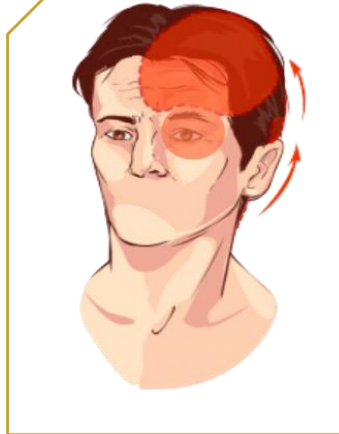




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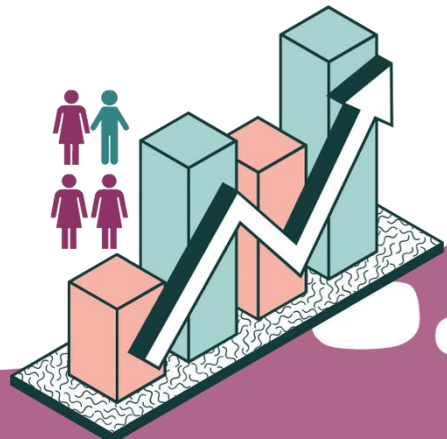
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Headache Guide



What is Headache?

- **Headache** is a neurological disorder which causes pain or discomfort in the head or face.
- **Headache** disorders are the 2nd leading cause of disability worldwide after low back pain.
- **Headache** is the most prevalent disorder in the world
1.4 B of the population had headache. Women to men ratio 3 to 1.
- **Headache** is one of the most common reasons for neurological consultation.
- **Tension-type headache** is the most prevalent type of primary headache in the general population



Types of headaches in general

Headaches can be classified as primary or secondary.

- A **primary headache** means the headache itself is the main medical problem, although other factors, such as muscle tension or exposure to certain foods, may be identified. Other contributing factors include medicines, dehydration, or hormonal changes.
- A **secondary headache** is related to an underlying medical condition. An example of this would be a headache due to **neck injury, eye problems, jaw, teeth, or sinus infection**.



What is Migraine?

- A **migraine** is a moderate or severe headache often felt as a throbbing pain on one side of the head.
- It is a common condition affecting around **1 in 7 people** and it often runs in families.



What are the different types and stages of Migraine?



There are three main types of migraine.

1- Migraine with aura. This is when there are specific warning signs just before the migraine begins, such as seeing flashing lights.

2- Migraine without aura. This is the most common type, where the migraine occurs without the specific warning signs.

3- Migraine aura without headache, also known as **silent migraine**. This is where there is an aura or other migraine symptoms, but a headache doesn't develop.

What are Migraine classes?

Migraine is classed as episodic or chronic. Migraines can last from a few hours to several days. Some people develop chronic migraine that affects them every day.

Episodic migraine headache

- Episodic migraine is when a person has 14 or fewer migraine or headache days a month. This does not have to be on consecutive days.

Chronic migraine headache

- Chronic migraine is when a person has migraine or headache on 15 or more days a month. This does not have to be on consecutive days.

What are the Characteristics of Migraine?

- A feeling of pulsation.
- Moderate to severe pain.
- Worsens with activity such as climbing stairs.
- Without treatment it lasts **between 2-72 hours**.
- Nausea and vomiting or increase sensitivity to light or sound.
- Mainly affect one side of your brain but may affect both sides.



Does taking too many analgesics lead to Migraine's attack exacerbation?

- It seems easy to take pain medications such as narcotics to suppress symptoms, but when taken frequently, these can worsen the problem by causing rebound symptoms more intense than the original attack.
- Frequent use of any acute medication that is used to treat migraine and headaches can make it more likely that you will have more headaches.



Do Migraine affect people who are highly intelligent or think a lot?

No correlation is proved by any search now but maybe it can be discovered in further studies.



The main symptoms of migraine are:

Moderate to severe headache that is pulsating or pressing, usually on one side of the head but can be anywhere on the head, face, or neck

- Feeling sick.
- Dislike of light.
- Dislike of sound.
- Dislike of smell.
- Dislike of movement.



What are the common symptoms associated with Aura?

- An aura is characterized by the appearance of warning signs 30-60 minutes before the onset of headache symptoms.
- Aura symptoms are usually neurologic in nature and may include visual disturbances (e.g., seeing wavy lines, dots, flashing lights, blind spots) and disruptions in smell, taste, or touch.



What are Migraine triggers?

Doctors believe there are 'triggers' that bring on a Migraine, although finding out an individual's trigger is not always easy. Some common triggers include:

- Alcohol, especially red wine.
- Flickering lights from a TV or computer screen.
- Heat, light (glare), or noise.
- Chemicals, such as those found in petrol and perfume.
- Cheese, coffee, nuts, chocolate, oranges, tomatoes, some food additives, and preservatives.



What are Migraine triggers?

