

Headache Self-Care Guide



Types of Headache

Primary headache happens more than once and have unknown causes.

Secondary headache are linked to a certain cause (like a head or neck injury), certain medicines, substances, or body disorders.



Headache Management

Abortive Treatments

- Those treatments you use to stop a headache when you have one.
- These can be pills, injections you give yourself, dissolvable tablets, medical devices, or nasal sprays.
- It is best to use these treatments as soon as the headache begins. Do not “wait out” the headache. The longer you wait, the less the treatment may help your headache.

Preventive Treatments

- Those treatments you take on a regular schedule – sometimes daily, sometimes monthly, or sometimes once every few months.
- This is to reduce how often you get a headache and to decrease how severe the symptoms are if you do get a headache.
- Your provider may suggest a preventive treatment if you have frequent headaches that affect your work, family, or social activities.

All types of headache can be helped by a healthy lifestyle, exercising, and not smoking.

What Are My Options?



There are many different types of treatments for headache including pills, injections, and non-medicine options such as behavioral interventions.

It is important to share with your healthcare provider how headache affects your home, work, and life.

Headache Diary

Your healthcare provider may ask you to write down when your headache happens in a “diary” to help understand the headache problem better.

Headache diaries may help your healthcare team develop goals for treatment and potentially identify factors related to your headache.

Combined Treatments

A combination of medicine and non-medicine treatments may be the most effective for you. Work with your healthcare team to create a treatment plan that is tailored to fit your needs, preferences, and circumstances.



Questions to Ask Your Health Care Team

- How do I know what type of headache I have?
- What are my treatment options for the type of headache I have?
- I would prefer to not take medications if I don't need to; what other treatments are available?
- What can I do on my own to manage my headache?
- When should I contact a healthcare provider about my headache?
- Could changes in my diet help my headache?

When Headache Could Be Something More Serious

Apart from discussing different types of treatment, it is important to share with your healthcare provider the worries you may have about your headache.

In some cases, you and your provider may order other testing.

If you have any of the “red flags” listed below, you should contact your healthcare provider.



Red Flags for Headache

- Long lasting headache.
- Older than 50 years old and getting new headache for the first time.
- A headache that never goes away.
- Weakened immune system and getting headaches.
- Have fevers, chills, sweating at night, and a new headache.
- Headache that happens when you exert yourself, or even if you cough or sneeze.
- Headache that wakes you up at night.
- Headache that happens when you move your position (e.g., going from laying down to standing up).
- A new headache after a head injury.
- A headache that happens with a fever, rash, weight loss, neck stiffness, confusion, speaking problems, vision problems, weakness, or dizziness.
- A sudden headache that quickly becomes severe.
- A headache that is different from your usual headache or is not fixed by your usual treatments.

Primary Headache Types (most common)



Tension-type Headache

- The most common primary headache.
- It is usually not very severe and does not get in the way of everyday activity.
- It may be associated with neck pain and can feel like pressure or tightness, often like a band around the head.
- Episodic tension-type headache is very common.
- It usually lasts a few hours but can last for several days.
- It usually responds well to over-the-counter pain medicines.



Migraine Headache

- A headache caused by the release of chemicals in the brain and around the brain's blood vessels that cause inflammation and pain.
- Migraine may occur every week, or even more often, and can last a few hours or days.
- Some people experience migraine their whole lives.
- Pain can be moderate to severe and may feel like throbbing on one side of the head.
- In addition to the pain, nausea and sensitivity to light and sound are common.
- All of these can be worsened by physical activity during a migraine.
- Prescription medicines are available when over-the-counter pain medicines do not work.



Cluster Headache

- Cluster headache is very rare.
- It typically occurs in people over the age of 20.
- A cluster headache is typically a short but intense headache that can occur many times in one day.
- Severe pain is often felt around one eye and is accompanied by a runny or blocked nose on the side of the headache, or a droopy eyelid (even though it appears normal other times).

Secondary Headache Types (most common)

Posttraumatic Headache

It usually occurs following a hit to the head and or body. It typically develops immediately after the injury or within the next week. This type of headache is very common in Veterans and active duty Service members.

It can be one of the most common complaints after a mild traumatic brain injury. Posttraumatic headache can feel like a migraine or a tension-type headache.

Cervicogenic Headache

It is a type of headache that is associated with neck pain (with or without an injury) or related to strain on the neck muscles over time. The headache is often a dull ache that starts with neck pain in and around the back of the head.

Drug Induced Headache

- It occurs when either a single medicine or a mixture of medicines is used enough to cause headache symptoms.
- It can be a daily headache and is often the worst after waking up.
- Symptoms include nausea, restlessness, problems with concentration and memory, and irritability.
- Medicine use may improve the current headache, but frequent or daily use of medicines will lead to worse and more frequent headaches. Unless the amount of medicine is decreased, the cycle will continue.
- If you are taking pain medicines more than two days per week and have many headaches, discuss this with your healthcare provider.
- You should work with your provider to figure out if the medicine(s) you are taking cause your headache.
- Talk with your provider to see if you have other things that increase your risk of developing medication overuse headache.

