

HEADACHE CARE TOOLKIT FOR PATIENTS

Version 4/17/2007

Dear Patient:

Living with headaches can be very difficult, but most people can be helped if they get good medical advice. Many kinds of headache can be treated by changing medications, adjusting diet, and making healthy lifestyle choices. We want you to be able to treat your headaches effectively without having to come often to the Emergency Room.

Everyone with headache problems should have a primary care provider. This is the main person you should go to for help with your headaches and your general health. If you do not have a primary care provider, you need to get one. Primary care providers are usually doctors, but may also be nurse practitioners or physician assistants who work with doctors.

This tool kit contains information about headaches and how to treat them effectively. Please read the information and share it with your primary care provider. The kit includes:

- Information about migraine headache, medication overuse headache, and working with your primary care provider to avoid the emergency room.
- A sample headache diary that you can fill out and bring to your primary care provider.
- Information on diet changes that might help reduce your headaches.

Thank you. We hope this information helps you to have fewer and milder headaches.

Sincerely yours,

The UW Health Pain Care Team

Issued by (Signature): _____ Pager: _____

Printed Name: _____ Date/Time: _____

Patient Name:

DOB:

MR #



SR300079

University of Wisconsin Hospital and Clinics

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HEADACHE DIARY

Please use this chart to keep track of your headaches. This can help you and your doctor find the best treatment. For each day of the month, fill in the dates on the calendar.

Patients with chronic migraine / chronic daily headache: Circle appropriate abbreviation to indicate (S) Severe Headache (N) No Headache or (O) Other Headache

All other patients: Write in the box to indicate *when* the headache occurred, what *medications* you took, and whether you had *relief*.

Month and year: _____

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	N S O	N S O	N S O	N S O	N S O	N S O	N S O
When Med Relief							
	N S O	N S O	N S O	N S O	N S O	N S O	N S O
When Med Relief							
	N S O	N S O	N S O	N S O	N S O	N S O	N S O
When Med Relief							
	N S O	N S O	N S O	N S O	N S O	N S O	N S O
When Med Relief							
	N S O	N S O	N S O	N S O	N S O	N S O	N S O
When Med Relief							

Completed by: _____ Date: _____ Time: _____

If other than patient, relationship to patient: _____

Reviewed by: _____ Date: _____ Time: _____ Pager #: _____

Migraine Headaches

There are many kinds of headaches. The purpose of this Health Fact is to provide information about migraine headaches.

What Are Migraine Headaches?

Migraine headaches involve severe pain on one or both sides of the head, an upset stomach, and at times, changes in vision.

The pain of a migraine headache is described as intense, throbbing, or pounding and is felt in the forehead, temple, ear, jaw, or around the eye. Migraine often starts on one side of the head but may spread to the other side.

Some people notice a variety of vague symptoms before the migraine starts. These can include mental fuzziness, mood changes, fatigue, and unusual retention of fluids. During the headache phase of a migraine, a person may have diarrhea and increased urination, as well as nausea and vomiting. The pain of a migraine can last several days.

Other people may have neurological symptoms called an aura up to an hour before the headache begins. The person may see flashing lights or zigzag lines, or may temporarily lose vision. Other symptoms of aura may include trouble talking, weakness of an arm or leg, tingling of the face or hands, and confusion.

Migraine can strike as often as several times a week, or as rarely as once every few years and can occur at any time. Some people have migraines at predictable times – near the days of menstruation or every Saturday morning after a stressful week of work.

What causes a migraine?

There are many ideas or theories about what causes a migraine. Causes include complex changes in the brain's nerve activity. In some cases, migraine may run in families.

The factors that bring on or trigger a headache are different for each person. Some migraine sufferers do not know of anything in particular that causes a migraine, while others list one or more triggers. What may trigger a migraine one time may not trigger a headache another time. The most common triggers that you should avoid are the overuse of caffeine and pain medicines.

