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SRM INSTITUTES FOR MEDICAL SCIENCE
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HEADACHE



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Headache is one of the most common forms of pain. A good enough excuse to miss school or work to visit the doctor when it affects routine activity and does not respond easily to medication. Nearly 2 out of 3 children would have had a headache by the age of 15; more than 9 in 10 adults had a headache sometime in their life. Headache may occur on its own or as part of another disease or health condition.

Certain types of headache run in families. Episodes of headache may ease or even disappear for a time and recur later in life. It's possible to have more than one type of headache at the same time.

What is a Migraine Headache?

Migraine is characterised by recurrent headaches that typically lasts 4-72 hours in adults (1-72 hours in children). In general, migraine headaches are unilateral (on one side) in location, pulsating in quality, moderate to severe in intensity, and associated with nausea and/or sensitivity to light (photophobia) and sound (phonophobia). In general, routine physical activity worsens a migraine headache.

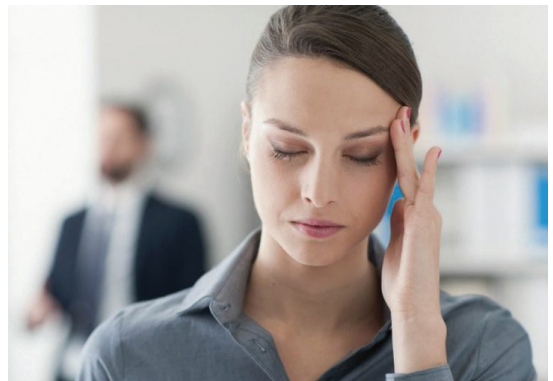
Why Headaches Hurt

Information about touch, pain, temperature, and vibration in the head and neck is sent to the brain by the trigeminal nerve - one of 12 pairs of cranial nerves.

Brain tissue itself lacks pain-sensitive nerves and does not feel pain. Headaches occur when pain-sensitive nerve endings called nociceptors react to headache triggers (such as stress, certain foods or odours, or use of medicines) and send messages through the trigeminal nerve to the thalamus, the brain's "relay station" for pain sensation from all over the body. The thalamus controls the body's sensitivity to light and noise and sends messages to parts of the brain that manage awareness of pain and emotional response to it.

When to See a Doctor

Not all headaches require a physician's attention. But headaches can signal a more serious disorder that requires prompt medical care. Immediately see a physician if you or someone you're with experience any of these symptoms:



- Sudden, severe headache accompanied by a stiff neck, fever, nausea, vomiting
- First or worst headache, accompanied by confusion, weakness, double vision, or loss of consciousness
- Headache that worsens over days or weeks or has changed in pattern or behaviour
- Headache following a head injury and seizures
- Headache and a loss of sensation or weakness in any part of the body, which could be a sign of a stroke
- Headache associated with shortness of breath
- Two or more headaches in a week
- Persistent headache in someone who has been previously headache-free, particularly in someone over age 50

Abortive Treatment Options

Medications may be needed to be taken at the onset of the headache for immediate relief of pain. These medications are not to be used more than 2-3 times per week, as outlined by your doctor.

Your doctor may have to change your abortive medication several times before finding one that works to treat your headaches. Using the correct dosage of the abortive medication is crucial.

Examples of abortive medications are acetaminophen (Paracetamol) and ibuprofen.

Preventative Treatment Options

These medications are taken daily to reduce the frequency and severity of the headaches and are prescribed when the migraine headaches are frequent and disabling. They take time to work, and may have to be taken for several months.

Biobehavioural Management

These help to deal with headaches in addition to medications prescribed.

- Get 8-10 hours of sleep each night. Stay on a regular sleep schedule, going to bed the same time each night. Do not watch television in bed
- Regular mealtimes are important and should include 3 healthy meals each day
- Regular exercise of moderate intensity for 30 minutes 3-5 days per week
- Drink at least 2 litres of non-caffeinated liquid daily
- Do not chew gum, smoke, use tobacco or alcohol

Diet and Headaches

Individuals with headaches may be sensitive to certain foods, beverages, or food additives. In addition, dehydration and skipped meals also trigger headaches. Maintaining a headache diary helps you to identify foods which trigger headache and eliminating them from your diet.

Migraine Care at Home

- Take abortive therapy medication outlined by your doctor (example: paracetamol, ibuprofen, naproxen, domperidon, sumatriptan)
- Sleep or rest in a quiet, dark room
- Drink plenty of water
- Consult your doctor if headache (>5/10 in pain scale) persists longer than 2 days

Headache Diary:

This tool will help your doctor keep track of your headaches. On a calendar, write down the days you get headaches and a description of the headache in as much detail as possible. Include the following components: when the headache began, when it ended, any warning signs before it was going to occur, location of the pain, intensity of the pain, other symptoms (nausea, vomiting, sensitivity to light/sound), medications/treatment taken, effects of the treatment, how much sleep you had the night before, what you ate/drank before the headache began, use of prescription and non-prescription medicines.

Diagnosing Your Headache:

Once your doctor has reviewed your medical and headache history and conducted a physical and neurological examination, the likely cause of headache, need for further investigations such as CT scan or MRI of brain, and treatment options can be planned.



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