



Common headache problems

Which are the most common types of headache?

The most common headache disorders are tension-type and migraine headache.

About 12% of the population suffers with migraine headache. Migraine is the most disabling headache disorder and is the 12th most common disability in women worldwide, and 19th in men.

By contrast tension-type headache tends to cause relatively little disability.

Most other headache disorders are much less common. For example, cluster headache occurs in about 0.2% of the population.

Why do I get headache?

Most headache disorders occur because of a genetic tendency to experience headache.

Should I have a scan?

People with isolated headache rarely have an underlying sinister cause for their headache.

While many individuals feel that they would be reassured by having a brain scan there is no significant increase in abnormal scans in people with or without isolated longstanding headache.

Isolated headache can cause significant disability but rarely causes other more serious problems.



What can I do to help myself and to assist the doctor in treating me?

Do you think you have **migraine** or **tension-type headache**?

1. If so keep a **daily headache diary** which documents your disability from the headache
2. Keep a daily headache diary for at least three months to be able to establish your patterns of headache
3. Ensure that you do not take painkillers too often. Taking painkillers 10 days or more per month can cause a **medication overuse headache**
4. While it can seem irresistible to take pain killers when headaches are severe, it can become a pattern of behaviour which risks problems. There is an increased likelihood of problematic side effects and prescribed preventive treatments for headache may be less effective
5. Headaches improve in about 70% of people once pain killers are reduced and adequate preventative treatment established
6. If you have difficulty restricting use of pain killers to less than 8 days a month, ask your GP for a referral to see a clinical psychologist to develop pain management skills to be able to manage the pain better. You can also make a referral yourself through IAPT (**Improving Access to Psychological Therapies**) for your borough
7. If you are experiencing migraine on more than 4-5 headache days a month which need treating with some sort of pain killer, a prescribed preventative medication might be appropriate – please make an appointment see your GP with your headache diary and this information sheet



Do I need to see a neurologist?

If you have restricted your pain killer use to less than 8 days a month and tried at least two preventatives – your GP can make a referral enclosing copies of your headache diaries and a **summary of preventative medication**; otherwise the advice is likely to be the same as above.