Other Forms of Migraine

In addition to common migraine, headache can take several other forms. Just two are

listed here:

1. *Let-down or "Holiday" Headaches:* A person may be able to deal with stress and activity during the workweek, but gets a "holiday" headache when the stress is decreased over the weekend or while on vacation.

2. *Medication Overuse Headaches:* These headaches may occur when a person often consumes either caffeine or a short acting pain medicine. Often means several times daily or four or more days in a week. For more information on these headaches see *Health Facts for You #5896*.

Migraine Treatment

The goal of migraine treatment is to reduce the frequency and severity of your headaches, allow you to be active, regain control of your life, and enjoy life as fully as you can with as few side effects as possible. You should be aware that there are many kinds of treatments available for migraine and that success often involves a combination of approaches including lifestyle changes and medicines.

Medicines, biofeedback training, stress reduction, and elimination of caffeine and sometimes certain foods from the diet are the most common methods used to prevent and control migraine and other types of headaches.

Regular exercise, such as swimming or vigorous walking, can also reduce the frequency and severity of migraine headaches. Some people find that yoga and whirlpool baths help reduce headaches.

During a migraine headache, short term relief can sometimes be obtained by using cold pack.

Medicines. There are three ways to treat migraines with medicines:

- prevent the attacks (prophylactic)
- stop the headache in the first stages (abortive)
- relieve symptoms after the headache occurs (analgesic)

Preventive (prophylactic) medicines. If you have headaches more than twice a week or headaches that debilitate you more than 1-2 days per month, you should be prescribed a preventative or prophylactic medicine. Medicines used to prevent or reduce the number of headaches include propranolol, amitriptyline, valproate, topiramate, and others. You need to take these medicines regularly every day for them to work. It may take a few weeks for them to start working, so be patient.

Abortive medicines. For infrequent migraine, medicines can be taken at the first sign of a headache in order to stop it or to at least ease the pain. People who get occasional migraine may benefit by taking aspirin or acetaminophen at the start of an attack. Small amounts of caffeine may be useful if taken in the early stages of migraine.

One of the medicines used most often to stop an attack of migraine is a triptan. Another is ergotamine tartrate. For best results, these need to be taken during the early stages of an attack. If a migraine has been in progress for about an hour and has passed into the final throbbing stage, these medicines will probably not help.

Because ergotamine tartrate can cause nausea and vomiting, it may be combined with medicines to prevent nausea. Ergotamine tartrate should not be taken in excess or by people who have chest pain, severe high blood pressure, or vascular, liver, or kidney disease.

Other pain medicines can sometimes help to stop a migraine attack. These include over-the-counter medicines such as aspirin, acetaminophen (Tylenol®), ibuprofen (Advil®, Motrin®), Naprosyn (Aleve®) and prescription opioids (morphine, oxycodone, others). You should always get your doctor's advice before you use these regularly to treat migraine.

Overuse of abortive medicines can cause medication overuse headaches.

Caffeine is also an abortive medicine for headache, but daily caffeine use can cause worse migraines or medication overuse headaches. It is important to completely stop using caffeine to help your headaches get better.

Side effects. Many antimigraine medicines can have side effects. But like most medicines they are fairly safe when used with care and under your doctor's supervision. Make sure you understand the side effects of your medicines. Your doctor can help you answer any questions..

Biofeedback and relaxation training. Drug therapy for migraine is often combined with biofeedback and relaxation training. Biofeedback is a way to give people better control over body functions such as blood pressure, heart rate, temperature, muscle tension, and brain waves. Biofeedback may be combined with relaxation training, during which patients learn to relax the mind and body.

Biofeedback can be practiced at home with a portable monitor. But the goal of treatment is to do biofeedback without a machine to help you. You can then use biofeedback anywhere at the first sign of a headache.

Diet. A small number people with migraine will be helped by changing their diet. Talk to your doctor about whether a diet change would be helpful for you.