Some common migraine triggers include:

- Hunger.
- Hormonal changes – periods, hormone pills and menopause.
- Exercise.
- Emotions – stress, excitement, or fatigue.
- Relaxation – after a stressful working week, you relax, and if a migraine attack occurs.



What are the risk factors that increases the probability to have Migraine?

- Family history of migraine is present in 70-80% of sufferers.
- Many women experience migraines related to the hormonal changes of menstruation, oral contraceptives, pregnancy, post-partum, and menopause.
- If headaches become more frequent and intense with oral contraceptive use, it is important to inform your clinician. In some instances, a change in the type of oral contraceptive pill will lessen or alleviate the headaches. In other instances, the pill or hormone treatment must be discontinued.



How can the patient know if he has Migraine or any types of headaches?

- Migraine is a common neurological disease in which a person has attacks of moderate to severe head pain lasting (4 –72) hours that are often accompanied by symptoms such as nausea, vomiting, dizziness, and extreme sensitivity to light and sound.



Tips during Migraine attack at home:

To avoid having Migraine attacks. Simple measures may help you deal with a migraine at home:

- Lie in a quiet, cool, dark room.
- Place a cold flannel on your forehead or neck.
- Do not drink coffee, tea, or orange juice.
- Avoid moving around too much.
- Try to relax through meditation or listening to music.
- Do not read or watch television.
- Some people find relief from 'sleeping off' an attack.
- Take painkillers as directed by your doctor.



How does Migraine affect patients' life?

- Migraine can affect every aspect of someone's life, including work, school, leisure, and social activities.
- It can also have a big impact on families. We have heard from the thousands of people who have participated in our studies that that migraine negatively impacts Important and major parts of their life causing them to not be able to participate fully or to miss out on activities completely.



How does Migraine affect patients' life?

- Patients often said that they feel like life is passing them by. This can lead to feelings of frustration and anger, anxiety and worry about when the next attack might come and what it will impact, and depression which may include feeling helplessness and hopelessness.



Did scientist reach a definitive cure for Migraine other than analgesics?

- There are a lot of new medications that can help in treating Migraine beside the traditional analgesics.



Is there any treatment that can prevent the occurrence of Migraine?

- Many migraine medications are available. Some medications are used to stop a migraine attack (**Abortive therapy**). These drugs work best if taken as soon as the attack begins. Other drugs are taken daily to reduce the frequency and duration of migraines (**prophylactic therapy**).
- Your clinician can provide information on your medication options and help you determine if prophylactic medication would be helpful in your situation.



Can the preventive treatments change patients' lives and reduce their suffering?

- **Migraines** vary between people and so does the treatment. There are many new treatments that can be used for an attack.
- If a migraine is in the early stages, simple medications and anti-nausea medication may be enough to provide relief.



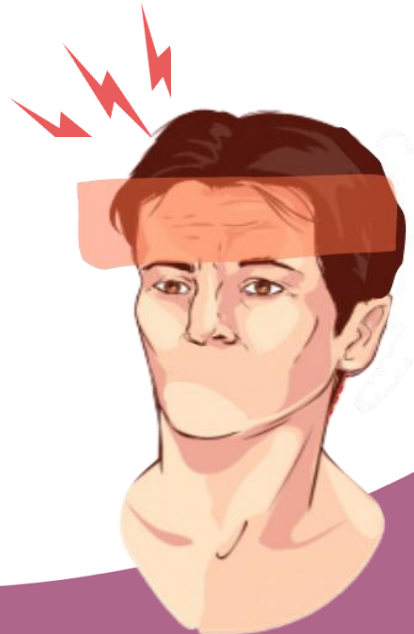
What is Tension headache?

- **Tension-type headache** (TTH) is the most common type of headache characterized by a bilateral, no throbbing headache of a mild to moderate intensity, often described as feeling like a tight band around the head.
- **Tension-type headache** is a typical headache which is a widespread neurologic disorder among the population. Due to its high prevalence, it causes a high degree of disability.



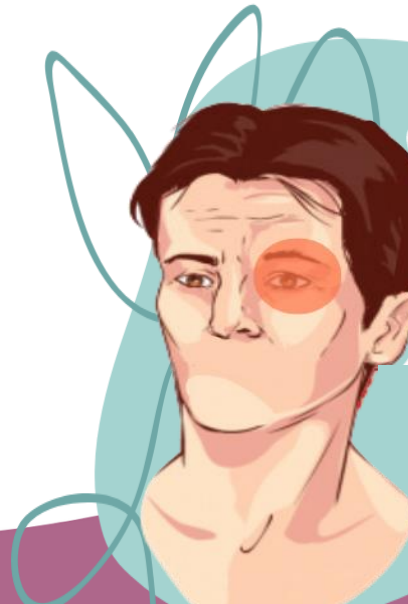
What are Tension headache Characteristics?

- Headache is slow onset.
- Head usually hurts on both sides.
- Dull pain or feels like a band around the head.
- Pain may involve the back part of the head or neck.
- Pain is mild to moderate, but not severe.
- Tension type headaches generally do not cause vomiting, nausea, or sensitivity to light (photophobia).



