

Headache and its Causes: Commentary

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Commentary

A headache is a sign of discomfort in the face, head, or neck. It might manifest as migraine, tension headache, or cluster headache. Those who suffer from severe headaches are more likely to develop depression.

Headaches can be caused by a variety of situations. There are several categorization systems for headaches. The International Headache Society is the most well-known, classifying it into more than 150 forms of main and secondary headaches. Dehydration, fatigue, sleep deprivation, stress, the effects of medications (overuse) and recreational drugs, including withdrawal, viral infections, loud noises, common colds, head injury, rapid ingestion of very cold food or beverage, and dental or sinus issues are all possible causes of headaches (such as sinusitis).

The treatment of a headache is dependent on the underlying reason, although it usually consists of pain medicine (especially in case of migraine or cluster headache). A headache is one of the most prevalent types of physical discomfort.

In any given year, over half of all individuals suffer from a headache. Tension headaches are the most frequent, affecting over 1.6 billion individuals (21.8% of the population), followed by migraine headaches, affecting approximately 848 million people (11.7%).

Causes

There are about 200 different forms of headaches. Some are innocuous, while others are lethal. The description of the headache, as well as the findings on the neurological examination, indicate if more tests are required and what treatment is most appropriate.

Headaches are classed as either "primary" or "secondary." Primary headaches are persistent, benign headaches that are not caused by an underlying illness or structural issues. Migraine, for example, is a form of the main headache. While primary headaches can cause severe daily pain and impairment, they are not physiologically harmful. Secondary headaches are caused by an underlying ailment such as an infection, a head injury, vascular abnormalities, a brain hemorrhage, stomach discomfort, or malignancies. Secondary headaches can be harmful. Certain "red flags" or warning indications suggest that a subsequent headache is serious.

Primary

Primary headaches account for 90% of all headaches. Primary headaches often appear in adults between the ages of 20 and 40. Migraines and tension headaches are the most prevalent forms of primary headaches. They each have unique qualities. Migraines are characterized by throbbing headaches, nausea, photophobia (sensitive to light), and phonophobia (sensitivity to sound) Tension headaches are characterized by non-pulsing "bandlike" tightness on both sides of the head that is not accompanied by

other symptoms. These headaches can be further subdivided into episodic and chronic tension headaches. Other extremely uncommon kinds of main headaches include:

- Cluster headaches are defined as brief (15-180 minute) episodes of acute pain, generally around one eye, accompanied by autonomic symptoms (tearing, red eye, nasal congestion) that occur at the same time every day. Triptans can be used to treat cluster headaches, while prednisone, ergotamine, or lithium can be used to prevent them.
- Trigeminal or occipital neuralgia: shooting pain in the face
- Hemicrania continua are characterized by chronic unilateral pain with bouts of intense agony. The medicine indomethacin can help with hemicrania continua.
- Primary stabbing headache: recurring episodes of stabbing "ice pick pain" or "jabs and jolts" lasting from a few seconds to several minutes with no autonomic signs (tearing, red eye, nasal congestion). Indomethacin can be used to alleviate these headaches.

Secondary

Headaches can be caused by issues in the head or neck. Cervicogenic headache, for example, is not hazardous (pain arising from the neck muscles). Excessive painkiller usage might, ironically, increase painkiller headaches.

The following are more dangerous causes of secondary headaches:

- Meningitis is an infection of the meninges that causes fever and meningismus, or stiff neck.
- Internal bleeding in the brain (intracranial hemorrhage)
- A subarachnoid hemorrhage (acute, severe headache, stiff neck without fever)
- Aneurysm rupture, arteriovenous malformation, and intraparenchymal hemorrhage (headache only)
- Brain tumor: a mild headache that worsens with exercise and position shift, followed by nausea and vomiting. Often, the person will have nausea and vomiting for several weeks before the headache begins.

Old headaches

Old headaches are often main headaches and are not harmful. Migraines or tension headaches are the most common causes. Migraines are generally characterized by unilateral, pulsating headaches that are followed by nausea or vomiting. An aura (visual symptoms, numbness, or tingling) may occur 30-60 minutes before the headache, alerting the sufferer to the impending headache. Migraines may also lack auras. Tension headaches are characterized by bilateral "bandlike" tightness on both sides of the head, with neither nausea nor vomiting. Some symptoms from both headache types, however, may overlap. It is critical to distinguish between the two since the therapies are not the same.

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