Planning your treatment. Your doctor will help you set up a treatment plan for your headaches. Write it down and keep a copy with you. If you need to see a different doctor about your headaches, your treatment plan will help you get the best care.

For more information about headaches:

American Council for Headache Education
19 Mantua Road
Mount Royal, NJ 08061
1-800-255-ACHE (1-800-255-2243) - <http://www.achenet.org/>

Migraine Awareness Groups: A National Understanding for Migraine Sufferers (MAGNUM)
113 South Saint Asaph Street, Suite 300
Alexandria, VA 22314
703-739-9384
<http://www.migraines.org/>

National Headache Foundation
428 West Saint James Place, 2nd Floor
Chicago, IL 60614
1-800-843-2256
<http://www.headaches.org/>

National Institutes of Health Neurological Institute
P.O. Box 5801
Bethesda, MD 20824
301-496-5751
<http://www.ninds.nih.gov/>

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Medication Overuse Headaches

What is a medication overuse headache?

There are many types of headache, such as tension headaches and migraines. One cause of headaches is too much headache medicine. This is called a **medication overuse headache**, also known as an analgesic rebound headache.

Some kinds of headache medicine can cause headache if you take them too often. If you use these medicines for headache relief more than two times a week, your headaches may start to occur more often, last longer, and become more painful. Your usual headache medicines may no longer work as well. The headache may now be a medication overuse headache – the result of too much headache medicine.

How do you know if you have medication overuse headaches?

Your health care provider will help you to answer this question. Clues that you might have medication overuse headaches include:

- You have a history of migraine or tension-type headaches.
- You have a headache more than 15 days per month.
- You are using more and more medicine to fight the headaches, but it doesn't last as long or doesn't work at all.
- The headaches seem to be getting worse, especially if you don't take the medicine.
- You often wake up with a headache.
- The headache may be on both sides of your head, even if it often was one-sided before.

What medicines can cause medication overuse headaches?

- Acetaminophen (Tylenol®); aspirin; ibuprofen (Advil®, Motrin®)
- Pain medicine/caffeine combinations (Anacin®, Excedrin®)
- Combinations with butalbital, caffeine, or others (Fiorinal®, Fioricet®, Esgic®, Midrin®, others)
- Caffeine (coffee, tea, sodas, "energy drinks," caffeine tablets, chocolate)
- Opioid pain medicines (morphine, oxycodone, hydrocodone, propoxyphene, butorphanol, others)
- Tramadol (Ultram®)
- Migraine medicines, if overused (Imitrex®, Maxalt®, Relpax®, Amerge®, Migranal®, others)
- Decongestants (pseudoephedrine, phenylpropanolamine, oxymetazoline)

How do I treat my medication overuse headaches?

As with all headaches, the goals of treatment are to have fewer and milder headaches and

also to become more active and functional. With medication overuse headache, your doctor will often follow the steps listed below. It will probably take a few weeks before you begin to see an improvement. *You need to go through all of these steps in order to succeed.*

1. **Stop the problem medicine.** You must completely stop the medicine(s) causing the medication overuse headache. Your doctor will teach you the proper way to do this. This is called "analgesic washout." If you do not do this, the treatment will not work.
2. **Be prepared and be patient.** As you stop the medicine, your headaches may not stop, or may even get worse for a few weeks. Your doctor will prescribe other medicines and other techniques to help you through this time. Be patient and stick with the plan. All of the problem medicine must be out of your body before the new treatments will work well. It might be tempting, but you **must not** use problem medicines during the washout period.
3. **Change your lifestyle.** Medicines are only part of a good headache control plan. Learn to avoid the things that trigger your headaches. Regular mealtimes, proper nutrition, better sleep habits, stress management, and regular exercise can all help you to have fewer and milder headaches. Learning to manage pain,, learning to relax, biofeedback, and meditation may also be helpful. Your doctor can help you to set up many of these lifestyle changes.