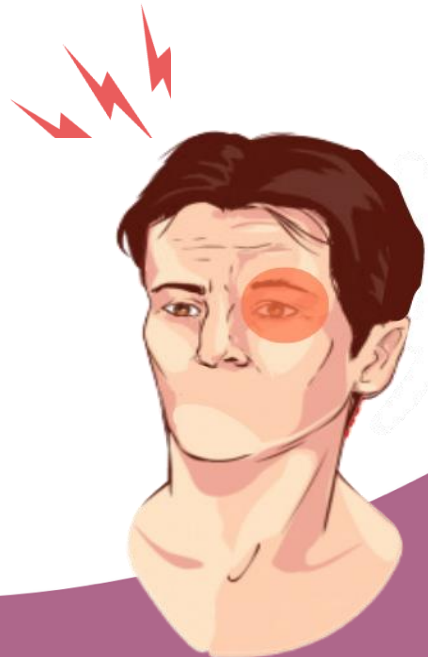
What is Cluster headaches?

- Cluster headaches are one of the most painful types of headaches. Its affects man more than women.
- A cluster headache commonly wakes you in the middle of the night with intense pain in or around one eye on one side of your head, it usually occurs in a series that may last weeks or months.



What are Cluster headache Characteristics?

- Swelling of the eyelid.
- Swelling of the forehead.
- Runny nose or congestion.
- Severe pain on one side of the head, usually behind one eye.
- The eye that is affected may be red and watery with a droopy lid and small pupil.



How to diagnose the different types of headaches?

- Health care providers diagnose migraine and other types of headaches by evaluating the history of your symptoms.
- Some tests (for example, blood work, imaging, head X-ray) may be performed to rule out other conditions, but there is no definitive test to show you have migraine or other type of headache.



Questions commonly asked during the exam may include:

- When do headaches occur?
- What is the location of the headache?
- What do the headaches feel like?
- How strong is the headache out of 7/11- 9/10?
- How long do the headaches last?
- Have there been changes in behavior or personality?
- Do changes in position or sitting up cause the headache?
- Do you have trouble sleeping?
- Do you have a history of stress?
- Is there a history of head injury?



What is the treatment for headaches?

- Treatment depends on the specific headache type and the presence or absence of unnecessary medication.
- There are two categories for treating headache either pharmacological or non- pharmacological.



What are the pharmacological treatments for headaches?



You must see a doctor first before starting any Pharmacological treatment, pharmacological treatment can be divided to **Acute and Preventive medication**.

- **Acute medications** are taken in severe and unbearable sudden headache attack. Such as:
 - Pain killer (NSAID).
 - Cataflam, Aspirin.
 - Acetaminophen.
 - Triptan.
 - CGRP (antagonist, Ubrogapant, Rimegepant).



What are the pharmacological treatments for headaches?



Preventive medications It is a medicine taken in daily bases, whatever the headache present or absent; it helps to prevent headache attack.

- **Tricyclic antidepressants** such as (amitriptyline and protriptyline) and **other antidepressants**.
- **Anti-seizures** may prevent tension headaches include (Topiramate, Valproate, Onabotulinumtoxin A).
- **CGRP antagonist** prevent, and acute treatment of migraines include (Erenumab, Galcanezumab, Fremanezumab, Eptinwzumab).
- **Botox injections for migraine** it's one of the methods of treating chronic migraine, in addition to migraine attacks.



What are the non- pharmacological ways to prevent headaches?

One of the ways to prevent headaches is to do effective headache management at home, which includes:

- Reduce caffeine intake.
- Commitment to a healthy diet.
- Drink enough water daily.
- Sleep for adequate periods of 7-10 hours.
- Exercising daily, such as walking.
- Manage the things that cause you stress and fatigue.
- Record headache attacks in a headache note.
- Avoid known triggers for headaches, such as: certain foods, drinks, lack of sleep, and fasting.
- Use of pharmacological Acute or preventive medications, recommended by your doctor.

When should the patient visit the specialized doctor?

- If your head hurts constantly. You can't explain the accompanying symptoms.
- If you've experienced any of those situations, it's time for you to talk to your healthcare provider. This guide will help you start the conversation with your doctor so that you receive the care you deserve.





What are the red flags in headaches?

This is the red flags if headache is accompanied by:

- New onset of headaches.
- Older age onset of headache (>50 years of age).
- Significant change in the characteristics of prior headaches.
- Signs or symptoms of systemic illness (stiff neck, fever, chills, weight loss, nausea, vomiting).
- Neurologic symptoms (seizure, diplopia, limb and muscle weakness, pulsatile tinnitus, confusion).
- Known systemic illnesses that predispose to secondary headaches (cancer, HIV).
- Headaches associated with activity that increase or decrease intracranial pressure (orthostatic headaches, Valsalva-induced headaches).

Sources and References:

References from MOH and Mayo Clinic

All illustrative photos from Canva.com

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