



Headache Report

SHELBY STODDARD, NP | DR. JASON WEST | DR. SCOTT NELSON

Headache is the symptom of pain anywhere in the region of the head or neck. It occurs in migraines (sharp, or throbbing pains), tension-type headaches, and cluster headaches. There are so many different types of headaches.

Frequent headaches can affect relationships and employment. There is also an increased risk of depression in those with severe headaches.

Headaches can occur as a result of many conditions whether serious or not. There are a number of different classification systems for headaches. Causes of headaches may include fatigue, sleep deprivation, stress, the effects of medications, the effects of recreational drugs, viral infections, loud noises, common colds, head injury, rapid ingestion of a very cold food or beverage, and dental or sinus issues.

Treatment of a headache depends on the underlying cause, but commonly involves pain medication. Some form of headache is one of the most commonly experienced of all physical discomforts.

This is Dr Jason West with the West Clinic and it's not just me saying it. In a minute you are going to see patient that had decades of seizures and what an amazing outcome. There's more options than Rx and wait and see. Everyone has to take ownership. The patient, the doctor, and the inner circle (your inner circle). It's me on the other side of the table, what would I do?

Ok – I'm going to go over about 10 types of headaches. Officially there are over 150 types of headaches. Most people are familiar with some form of head pain, aka headache. Throbbing, distracting, pounding, uncomfortable. Most people just reach for some over-the-counter meds, caffeine, sugar, beer, pot, Rx or whatever. If you have chronic headaches, I feel for you.

So, I have been taking care of headaches for 21 years. Some are easy to handle and respond marvelously. Some are difficult and take more work and then there's a few that don't respond to any type of treatment.

In my opinion, here are the most common types of headaches.

- tension headaches
- cluster headaches
- migraine headaches
- allergy or sinus headaches
- hormone headaches
- caffeine headaches
- exertion headaches
- Hypertension headaches
- rebound headaches
- post-traumatic headaches

Now, to outline parameters, here are some critical signs to seek immediate emergency medical attention:

- stiff neck
- rash
- the worst headache you've ever had
- vomiting
- confusion
- slurred speech
- any fever of 100.4°F (38°C) or higher
- paralysis in any part of your body or visual loss

Primary headaches occur when the pain in your head is the condition. In other words, your headache isn't being triggered by something that your body is dealing with, like illness or allergies.

These headaches can be episodic or chronic:

- Episodic headaches may occur every so often or even just once in a while. They can last anywhere from half an hour to several hours.
- Chronic headaches are more consistent. They occur most days out of the month and can last for days at a time. In these cases, a pain management plan is necessary.

Tension headaches

If you have a tension headache, you may feel a dull, aching sensation all over your head. It isn't throbbing. Tenderness or sensitivity around your neck, forehead, scalp, or shoulder muscles also might occur. Anyone can get a tension headache, and they're often triggered by stress. Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- Magnesium
- Feverfew
- Chiropractic Therapy
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy
- Hydro dissection therapy

Cluster headaches

Cluster headaches are characterized by severe burning and piercing pain. They occur around or behind one eye or on one side of the face at a time. Sometimes swelling, redness, flushing, and sweating can occur on the side that's affected by the headache. Nasal congestion and eye tearing also often occur on the same side as the headache. These headaches occur in a series. Each individual headache can last from 15 minutes to three hours. Most people experience one to four headaches a day, usually around the same time each day, during a cluster. After one headache resolves, another will soon follow.

A series of cluster headaches can be daily for months at a time. In the months between clusters, individuals are symptom-free. Cluster headaches are more common in the spring and fall. They are also three times more common in men.

Doctors aren't sure what causes cluster headaches. After a diagnosis is made, your doctor will work with you to develop a prevention plan. Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- Magnesium
- Feverfew
- Chiropractic Therapy
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy
- Hydro dissection therapy

Migraine

Migraine pain is an intense pulsing from deep within your head. This pain can last for days. The headache significantly limits your ability to carry out your daily routine. Migraine is throbbing and usually one-sided. People with migraine headaches are often sensitive to light and sound. Nausea and vomiting also usually occur. Some migraine is preceded by visual disturbances. About one out of five people will experience these symptoms before the headache starts. Known as an aura, it may cause you to see:

- Flashing lights shimmering lights zigzag lines
- stars
- blind spots

Auras can also include tingling on one side of your face or in one arm and trouble speaking. However, the symptoms of a stroke can also mimic a migraine, so if any of these symptoms are new to you, you should seek immediate medical attention.

