

HEADACHE (Cluster)

TO YOUR HEALTH - PATIENT EDUCATION HANDOUT

4.6

DESCRIPTION

A very severe headache that typically causes pain on one side of the head, behind the head, or around one eye. The headaches tend to recur at the same time each day for several days or weeks, separated by attack-free weeks or months. They affect adults over age 30, and men much more than women.

FREQUENT SIGNS AND SYMPTOMS

- Sudden onset of headache, often at night while sleeping
- Headache reaches its peak within 15 minutes and lasts about 2 hours
- Pain is unilateral, often around the eye
- Severe, piercing or boring pain
- Teary eyes
- Swollen and droopy eyelid
- Nasal congestion and runny nose
- Slow heartbeat
- Nausea
- Sweating

CAUSES

The cause is unknown. It may be a combination of factors, such as dilating blood vessels in the head, disturbance of the trigeminal nerve, or abnormal activity in part of the brain.

RISK INCREASES WITH

- Male, age over 30
- Smoker
- Previous head injury
- Sleep apnea (periods of not breathing at night).
- Persons who are in stressful jobs, are self-employed, sociable, active, and responsible.
- Possibly a genetic factor (unproven as yet)

PREVENTIVE MEASURES

Since the cause is unknown, no specific measures may be taken to prevent first episode. If stress related, learn stress management techniques. Avoid headache triggers, if known.

EXPECTED OUTCOME

No cure is available, but treatment can help control the pain and shorten the cluster period. There may be prolonged remissions between cluster episodes. Various drugs are available to help control attacks.

POSSIBLE COMPLICATIONS

Cluster headaches do not cause complications or lead to other disorders. They are debilitating and can interfere with daily activities.

GENERAL MEASURES

- Your health care provider can usually diagnose the disorder based on the history of the headache patterns and symptoms. Medical tests are normally not required.
- Treatment goals are to treat the symptoms and prevent or abort future attacks., it may involve drug therapy, use of oxygen, and lifestyle changes.
- During cluster periods, avoid bright light or glare, alcohol, excessive anger, stressful activity, or excitement; these can trigger attacks. Keeping a headache diary may be useful to help identify other triggers.
- Don't smoke. It may interfere with drug therapy.
- Some patients also have sleep apnea. Treating the apnea (with a mechanical device) helps headaches also.

MEDICATION

Your health care provider may prescribe one or more drugs to treat the headache and for prevention:

- Drugs called triptans (by mouth or injection).
- Dihydroergotamine by injection.
- Ergotamine tartrate, in a tablet, suppository, aerosol, or injection form.
- Oxygen therapy for home use.
- Lidocaine nasal spray or nasal drops.
- Phenylephrine (can be used for nasal stuffiness).

ACTIVITY & DIET

- Vigorous physical activity at first symptoms may abort an attack.
- Avoid alcohol and foods containing nitrates (such as smoked meat).

NOTIFY OUR OFFICE IF...

You have symptoms of a cluster headache.
Attacks continue after treatment is started.

Student Health Center



WWW.SIU.EDU/~SHC

This information is for educational purposes only. Consult your doctor for specific medical advice, diagnosis and treatment.

618-453-3311

Dial-A-Nurse is available after-hours until 10:30 p.m. during fall and spring semesters. In case of emergency dial 911.