



# Headaches and Migraines



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## Student Wellness Centre

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## HEADACHE TYPES AND MIGRAINE



Migraine Headaches:  
pain on sides of head,  
Intense, throbbing or pulsing  
head.

Tension Type Headache (TTH):  
Pain is like a band squeezing  
the head.



Sinus Headache:  
Pain is above the eyebrow  
and/or cheekbone.

Cluster Headache:  
Pain in and around one  
eye.



## Tension-type Headaches

There are three types of tension-type headaches:

1. Episodic – infrequent and random – occurs less than one day a month.
2. Frequent – 1-14 days a month.
3. Chronic – more than 15 days a month.

### Symptoms

- Typically, a dull, aching, and non-pulsating pain on both sides of the head,

- Head, neck, and shoulder muscle tenderness, and
- Pain that occurs in the forehead, temples, or the back of the head and/or neck.

### **Triggers**

- Stress and/or anxiety,
- Fatigue,
- Changes in sleep patterns,
- Skipping meals,
- Alcohol consumption,
- Anger and/or depression, and
- Eye, neck, or back strain.

## **Treatment**

### **Episodic Tension-Type Headaches**

This type of headache can be treated with over-the-counter analgesics such as aspirin, Tylenol, Advil, or Aleve (Read and follow label directions, unless instructed otherwise). If ineffective on its own, you can add a small dose of caffeine. A warm pack on the neck may also relieve the headache.

### **Frequent/Chronic Tension-Type Headaches**

See a health professional for diagnosis and consideration of preventive treatment such as amitriptyline (an anticonvulsant). They are used because they have an analgesic (pain killer) property. Some may be prescribed for those who have sleep disturbances.

**Did you know?** Nearly all headaches experienced by college students are **Tension-type headaches** (TTHs). TTHs may be caused by tightening muscles in the back of the neck and/or scalp. It is no surprise that these headaches are the most common type among college students as students are constantly sitting in strained positions (e.g., sitting in uncomfortable lecture chairs while hunching over a book to catch up on readings).

## Migraine Headaches

Genetics play a role in migraine headaches. If one of your parents has them, you have a 25-50% chance of getting migraines. That increases to 70% if both of your parents suffer from migraines. (webmd.com)

Migraine headaches last from hours to days and frequency varies depending on triggers. Symptoms may include nausea, vomiting, and sensitivity to light, noise, and odors.

Women experience migraine headaches more often than men. This may be caused by the woman's menstrual cycle. 60% of female migraine sufferers can relate the attack to their menstrual cycle (National Headache Foundation)

## **Treatment**

Initially, try to treat your migraine with an over-the-counter (OTC) pain (e.g., Advil or Tylenol) and an anti-nausea (e.g., Gravol) medication. Read and follow label directions, unless instructed otherwise. If those do not work see a healthcare professional to discuss options. You may be prescribed triptans (to constrict blood vessels) or preventive medication like beta-blockers. Cold packs can be used on the forehead and temples. Apply for 15 minutes at a time with 15 minute breaks in between.

## **“Sinus Headaches”**

“Sinus headaches” can refer to headaches caused by acute sinusitis (inflammation of the sinuses). These

are associated with nasal congestion, nasal discharge, fever, pain, and tenderness over the affected sinus, with a deep dull ache that is exaggerated by head movements. A healthcare professional should be seen if you think you are experiencing a sinus infection as they will need to determine the proper course of action.

## Cluster Headaches

Cluster headaches have severe, debilitating pain on one side of the head and are often present with a watery eye, nasal congestion, or a runny nose on the same side of the face. Cluster headaches appear suddenly and can recur for weeks or months, then disappear for months or years.

## Treatment

Treatment for cluster headaches should be reviewed with a healthcare professional. They will start medication therapy as early as possible after the headache appears to reduce the length

of the cluster period and decrease the severity of the headaches.

Medications can include corticosteroids and antiepileptics (anti-seizure). Over-the-counter (OTC) medications have little effect. These medications are slowly tapered off and then discontinued as the headaches decrease and disappear.

**Warning:** Using pain medication for headaches for more than nine days can lead to rebound headaches.

## Tips for Headache Relief

- **Take frequent breaks** while studying to give your eyes, neck, and back a break.
- Use an **ergonomic chair**.
- Use a **non-glare screen** over your computer.
- **Pain medications** are more effective at the beginning, so take medication as soon as possible.
- Have **caffeine in moderation** (maximum: 400 mg per day) as caffeine withdrawal causes headaches.

- Consuming **alcohol** can cause headaches. To help reduce a headache caused by alcohol try these tips:
  - Drink less,
  - Eat something or drink something high in sugar, and
  - Hydrate with water.
- **Stay hydrated** by drinking lots of water.
- **Maintain regular sleep** (at least seven hours per night).
- Eat a **meal or snack** every 3-4 waking hours.
- **Practice deep breathing** exercises, yoga, or meditation to help relax and relieve daily stress and anxiety.
- Have a **neck massage** to help with muscle tension.
- **Monitor time spent in front of a TV/computer** screen and reduce it if you are experiencing headaches.
- Talk to your healthcare provider if you decide to try physiotherapy or chiropractic therapy to relieve muscle tension.



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# Additional Resources

[wellness.usask.ca](https://wellness.usask.ca)

[www.webmd.com](https://www.webmd.com)

<https://headaches.org/>

<https://www.saskhealthauthority.ca/your-health/conditions-diseases-services/healthline-online/hw116874>

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