

## UNIVERSITY STUDENT HEALTH SERVICES • Fact Sheet

**TENSION HEADACHES**

Tension headaches are the most common type of headache encountered in the general population. 90% of people have a tension headache at some point in their lives. Stress and sleep disruption are the most common triggers for tension headaches.

Tension headaches may be classified based on frequency:

- Most people experience episodic tension headaches less than 1 day a month.
- Frequent episodic tension headaches occur less than 15 days a month for at least 3 months.
- Chronic tension headaches occur 15 or more days a month for at least 3 months.

**WHAT CAUSES THEM?**

The exact cause is unknown. Experts no longer believe that muscle contractions in the head and neck cause tension headaches. New theories suggest that an increased sensitivity to pain plays a critical role:

- In patients with episodic tension headaches, increased muscle tenderness around the head and neck may result from overactive pain pathways.
- In patients with chronic tension headaches, triggers that are normally harmless are misinterpreted by the nervous system as pain. Some research indicates that genetic factors play an important role in chronic tension headaches.

**WHAT ARE THE SYMPTOMS?**

Typical symptoms of tension headaches include pain that is:

- Mild to moderate in intensity.
- Nonthrobbing (often described as a pressure, dull ache, or tight band around the head).
- Bilateral (occurs on both sides of the head).
- Not worsened by routine physical activity (eg. walking, climbing stairs).
- Sometimes associated with increased muscle tenderness in the head, neck and/or shoulders.

Though it is uncommon, tension headaches may sometimes be associated with sensitivity to light or sound. This can make it difficult to distinguish from mild forms of migraine headaches.

**WHAT ARE MEDICATION OVERUSE HEADACHES?**

Tension headaches may also be confused with medication overuse headaches. Patients with medication overuse headaches have frequent or daily headaches related to excessive use of pain medicines like ibuprofen (Advil/Motrin) or acetaminophen (Tylenol). A vicious cycle occurs when a rebound headache occurs as the medication wears off, which leads to more medication use.

**HOW IS IT DIAGNOSED?**

Tension headaches are diagnosed based on the typical pattern of symptoms and a normal physical exam, with the exception of head/neck muscle tenderness.

Imaging of the head is not necessary in most patients. Head imaging may be recommended if symptoms are unusual, if there is a sudden change in headache pattern, if the neurologic exam is abnormal, or if there are any of the emergency signs listed on the next page.

**WHEN SHOULD I SEEK MEDICAL CARE?**

Schedule an appointment with your medical provider if:

- Your headaches are disrupting your life.
- You have a recent onset or change in your headaches.
- You need to take medication more than twice a week for headaches.

### **SEEK EMERGENCY CARE IMMEDIATELY if you have a headache that:**

- Occurs suddenly, becomes severe within seconds or minutes, or is “the worst headache of your life”.
- Begins quickly after strenuous physical activity or a minor injury.
- Is severe and occurs with a fever or stiff neck.
- Occurs with a seizure, passing out, confusion, or personality changes.
- Is new and occurs with weakness, numbness, changes in vision, or difficulty speaking.

### **WHAT TREATMENTS ARE AVAILABLE?**

Tension headaches often respond to a combination of healthy lifestyle changes and appropriate use of pain medications.

#### **❖ HEALTHY HABITS**

- Decrease stress in your life. Stress is the most common trigger for tension headaches.
- Regular aerobic exercise (such as walking, running, and biking) several times a week may help prevent headaches.
- Neck massages, hot showers/heating pads, or ice packs placed on the head and neck can be helpful.
- Sleep or resting in a darkened room can help relieve symptoms. However, excessive sleep can worsen headaches.
- Drink plenty of non-caffeinated fluids since dehydration can cause or aggravate headaches.
- Eat and sleep on a regular schedule.
- Avoid smoking.
- Decrease alcohol use.
- Maintain good posture.

#### **❖ MEDICATIONS**

If medications are needed, it is best to take them at the beginning of the headache, when symptoms are still mild.

##### **Over-The-Counter (OTC) Medications**

When used occasionally, OTC pain medications are usually effective for pain control.

- First-line treatments include nonsteroidal anti-inflammatory drugs (NSAIDs) and acetaminophen (Tylenol). Examples of NSAIDs include ibuprofen (Advil or Motrin), naproxen (Aleve), and aspirin. NSAIDs should be taken with food to avoid an upset stomach.
- Combination pain medications with caffeine (Excedrin) are recommended if headaches do not respond to first-line treatments. Caffeine can help by enhancing the drug's effect.

##### **Prescription Medications**

If your headaches are not responding to OTC treatment, a prescription medication may be recommended by your medical provider.

- In general, muscle relaxants and medications containing narcotics or butalbital are not recommended for the treatment of tension headaches. These medications can be habit-forming and increase the risk of medication-overuse headaches.
- Triptans (Imitrex, Maxalt, etc.) may be effective treatments for tension headaches in patients who also suffer from migraines.
- Medications taken on a daily basis to prevent headaches may be prescribed if you are requiring frequent use of pain medication or if you are having headaches more than 2-3 times per week.

##### **To Prevent Medication Overuse Headaches:**

- Avoid using NSAIDs more than 15 days/month. This includes ibuprofen (Advil, Motrin), naproxen (Aleve), and aspirin.
- Avoid using acetaminophen (Tylenol) more than twice a week.
- Avoid using Excedrin or triptans more than 9 days/month.
- Avoid using butalbital medications (Fioricet, Fiorinal) and all narcotic medications.

- ❖ **OTHER TREATMENT OPTIONS** to consider include physical therapy, acupuncture, cognitive behavioral therapy, yoga, meditation, and biofeedback.

**RECOMMENDED WEBSITES:** [www.familydoctor.org](http://www.familydoctor.org), [www.mayoclinic.org](http://www.mayoclinic.org), [www.ninds.nih.org](http://www.ninds.nih.org)