is cleared or bacterial infections are adequately treated.

## Cluster headaches<sup>1-3,8</sup>



Cluster headaches are recurring in nature, which means, headaches occur in a group or "cluster" of attacks typically on one side of the head They cause a spurt of burning pain on one side of the head and may have symptoms like redness in the eyes and nasal congestion on the same side of the head as the pain. Cluster headaches, unlike migraines, usually arrive in a repeated pattern of same time every day or every season. They can occur unexpectedly as a severe pain without any warning and last for a period ranging from a week to a year, (hence the name "cluster") and then disappear for a certain period of time. During the cluster headache attacks, people are often seen to become restless due to the severe pain.

Cluster headaches are more frequent in men than in women, in smokers, and in those with a family history of these headaches. Apart from these, alcohol is a known trigger of intense headaches during a "cluster period."

## Medication overuse headaches<sup>1,3,9-12</sup>



As the name suggests, these types of headaches originate from overuse of medicines and are also known as rebound headaches. The chronic daily headaches can be caused by certain over-the-counter pain medications or prescription medicines. Overuse of medicines is defined as taking headache medication frequently for at least 10 days per month for 3 months or longer and may depend on the type of medicines. Despite the use of these medications, the headache may either develop or progress to become worse. People experiencing this type of headache often enter a vicious loop where the use of same medicines that were supposed to treat the headache, actually worsen the headache due to overuse.

Medication overuse headaches generally disappear or revert to their original pattern within a few months after the medication is stopped. Some people require supervision from doctors for inpatient detoxification or a systematic outpatient withdrawal from pain-relieving medicines. However, during detoxification, there can be withdrawal symptoms such as severe headache, nausea, vomiting, sleep problems, and agitation.

## What You can do



If you experience headaches despite your current medication, or have any recurrent head pain, please consult your healthcare provider to find an optimum treatment for you.

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