

A different way to present the causes:

Vascular: migraine; cluster; arteritis, vascular malformation; stroke

Musculoskeletal: tension; cervical; Chiari; TMJ

Infectious: sinus; osteomyelitis (bone infection), dental, meningitis

Neoplastic: (cancer)

Post-trauma

Neuralgias may cause "lightning-like" or "electric" brief pain

Psychogenic including stress headaches

A headache diary may be useful to record when headaches occur, to identify any possible causes or triggers and to see if treatments work well or not.

WARNING SIGNS:

Warning signs that suggest a serious condition that requires immediate medical attention: headaches account for between 1 and 8% of emergency visits.

1. Sudden and very severe pain, with drowsiness/confusion, or difficulty speaking, increased weakness or double/blurred vision.
2. Headache after a head injury if there has been loss of consciousness or "seeing stars" (especially if the above problems and/or nausea/vomiting.)
3. Pain in one eye with persisting blurred vision: this needs checking out by an ophthalmologist immediately.
4. High fever, neck stiffness (see above) and drowsiness.
5. Persistent headache present every morning on waking but improves during the day.
6. Any new neurological symptoms (numbness, weakness, and confusion for example) occur during what appears to be a migraine attack might suggest a stroke so you should seek medical attention.
7. Severe vomiting associated with headache: presents two problems: firstly it can lead to dehydration and secondly it may indicate increased pressure around the brain.
8. A change in character, location or frequency of headaches: see your doctor.
9. "The worst headache ever"; inform your doctor in order to eliminate any serious causes.

10. Sudden onset of pain after exercise or sexual excitement

11. If over 55 and have severe or frequent headaches for the first time, see your doctor to exclude conditions like stroke or glaucoma. (it is unusual for migraine to develop in later life)

TREATMENT

Only about 15% of headache sufferers do NOT take painkillers: in other words, the majority (85% or so) take painkillers: many on a regular basis. As we have seen above, regular painkiller use can in fact make the problem worse rather than better.