Migraine attacks might run in your family, or they can be associated with other nervous system conditions. Women are three times more likely to develop migraine than men. People with post-traumatic stress disorder also have an increased risk for migraine.

Certain environmental factors, such as sleep disruption, dehydration, skipped meals, some foods, hormone fluctuations, and exposure to chemicals are common migraine triggers.

Research shows that preventative medications are significantly underused. Only 3 to 13 percent of those with migraine take preventive medication, while up to 38 percent actually need it. Preventing migraine greatly improves quality of life and productivity. Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- *Hormone balancing
- Magnesium
- Feverfew
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy

Secondary Headaches

Secondary headaches are a symptom of something else that is going on in your body. If the trigger of your secondary headache is ongoing, it can become chronic. Treating the primary cause generally brings headache relief.

Allergy or sinus headaches

Headaches sometimes happen as a result of an allergic reaction. The pain from these headaches is often focused in your sinus area and in the front of your head.

Migraine headaches are commonly misdiagnosed as sinus headaches. In fact, up to 90 percent of “sinus headaches” are actually migraine. People who have chronic seasonal allergies or sinusitis are susceptible to these kinds of headaches.

A sinus headache can also be a symptom of a sinus infection. Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- Homodetoxification therapy
- Endonasal therapy
- IV therapy with vitamin C
- Neural therapy

5. Hormone headaches

Women commonly experience headaches that are linked to hormonal fluctuations. Menstruation, birth control pills, and pregnancy all affect your estrogen levels, which can cause a headache. Those headaches associated specifically with the menstrual cycle are also known as menstrual migraine. These can occur right before, during, or right after menses, as well as during ovulation.

It's estimated that about 60 percent of women with migraine also experience menstrual migraine, so alternative remedies may have a role in decreasing overall headaches per month. Relaxation techniques, yoga, acupuncture, and eating a modified diet may help prevent migraine headaches.

- Lifestyle modifications such as meditation
- Hormone balancing

Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- *Hormone balancing
- Magnesium
- Feverfew
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy

6. Caffeine headaches

Caffeine affects blood flow to your brain. Having too much can give you a headache, as can quitting caffeine “cold turkey.” People who have frequent migraine are at risk of triggering a headache due to their caffeine use.

When you’re used to exposing your brain to a certain amount of caffeine, a stimulant, each day, you might get a headache if you don’t get your caffeine fix. This may be because caffeine changes your brain chemistry, and withdrawal from it can trigger a headache.

Not everyone who cuts back on caffeine will experience a withdrawal headache. Keeping your caffeine intake at a steady, reasonable level — or quitting it entirely — can prevent these headaches from happening. Treatments used at the West Clinic may include:

- Lifestyle modifications such as meditation
- *Hormone balancing
- Magnesium
- Feverfew
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy

7. Exertion headaches

Exertion headaches happen quickly after periods of intense physical activity. Weightlifting, running, and sexual intercourse are all common triggers for an exertion headache. It's thought that these activities cause increased blood flow to your skull, which can lead to a throbbing headache on both sides of your head.

An exertion headache shouldn't last too long. This type of headache usually resolves within a few minutes or several hours. Treatments used at the West Clinic include:

- Lifestyle modifications such as meditation
- Magnesium
- Feverfew
- Endonasal therapy

8. Hypertension headaches

High blood pressure can cause you to have a headache, and this kind of headache signals an emergency. This occurs when your blood pressure becomes dangerously high.

A hypertension headache will usually occur on both sides of your head and is typically worse with any activity. It often has a pulsating quality. You may also experience changes in vision, numbness or tingling, nosebleeds, chest pain, or shortness of breath.

If you think you're experiencing a hypertension headache, you should seek immediate medical attention. You're more likely to develop this type of headache if you're treating high blood pressure.

These types of headaches typically go away soon after the blood pressure is under better control. They shouldn't reoccur as long as high blood pressure continues to be managed.

