

FACT SHEET

What is Tension-Type Headache?

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"I get headaches that last for several days at a time and feel like a I'm wearing a hat that's too tight - more like a pressure than a real pain. It doesn't really stop me doing anything, but it's much harder to get through the day."

Tension-type headaches are the common sort of headaches that most people get.

Who gets TTH?

Occasional tension-type headaches affect about 80% of people from time to time. About 3 in 100 people have a tension-type headache on most days.

What are the different types of TTH?

Episodic tension-type headache is often referred to as "normal" or "ordinary" headaches.

Chronic tension-type headache is a condition when headaches occur on at least 15 days every month. In some cases, the only eases off but never goes completely. In this case, it is known as chronic daily headache. Because of the persistent nature of the headaches, this condition can be quite disabling and distressing.

What are the symptoms of TTH?

Typically, the pain is like a tight band like a 'hat-band' around the head. Some people

feel a 'squeezing' or 'pressure' on their head. It usually occurs on both sides of the head, often spreading down to or up from the neck. The pain is usually moderate or mild, but sometimes it can be severe. It can last anything from half an hour to several days. There are usually no other symptoms. Some people don't like bright lights or loud noises, and don't feel like eating much when they have a tension-type headache.

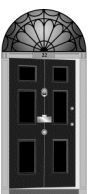
Do I need any tests?

There are no tests to confirm the diagnosis, which is based on the description of the headaches and the lack of any abnormal findings on examination. If there is any uncertainty about the diagnosis, tests may be done to rule out other causes of headaches.

What causes TTH?

The causes of TTH are many and varied but are no different from the factors that provoke 'normal' headaches. However, there are some factors that are more important than others:

Emotional tension, anxiety, or stress.
Physical tension in the muscles of the scalp and neck. For example, poor posture when working at a computer, or when lifting a heavy object.



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What can I do to help myself?

Relax: Taking a break, having a massage, going for a walk, or taking some exercise to get you away from the normal routine may help.

Cope with stress: If you have a stressful job or are faced with a stressful situation that cannot be avoided, try breathing and relaxation exercises to prevent a possible headache.

Treat depression: If you feel that you are depressed more often than not, it is important to seek medical advice to get effective treatment.

Take regular exercise: Tension-type headaches are more common in people who do not take much exercise compared to those who do. Try walking where possible or take stairs rather than the lift to make exercise a routine part of your life.

Keep a diary

Diary cards can be used to record a great deal of relevant information about your headaches, particularly how often you get them, how long they last and what your symptoms are. They are also valuable in assisting diagnosis, assessing trigger factors and assessing the effectiveness of treatments.

Take drugs early...

Painkillers such as aspirin, ibuprofen or paracetamol usually work well. Always read the leaflet which comes with the medicine packet. However, drugs only treat the symptoms and, for long-term management, it is better to try to treat the cause.

...but not too often

It is important not to take symptomatic treatment too often as if you start taking it most days, you could end up giving yourself a headache from the treatment. To avoid this happening, you should never take drugs to treat headache symptoms regularly on more than two or three days a week. This is quite different from when your doctor prescribes specific preventative drugs to take every day. These prophylactic medications work in quite a different way from symptomatic treatments by preventing the migraine process developing.

What other treatment can I take?

Amitriptyline is sometimes used to prevent frequent headaches.

What if drugs don't work?

For some people, the above treatments do not help, or only partially help. If all else fails you may be referred to a pain clinic.

Will it get better?

If the cause of headaches is identified and treated, tension-type headaches rarely continue to be a problem.

This information is provided as a general guide only. If you have any queries or concerns about your headaches or medications please discuss them with your GP or your City of London Migraine Clinic Doctor.

Dr Anne MacGregor July 2006
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