



## About Headache Disorders and Diagnosis

Our mission is to improve the lives of migraine patients and their families and ultimately help find a cure.

### What type of headache is it?

Headache disorders can either occur on their own or as a symptom of many different conditions. The distinction is what we call a primary headache disorder or a secondary headache disorder. There are many types of primary and secondary headache.

### Primary Headache

When headache occurs without any other illness, they are called primary headache disorders because the headache itself is the primary problem.

### Types of Primary Headache Disorders:

- Tension-type headache: the most common type of headache. The pain is mild to moderate and feels like pressure. This is the type of headache people get when you hear someone without a severe condition says, "I have a headache."
- Migraine: a severe and disabling condition that most commonly causes serious pain to the head and/or neck. A migraine may last for a few hours or days. Other symptoms include light sensitivity, sensitivity to sound, dizziness and nausea.
- Migraine with aura: some or all of the symptoms of migraine (listed above) and accompanied by visual symptoms. A tingling or numb sensation may occur as well, typically to one half of the body.
- Chronic Migraine: frequent migraine symptoms that occur 15 days or more per month, for at least three months in a row. Chronic migraine only occurs in about 1-3% of patients who have tension-type headache, however it is possible to have chronic tension-type headache as well. It is common for people with chronic migraine to have a persistent, mild headache most of the time, then the pain spikes into a migraine for a period of time during the day.
- Cluster Headache: at its worst, cluster headache are the most painful version of all headache disorders. They tend to occur in cyclical patterns. The pain is commonly felt in or around one eye, or on one side of the face. Cluster headache may occur frequently, for weeks or months. It is common for them to be chronic for a few weeks or

month, then disappear for a few months to years, then may return without warning. Sometimes cluster periods never come back.

## **Secondary Headache**

A type of headache that starts because of another condition.

### **Types of Conditions that May Cause Secondary Headache:**

- Infections: The common cold or flu may cause headache symptoms
- Post Traumatic Headache: Occurs after a concussion. Severity can vary greatly, sometimes the pain is mild similar to a tension-type headache, and sometimes it is severe like migraine symptoms.
- Medication Overuse Headache (MOH): Taking medications, such as ibuprofen or Excedrin to treat headache more than 3 days per week can make primary headache types worse.
- Medications, Vitamins and Supplements: Some medicines and supplements have side effects that include primary headache disorders


## **Combined Types**

It is possible to have more than one type (e.g. a primary plus a secondary headache) of headache or for one type of headache to turn into another type over time.

Primary	Secondary
<ul style="list-style-type: none"><li>• Tension</li><li>• Migraine</li><li>• NDPH</li><li>• Cluster Headache</li></ul>	<ul style="list-style-type: none"><li>• Infection<ul style="list-style-type: none"><li>• Injury</li></ul></li><li>• Medication</li></ul>

## **Testing: Is it necessary?**

- To ensure the correct diagnosis, your physician or nurse practitioner will ask many questions about your child's history and headache patterns.
- He will also complete a thorough neurological examination to determine if further testing is needed.
- According to the Child Neurology Society, American Academy of Neurology Practice Parameters, **if your child's physical exam is normal and there are no worrisome symptoms, then no testing is recommended.**
- Studies have shown that children with worrisome causes of headache have abnormalities in their physical exam, "red flags" in their story, or other neurologic changes like seizures.
- Doing extra testing could expose your child to unnecessary risks.

**PAMS : PEDIATRIC AND ADOLESCENT MIGRAINE SCREEN** 

Under 12 Years	12-18 Years
1. Would you rate the pain from your headache as bad or very bad?	1. Would you rate the pain from your headache as moderate or severe?
2. Does your head feel like it is pounding?	2. Does your head feel like it is throbbing?
3. Does your headache get worse when you run, walk, or play?	3. Did you ever skip a school day, sports event, or other fun activity because your head hurt too much?

**If a child has had a similar headache in the past and answers "Yes" to any of the above questions, they are likely to have migraine. Further treatment may be necessary for migraine.**

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## **SNOOPY**

“SNOOPY” describes some of the things we consider when thinking about testing for other headache causes. Even if your child has one of these (e.g. pain in the back of head), we may not always recommend testing. Whether we order tests or not will depend on your child’s whole story and physical exam.

<b>S</b>	• Systemic symptoms (fever, weight loss)
<b>N</b>	• Neurological signs (confusion)
<b>O</b>	• Onset was very sudden (split second)
<b>O</b>	• Occipital location (back of head)
<b>P</b>	• Pattern (positional, progressive)
<b>Y</b>	• Younger than 6 years old

## **Symptoms**

### **What other symptoms may occur?**

- Genetics can cause someone to have a hyper-excitable brain or a “migraine brain” which is sensitive to many triggers, like:

- hormonal changes
- sleep changes
- fasting
- dehydration
- other various types of stress
  
- Even between headache attacks, these patients may be sensitive to things like:
  - strong odors
  - motion sickness
  - loud noises
  - many things going on at once
  
- Once something triggers the process, the messages spread to involve more areas, in turn causing more symptoms like:
  - Fatigue
  - mood changes
  - concentration problems
  - nausea
  - appetite changes
  - dizziness
  - sensitivity to light and sound
  
- The nerves in the lining of the brain and the brainstem become overly sensitive, causing:
  - Headache
  - soreness with light touch (allodynia)
  - pain in the neck, shoulders, and other areas of the body