Once the medication overuse headaches are gone, don't go right back to your old habits. Your doctor will help you to begin a healthier headache care plan that will work better for you.

Other headache resources:

American Council for Headache Education

(609) 845-0322 or 1-800-255-2243

<http://www.achenet.org/>

National Headache Foundation

(312) 388-6399 or 1-800-843-2256

FAX (312) 525-7357

<http://www.headache.net/>

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Headache: Working With Your Doctor to Avoid the Emergency Room

Know your headache care team

Everyone with frequent headaches should have a *headache care team*. The members of that team include:

- **You.**
- **Your primary care doctor.** If you do not have a primary care doctor, it is important that you get one. This doctor is the first person to call when you have any kind of health problem.
- Some patients also work with a **headache care specialist**. You may need this kind of help if your headaches do not respond to standard treatment.

Tell your doctor about the problem

If you have frequent headaches and have trouble dealing with the pain, you should make an appointment with your doctor just to discuss your headaches. If you use the visit for other issues, you may not have the time you need to talk about your headaches. Be prepared to give details about your headaches. Your doctor will also want to know what other health problems you may have and any medicines you are taking.

Take notes about your headaches

To help your doctor diagnose and treat your headaches, you need to know as much as possible about them. It is helpful to keep a headache diary or calendar. Be sure to include details about every headache. Include:

- Date and time of day.
- Before or during the headache, did you see flashing lights or other unusual things of any kind?
- Where in your head was the pain located?
- Did you have other problems (nausea, vomiting, light sensitivity, etc.)?
- Did you take anything for the pain? What, how much, and did it help?
- Was your headache brought on by anything in particular, such as stress, smells, travel, or your period?
- Did your headache make you miss work, school, or social activities?

Develop a treatment plan with your doctor

No two patients and their headaches are alike, so all patients need their own treatment plans. The goals of treatment are to have fewer and milder headaches while getting more active and functional.

- Talk to your doctor about your headaches and what you want your treatment plan to do for you.
- Know your headache triggers.
- Know your headache medicines and their effects. Most patients will use a preventive medicine (to reduce the number of headaches) and a medicine to stop a headache when it begins.
- Know how to prevent your headaches using both medicines and non-medicine treatments (relaxation, stress management, others).
- Know when to take your medicine (often at the first sign of a headache).
- Know what to do if your medicine does not work.
- Know what to do if your headache is much worse than or different from usual.

Carry out your treatment plan

- Take your medicine as directed.
- Do not overuse your medicine. Overuse can cause more headaches.
- Do not skip medicine doses.
- Keep your headache diary so you can discuss your treatment with your doctor.
- Keep track of any medicine side effects.
- Avoid headache triggers where possible.
- Reduce stress. Find ways to deal with stress, such as exercise or meditation.
- Eat regular, healthy meals. Get enough sleep.
- Make follow-up appointments with your doctor to talk about progress.

Share your treatment plan

Your treatment plan will be part of your primary care doctor's medical record. It will be used by other health care providers upon your request. This helps make sure that you get the best and most consistent care if you have problems with your headaches.

Keep a copy of your treatment plan with you. If you need to see a different doctor than your primary care doctor when you are traveling, or if your primary care doctor is unavailable, you should share your treatment plan with that doctor to make sure you get the best care.

Avoid the emergency room (ER) or urgent care center

Your doctor's office is the first place to go with help for your headaches. If you follow your treatment plan, you should be able to avoid using the ER or urgent care center.

- Keep your medicine with you at all times.
- Do not run out of medicine. Get your prescription filled before you run out.
- If your medicine is not working, call your doctor's office. Even after hours, there are doctors on call who can help you.
- Talk to your primary doctor about medicine side effects or other problems with your treatment.

- Do not stop taking your medicine without first talking with your doctor.