Treatments used at the West Clinic include:

- High blood pressure management
- Lifestyle modifications such as meditation
- Magnesium
- IV therapy with magnesium and B6

9. Rebound headaches

Rebound headaches, also known as medication overuse headaches, can feel like a dull, tension-type headache, or they may feel more intensely painful, like a migraine.

You may be more susceptible to this type of headache if you frequently use OTC pain relievers. Overuse of these medications leads to more headaches, rather than fewer.

Rebound headaches are likelier to occur any time OTC medications like acetaminophen, ibuprofen, aspirin, and naproxen are used more than 15 days out of a month. They're also more common with medications that contain caffeine.

The only treatment for rebound headaches is to wean yourself off of the medication that you've been taking to control pain. Although the pain may worsen at first, it should completely subside within a few days.

A good way to prevent medication overuse headaches is to take a preventative daily medicine that doesn't cause rebound headaches and prevents the headaches from occurring to begin with.

Treatments used at the West Clinic may include:

- Lifestyle modifications such as meditation
- Magnesium
- Feverfew
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy

10. Post-traumatic headaches

Post-traumatic headaches can develop after any type of head injury. These headaches feel like migraine or tension-type headaches, and usually last up to 6 to 12 months after your injury occurs. They can become chronic.

Treatments used at the West Clinic may include:

- Lifestyle modifications such as meditation
- Magnesium
- Endonasal therapy
- IV therapy with magnesium and B6
- Neural therapy

When to see a doctor

In most cases, episodic headaches will go away within 48 hours. If you have a headache that lasts more than two days or that increases in intensity, you should see your doctor for assistance. A change in Rx therapy or reaction to Rx therapy is cause for immediate contact to your prescribing health care provider.

If you're getting headaches more than 15 days out of the month over a period of three months, you might have a chronic headache condition. You should see your doctor to find out what's wrong, even if you're able to manage the pain with aspirin or ibuprofen.

Headaches can be a symptom of more serious health conditions, and some do require treatment beyond OTC medications and home remedies.

Treatment Suggestions:

1. Lifestyle – use daily stress management tools such as walking, meditation, prayer, journaling, gardening, playing a musical instrument Whatever helps you to de-stress.
2. Drink water
3. Use over-the-counter medicine sparingly, they have unwanted and serious side-effects if used incorrectly or over long periods of time.
4. Eat healthy and alive foods
5. Strive for body balance in biochemistry, biomechanics and hormones. This means to get your blood tested and balance blood chemistry. It means to make sure your spine is alignment and to get your hormones checked and treated appropriately
6. Use physical medicine such as chiropractic, massage therapy, physical therapy
7. Acupuncture has been helpful in our clinical experience
8. Sometimes headaches are associated with “nerve memory.” Neural therapy has helped to reset the nervous system in our clinical experience although no one therapy helps all headaches

Supplement Recommendations.

Supplements that help with headaches based upon Dr West's clinical experience. This is not an all-inclusive list and medical intervention, over-the-counter and lifestyle modifications are all important considerations. At home supplementation may include:

1. Pituitrophin – the pituitary gland is the office manager of the body and nutritionally supporting this gland often helps hormone headaches, particularly in females.
2. Feverfew - Some research using feverfew alone or feverfew combined with other ingredients shows that taking feverfew by **mouth can reduce the frequency and duration of migraine headaches** and might reduce pain, nausea, vomiting, and sensitivity to light and noise when they do occur.
3. Phosfood - This product helps keep the calcium/phosphorus ratio in the proper balance. Phosfood also helps with these other conditions: hypothyroidism, calcium carbonate deposits, joint stiffness, bursitis, excessive secretions, gout, osteoarthritis, migraine headaches, elevated blood viscosity, tartar accumulation and kidney stones.
4. Magnesium - some scientists believe that **magnesium blocks signals in the brain that lead to migraines** with an aura, or changes in vision and other senses. Research also suggests that magnesium stops certain chemicals that cause pain
5. Migranol™ contains an extract of feverfew, a traditional herb that has been used since the first century known for its ability to support a healthy inflammatory response.* Curcuminoids and rosemary are also included for their phytonutrient properties and their role in supporting a balanced inflammatory response.* Magnesium is added for its effects on muscle relaxation.*

Dr Jason West