

Patient information factsheet

Why do I have headaches?

It is natural for people with severe headaches to be concerned that they have a serious brain abnormality, such as a brain tumour. However, research shows it is very rare (less than 1 in 1000) for a headache to be caused by a serious problem. Instead, the majority of headaches are caused by an overactive pain system, within an otherwise normal brain.

We've written this factsheet to give you more information about the common triggers of headaches and how to keep a record of these to help you get a better control of your headaches. It also explains when a headache may require further investigation, such as a brain scan. If you have any further questions, please speak to a member of your healthcare team who will be pleased to advise you.

Primary headache disorders

Headaches can take many different forms, including pain or discomfort in the scalp, face or neck. The pain may be sharp, dull, throbbing or stabbing, or you may have a feeling of pressure behind your eyes.

Most of the time there is no single cause for headaches. These types of headaches are called primary headaches.

Types of primary headaches:

- migraine
- tension type headache
- cluster headache
- primary stabbing headache
- neuralgia (sudden, severe facial pain)

Some people may have more than one type of headache at a time.

Approximately 90% of people that visit their doctor because of severe headaches have a diagnosis of migraine.

Common triggers for primary headaches

Some people are more likely to have headaches, especially migraines, because of their genes. However, there are other external factors that may trigger primary headaches.

Triggers may include:

- stress
- lack of sleep and tiredness
- dehydration

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- missing meals
- an unhealthy diet containing a lot of sugary or 'junk' foods
- regular intake of alcohol
- regular intake of caffeine
- regular intake of painkillers
- lack of regular exercise
- being overweight
- changes in hormone levels (particularly menstruation in women)
- a head injury
- wear and tear in the neck and back

How to identify triggers

Avoiding your trigger factors can help you get a better control of your headaches.

You may be able to identify your triggers, headache patterns and response to treatment by keeping a headache diary.

You may find that certain foods appear to be connected with the onset of severe headaches (usually migraines). However, research has shown that it is actually quite rare for specific foods to trigger a migraine attack.

Many people get symptoms before their migraine headaches start. This is called a prodrome and it can include:

- tiredness
- yawning
- hunger
- thirst
- passing more urine
- feeling low
- feeling more sensitive to noise or light

This may lead to a craving of certain foods or behaviours, for example eating chocolate, and this can make people identify false food triggers.

When do headaches need further investigation?

If you have a new headache that is unlike anything you have had before, you should visit your doctor.

Most people do not need any special investigations. However, there are standard medical guidelines, for example those issued by the UK National Institute for Clinical Excellence (NICE) that state which characteristics might be a cause for concern and need further investigation. These are often known as 'red flags'.

Examples of 'red flags'

You may need further investigation if:

- you have a new, severe headache that started very suddenly and reached its peak intensity within five minutes.
- you have any symptoms that suggest meningitis (a very stiff neck, fever, nausea, vomiting and confusion).

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- you have other concerning symptoms, such as seizures.
- your doctor finds a major abnormality during an examination.
- your headache is only, or mainly, brought on by coughing and straining, or by standing up.
- you have a history of certain illnesses, such as certain types of cancer, a low immune system, or if you take anticoagulants (like warfarin).

Why don't all people with headaches need brain scans?

If someone does not have one of the 'red flags' outlined by the NICE guidelines, then they should not have a brain scan just to reassure themselves that they're fine. This is because there are risks of having brain scans.

Risks include:

- exposure to unnecessary radiation
- discovery of an incidental finding (an abnormal or unusual looking area on the scan that is discovered unintentionally) that is not serious, but may make the person more worried

Useful information

NHS

www.nhs.uk/conditions/headache

The Migraine Trust

www.migrainetrust.org

Ouch (Organisation for the understanding of cluster headache)

www.ouchuk.org

National Migraine Centre

www.nationalmigrainecentre.org.uk

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