What **You** Should **Know** About Your **Headache**

**Facts about headaches**
- Headaches are very common. Nearly half of adults have headaches.
- **Migraine** is the most common kind of recurrent, severe headache attacks; other common headache types include **tension-type**, and **medication-overuse** headache. More on these headache types can be found in separate info sheets (see * at bottom of this sheet).
- Medical research supports the use of various medical and non-medical treatments for headaches.

**When should I get professional help for my headaches?**
- If you have a new severe headache, or if your usual headache changes and is more severe or frequent.
- If your headaches are not well-controlled by your current treatments.
- If you become pregnant or are breastfeeding and are taking headache medications. More on **headaches during pregnancy and breastfeeding** can be found in a separate info sheet.*

**Who can help me?**
- Your family doctor is trained to assess and treat the common forms of headache.
- Neurologists are trained to assess the less common types of headache.
- Chiropractors and physiotherapists are trained to assess and treat headaches caused by neck muscle problems.

**Do I need x-rays, an MRI, or laboratory tests?**
- For most people, these tests are not needed to diagnose headaches.
- Your treating clinician will order tests only if the results could help you.

**What should I do?**
- Use a ‘headache diary’ to monitor your headache patterns and learn what might be causing your headaches or making them worse (‘triggers’).
- Adjust your lifestyle to avoid headache triggers such as stress, irregular schedules and poor sleep, missing meals, certain foods and beverages, and taking pain medications too often. You may have triggers that are not on this list.
- Learn and use stress management skills.
- More on **what you can do** can be found in a separate info sheet.*

**Should I take pain medications?**
- Many medications can be effective, but everyone is different.
- Over-the-counter medications such as ASA (e.g., **Aspirin**®), acetaminophen (e.g., **Tylenol**®), and ibuprofen (e.g., **Advil®** or **Motrin®**) can be used, but not 15 or more days a month, because frequent use can make headaches worse or harder to manage.
- Your doctor may prescribe other medications if your headaches are severe and interfere with your usual activities.

**Can headaches be prevented?**
- If you get headaches often, you may not be able to get rid of them completely. More on **migraine prevention** can be found in a separate info sheet.*
- Most people can reduce how often and how bad their headaches are by using headache ‘self-management’ skills. More on **self-management strategies** can be found in a separate info sheet.*
- There are a number of medical and non-medical treatments that can help to reduce how often and how severe your headaches are.

**When should I go back to my doctor or healthcare provider for my headache?**
- If your headaches don’t improve with the prescribed treatment and continue to interfere with your activities or affect your quality of life.
- If your headaches get worse or you have new symptoms.

*For more information on the topics covered here, see the other info sheets and the full brochure at: [www.ihe.ca/research-programs/hta/aagap/headache](http://www.ihe.ca/research-programs/hta/aagap/headache).*