

# Pfizer Australia HEALTH REPORT

ISSUE #15

## HEADACHE AND MIGRAINE

This edition of the Pfizer Australia Health Report looks at headaches and migraines, and how to manage them.

New research shows that almost nine-in-10 Australians are gambling with their health by not seeking medical attention for severe headaches.

84 percent of Australians report they have experienced a severe headache in the past 12 months, yet almost 40 percent of these people are not receiving any treatment.

The research also found that around 70 percent of Australians have little knowledge of headache treatments.

This report provides information on headaches and migraines for all Australians, and gives guidance on where to go for practical information. It has been produced

in conjunction with Headache Australia, which is an initiative of the Brain Foundation.

Findings inside are based on research responses from 1245 Australians aged 18 and over, conducted in December 2004 by independent consultants Stollznow Research.

The Pfizer Australia Health Report is produced monthly, in partnership with health consumer organisations and medical experts, and provides information and news to help you and your family to live a healthier, happier lifestyle.

The Pfizer Australia Health Report is always available free from [www.healthreport.com.au](http://www.healthreport.com.au) where you can sign-up for e-mail alerts of future editions. You can also request additional copies by calling **1800 675 229**.

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# HEADACHES DATE FROM ANCIENT TIMES

Migraines and headaches are not a modern phenomenon. Hippocrates was the first to describe visual symptoms of migraine as far back as 400BC.

He described a shining light, usually in the right eye, followed by violent pain beginning in the temples and eventually reaching the entire head and neck area.

Hippocrates also noted the association between headache and various activities such as exercise and even sexual intercourse.

Headache is a symptom of a range of neurobiological disorders, including some of the most common, such as intracranial hypertension. Adults aged 20-60 are the most likely to experience headaches, but children and adolescents can be affected too.

The term "headache disorder" encompasses a number of conditions that vary in severity, incidence and duration.

What is undisputed is that migraine and tension-type headache are the most prevalent. Both have disabling potential, and therefore have the greatest impact on public health.

Migraine has been more thoroughly investigated, and therefore is better understood. Onset of migraine is from childhood onwards but is most common in the 20s and 30s and occurs relatively infrequently after the age of 40 years. Migraine may nevertheless be a significant health issue among children.

The frequency of migraine attacks is highly variable - from one per year in some cases to more than one a week in as many as 25 percent of people. The average may be as high as 21 episodes per person per year.



Tension-type headache is the most widespread headache disorder. Onset is often in the teenage years and prevalence peaks in the fourth decade and then declines.

A large part of the population have mild and infrequent tension-type headache (once monthly or less), with 20-30 percent experiencing headache episodes more often. Tension-type headache is also more common in women, in a ratio of 1.5:1.



## Survey says nearly half ignore problems

A staggering 84 percent of Australians report they have experienced a severe headache or migraine in the past 12 months, yet almost 40 percent of these people are not receiving any treatment.

The research published in the latest issue of the Pfizer Australia Health Report was conducted for Headache Australia and researched-based medicines company, Pfizer Australia.

Headache Australia says that severe headaches can be a precursor to more serious health problems, such as stroke and neurological conditions.

"This is a cause for concern as headache is a complex condition," said Mr Gerald Edmunds, National Executive Director of Headache Australia.

Mr Edmunds says severe headaches are categorised as cluster, symptomatic, tension or migraine headaches.

"Severe headaches can be your body's way of letting you know that something is wrong. It is important for anyone who is frequently experiencing severe headaches to consult a doctor to rule out the possibility of underlying conditions."



The Pfizer Australia Health Report research found that around 70 percent of Australians surveyed have little knowledge of headache treatments.

"Headache management is a great challenge. You may need to try a number of treatment options before you discover what works best for you," Mr Edmunds said.

"While there is still no absolute cure, various treatments can provide a huge relief. Some medications are given once the headache has begun and others are taken daily to reduce the frequency of attacks."

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The Brain Foundation was established in 1970 by members of the Australian Association of Neurologists and the Neurosurgical Society of Australasia to reduce the incidence and impact of disorders of the brain, spine and nerves, as well as head and spinal injuries, through the provision of support, community education and research.

Headache Australia, an initiative of the Brain Foundation, is devoted to supporting research into headaches to discover more effective treatments and to continue the quest for a cure. Your help is always needed and can be given by supporting Headache Australia as a member and/or as a donor. Donations over \$2 are tax deductible. For information please call **1300 886 660** or visit **www.headacheaustralia.org**

# HEADACHES HAVE MANY NAMES

Headache Australia estimates that as many as six million Australians are likely to suffer from tension-type headaches, and our current research shows that 84 percent of Australians have experienced a severe headache in the past 12 months.