Other headache resources:

American Council for Headache Education

(609) 845-0322 or 1-800-255-2243

<http://www.achenet.org/>

National Headache Foundation

(312) 388-6399 or 1-800-843-2256

FAX (312) 525-7357

<http://www.headache.org/>

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Diet and Headaches

Your diet can affect your headaches. Many people have found that adjusting their diet helps their headache. "Bouncing" blood sugar levels (caused by too many concentrated sweets or other carbohydrates), caffeine, and some chemicals found in food can all cause or worsen headache.

Many of the dietary suggestions on these pages come from the National Headache Foundation in Chicago. Before trying them, discuss them with your doctor to see if they are right for you.

Basics

- **Read labels carefully.** Understand what is in the food you eat. Sometimes important ingredients are hidden. For example, "guarana", a plant extract often found in "energy" drinks, contains caffeine, but caffeine may not be mentioned on the label.
- Most people with headache problems should **avoid caffeine**. If you use a great deal of caffeine, you should taper the dose down over a few days or weeks.
- **Artificial sweeteners** such as aspartame (NutraSweet®) and sucralose (Splenda®) have been linked to headaches. Try removing them from your diet.
- It may also be a good idea to avoid high doses of sugar or starch in your meals. Discuss this with your doctor.
- People with **migraine headaches** may need to avoid foods containing chemicals called **nitrates, nitrites** and **amines**. Once you stop using these foods, it may take several weeks to see whether the diet change helps. Talk to your doctor to see whether this diet is a good choice for you.

Anti-Migraine Diet Recommendations (Mainly for migraine sufferers; ask your doctor if these suggestions apply to you.)

Food Type	ALLOWED	AVOID
Beverages	Decaffeinated coffee, fruit juices, club soda/seltzer, decaffeinated colas and sodas.	Caffeine worsens headache and can increase blood pressure. Avoid caffeine entirely if possible. Alcoholic beverages: ale, beer, red wines, sherry, vermouth.
Meat, fish, poultry	Fresh prepared meats, fish, poultry, eggs.	Aged, canned, cured, or processed meats, canned or aged ham, pickled herring, salted dried fish, chicken liver, aged game, hot dogs, any cold cuts with nitrates or nitrites. Any meat prepared with meat tenderizers, soy sauce, or yeast extracts.

Food Type	ALLOWED	AVOID
Dairy	Milk: homogenized, 2% or skim. Yogurt. Cheese: American, cottage, gouda, farmer, ricotta, cream cheese, Velveeta, yogurt, mozzarella. Limit sour cream to 1/2 cup/day.	Aged, mature cheese: blue, Boursault, brick, Brie types, Camembert types, cheddar, Swiss, Roquefort, Stilton, parmesan, provolone, Romano, Emmentaler.
Bread/cereal/starchy vegetables	Non-sourdough breads. All hot and dry cereals. White potato, sweet potato, rice, pasta.	Sourdough bread, breads and crackers containing cheese or chocolate.
Vegetables	All except those at right. Use with caution: navy beans, pinto beans, peanuts and peanut butter.	Broad beans, Italian beans, lima beans, lentils, snow peas, fava beans, soy beans, sauerkraut. Pickles. Sesame, pumpkin.
Fruit	All except those at right.	Limit to 1/2 cup daily: avocado, banana, citrus, figs, raisins, papaya, passion fruit, red plums, raspberries.
Soups	Homemade soups; cream soups made from allowed foods.	Canned soups: soup cubes, bouillon cubes, soup bases with autolyzed yeast or monosodium glutamate (MSG) (read labels).
Desserts	Fruit, sherbets, ice cream, cakes, cookies, Jell-O	Use with caution: Products containing chocolate (sorry!).
Sweets, hard candy	Sugar, jelly, jam, honey, syrup.	Chocolate candies, licorice, molasses, chocolate syrup.
Salts	Regular table salt in moderation	Soy sauce, monosodium glutamate (MSG), yeast, yeast extracts, Brewer's yeast, meat tenderizers, seasoned salt. Watch out for packaged foods with these ingredients.