

Your head aches: What could it mean, and what can be done about it

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When there's pain, pressure and pounding in your head, you might think the worst: Is it a brain tumor?

Probably not, a Penn State physician assures.

Headache in and of itself is not a common sign of a tumor, because the brain itself doesn't feel pain, said Dr. John Messmer, medical director at Penn State Health Medical Group. Though a headache might develop if a tumor is causing [spinal fluid](#) to build up, most of the time a headache is a headache.

But not all headaches are the same.

You might have a migraine, a tension headache or a [cluster headache](#)—and each responds to different treatment. Here's how to recognize each type and how to cope:

Migraines are severe, pulsating headaches that may happen regularly, sometimes several times a month. They can be preceded by an aura, in which people have blind spots, or see shimmering spots or flashes of light. Migraines usually affect one side of the head or behind the eye and may last for days. Routine physical activity makes them worse.

Some migraines are accompanied by stroke-like symptoms, including numbness on one side of the body. These tend to occur in older people who had migraines when they were younger.

"If it's properly diagnosed as a migraine, there are several levels of intervention," Messmer said in a Penn State news release.

Mild migraines may respond to over-the-counter painkillers like aspirin or ibuprofen and a nap in a dark room.

For migraines that occur several times a month, doctors prescribe more powerful medicine, including drugs called triptans or calcitonin gene-related peptide receptor blockers. These work best when the headache is

just starting.

The cause of migraine is unknown, though alcohol, certain foods and a woman's menstrual cycle are among the known triggers.

Tension-type headaches, meanwhile, can happen in any part of the head and often feel like pressure. They may spread into the neck.

"It's not necessarily tension in the sense of life tension or tension in the sense of muscular tension" that causes them, Messmer explained.

Anxiety and anger can trigger these headaches, as can too much alcohol or coffee and even sitting in the wrong position. The pain can affect any part of the head.

"One of the things a physician should be determining is what the problem is and then fixing that problem," he said. If you're drinking too much coffee or not getting enough sleep, the doctor should help you see that.

If the headaches are infrequent, Tylenol or ibuprofen should provide relief. If they happen often, a riboflavin supplement, exercise, stretching and relaxation therapy may help.

Like migraines, cluster headaches are vascular, meaning they involve blood vessels. They are uncommon and usually happen to men.

The same drugs used to treat [migraine](#) are helpful for cluster headaches, as is oxygen.

No matter the type of headaches, if they are impairing your work, your education and your relationships, it's time to see a doctor.

"It's unique to everybody," Messmer said. "For some people, one

headache a week is OK. For another, one headache a year is too much."

If, however, you've never had a problem with headaches and they begin happening regularly, it is definitely time to see the doctor. Migraines often start in the teen years; if they begin later in life, ask your doctor.

And if your headache is coupled with blurry vision and you are unable to use one of your limbs, it is an emergency. Call 911 or have someone take you to the hospital.

More information: Harvard Health has information about what to do when you have a [headache](#).

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