Although these are the most common (along with migraines), there are a wide range of other headache disorders, such as:

- "Normal" headaches such as 'ice-cream headaches' and those caused by hangover, illicit drugs, exercise, fasting and stress;
- Nerve headaches such as trigeminal neuralgia, pain from the eye, sinusitis, neck headache;
- Muscle-contraction headaches;
- Misuse, overuse or extended use of medication headaches;
- Head injury headaches;
- Serious causes of headache such as hydrocephalus; sub-arachnoid haemorrhage; meningitis; encephalitis; brain tumour; high blood pressure and; stroke.



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The survey also found that severe headaches affect women more substantially than men. Of those who experience severe headaches, women make up 62 percent compared to only 37 percent of men.

When it comes to causes, personal and emotional issues are more likely to trigger severe headaches in women than men. Over half of women surveyed list personal issues as the cause. Emotional causes account for nearly 60 percent of severe headaches in women and only 39 percent in men.

According to Headache Australia, severe headaches affect a large percentage of the Australian workforce and cost dearly in absenteeism and lost productivity.

This is especially the case for women, who are more likely to receive sympathy for severe headaches in the workplace.

Sixty-three percent of women say they receive sympathetic treatment in the workplace, but this drops to 46 percent for men.

# Managing Headaches

Headache management is a great challenge. A number of treatment options, preparations and methods of administration may have to be tried to discover what works best for each person.

The role of a doctor is vital in this process. Once a headache is correctly diagnosed, a headache management plan can be developed. The plan should be evaluated and updated regularly. Clear and regular patient-doctor communication is vital for the best outcome.

While there is still no cure for headache, there are a number of treatment options. Agreed advice is that a patient should ALWAYS CONSULT A MEDICAL PRACTITIONER before taking any form of treatment.

Some medications are given once the headache has begun (acute treatment) and others are taken daily to reduce the frequency of attacks (prophylactic treatment).

Over-the-counter medications may include painkillers or analgesics, alone or in combination with codeine, a sedative or non-steroidal anti-inflammatory drugs. Prescription medications for more severe headaches are mainly stronger mixtures.

These products are usually effective and safe for treating the pain when taken according to the directions. Some products are not recommended for people with certain health conditions, or for children. For example, some migraine medications do treat the cause and can prevent the onset of a migraine if taken in the prescribed dose when the first symptoms occur. However, some can have harmful side effects in a small minority of people.



Mild tension-type headaches usually respond well to treatment. For severe headaches that do not respond, if medication is required several times a week, or for problems with taking medication, a doctor should be consulted.

Preventative medication is taken daily, regardless of whether a headache is present, to reduce the incidence of severe or frequent headaches. These are prescription medicines and may have side effects.

Overusing and extended use of medication can actually lead to chronic daily headache. Medications containing ergotamine, codeine and caffeine have been specifically implicated, but frequent use of any of the medications used to treat an attack can lead to daily headache.

Complementary therapies may offer a natural solution to releasing tension in the body, thus easing pressure in the head. Not all will work or be available to everyone, and a qualified practitioner should be consulted first.

# THE PAIN THAT CAN DESTROY A LIFE

Migraine is a common and distressing disorder. It is not likely to directly lead to a person's death but can destroy their quality of life to a significant degree.

Headache Australia estimates that about 2.5 million Australians can be expected to experience migraine. It is thought that more women than men are affected due to hormonal factors.

The International Headache Society classifies a migraine as when:

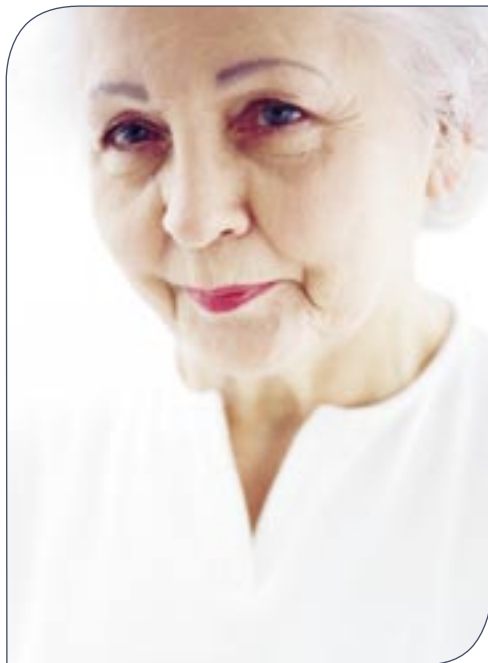
- The pain can be classified by at least two of the following – affecting one side of the head; being moderate to severe; throbbing; aggravated by movement;
- There is at least one of the following associated symptoms – nausea; vomiting; photophobia (sensitivity to light); phonophobia (sensitivity to noise);
- The headache lasts for between four and 72 hours.

Migraine may occur recurrently over many years or even decades. Frequency may vary greatly in the same person over time, from a few annually to several each week.

According to Headache Australia, severe headaches and migraines affect a large percentage of the Australian workforce and cost dearly in absenteeism and lost productivity.

The survey reveals there is a greater effect on work for those who experience migraines, with this group requiring almost three times more sick leave than the average of 0.88\* days for all listed headache types.

Cluster headache is an extraordinarily painful, rare (affects about 1 per 1000, estimated 14,000 Australians) and chronic



disease affecting five times as many men as women.

Cluster headaches usually develop between the ages of 20 and 40. They occur rarely in children and are extremely rare after the age of 70-75.

The term "cluster" is used as the attacks usually occur in groups or clusters, typically for several weeks once or twice a year at the same time of year.

The cause of cluster headache is thought to be a disorder of an "internal clock" in the hypothalamus, the part of the brain that regulates sleep patterns.

\* World Headache Alliance, UK.

## Some facts about headaches

- Tension headache and migraine are more common in women while cluster headache, a rarer form of headache, is more common in men.
- Many people with headaches 'suffer in silence', not seeking the attention they need because of the stigma of headache, the perception that 'headaches are all in the mind'. This research shows that nine-in-ten Australians surveyed do not seek medical attention for severe headaches;
- There are a wide range of factors that can trigger headaches including dehydration, sport, blows to the head, inadequate workstations, stress and diet;
- Headaches can also be related to depression, marital conflict, substance abuse and work pressure. Quite paradoxically they can also be caused by happy occasions such as going on holiday;
- Headaches are more common in women than men, this difference being most obvious during the reproductive years. The survey found that of those who experience severe headaches, women make up 62 percent compared to only 37 percent of men;
- In childhood, the ratio of female to male migraine is about equal. During the reproductive years, that changes to about three females to one male;
- It is thought that more women experience migraine because of hormonal factors. Keeping a Headache Diary (available from Headache Australia) can assist a doctor to understand the effect of a woman's menstrual cycle and to decide on



the best treatment options. It is also important for men to keep such a diary to enable triggers to be identified and managed.

### HEADACHES IN THE ELDERLY

Elderly people can experience many types of headache including migraine, tension-type headache and chronic daily headache. For many, headaches improve as they get older and migraines become less severe and less frequent. Occasionally, headaches will develop or change and this should be investigated if they do not respond readily to treatment.

Headaches that can affect elderly people include: side effects of medications (such as glyceryl trinitrate and blood pressure medications), trigeminal neuralgia, temporal arteritis; depression (which can result from lack of sleep and poor nutrition), brain tumour, and strokes.

## USEFUL CONTACTS

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**Brain Foundation National and New South Wales:** [www.brainaustralia.org.au](http://www.brainaustralia.org.au)Tel: (02) 9437 5967 Fax: (02) 9437 5978 Email: [info@brainaustralia.org.au](mailto:info@brainaustralia.org.au)

Suite 21, Regent House, 37-43 Alexander Street, Crows Nest, NSW, 2065

PO Box 579, Crows Nest, NSW, 1585

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**Brain Foundation Victoria:** [www.brainfoundation.org.au](http://www.brainfoundation.org.au)Tel: (03) 9845 2950 Fax: (03) 9845 2952 Email: [ceo@brainfoundation.org.au](mailto:ceo@brainfoundation.org.au)

The Nerve Centre, 54 Railway Parade, Blackburn, Victoria, 3130

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**Brain Foundation South Australia:**Tel: (08) 8223 3758 Fax: (08) 8223 3756 Email: [brainfdn@tpg.com.au](mailto:brainfdn@tpg.com.au)

Level 2, 99 Frome Street, Adelaide, South Australia, 5000

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**Brain Foundation Tasmania:**Tel: (03) 6231 4424 Fax: (03) 6234 3442 Email: [brainfoundation@netspace.net.au](mailto:brainfoundation@netspace.net.au)

250 Murray Street, North Hobart, Tasmania, 7002

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**Migraine and Severe Headache Support Group:**

Centre for Neurological Support. Tel: (08) 9330 2121

PO Box 332, Applecross, WA, 6156

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**World Headache Alliance:** [www.worldheadachealliance.org](http://www.worldheadachealliance.org)

The World Headache Alliance (WHA) exists to relieve the suffering of people affected by headache throughout the world. The Alliance is a collaborative global alliance of non-medical headache organisations from around the world. WHA currently consists of 37 organisations from 26 countries, including the Brain Foundation of Australia.

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**American Council for Headache Education:** [www.achenet.org](http://www.achenet.org)

The American Council for Headache Education (ACHE) is a non-profit patient-health professional partnership dedicated to advancing the treatment and management of headache and to raising the public awareness of headache.

