

Tension-Type Headache

Tension-type headache is one of the most common types of recurring headache, affecting 69% of men and 88% of women. Although it is commonly called *tension headache* or *contraction headache*, muscle tightness is not a cause even though neck discomfort may be present.

CAUSES

There are 2 forms of tension-type headaches. The **episodic** form occurs on fewer than 15 days per month. The **chronic** form occurs on 15 or more days per month. The cause of tension-type headache is uncertain. It may be associated with contraction of muscles in the neck and head, and the triggers of tension-type headache may include poor posture (such as from prolonged computer use or sleeping in an unusual position), smoking, fatigue, and stress. Sometimes, a tender point is present at the neck and scalp. Tension-type headaches usually start at younger ages (such as in the 20s) and rarely after age 50 years.

SYMPTOMS AND SIGNS

Tension-type headache is defined by the absence of features of a migraine. It requires at least 2 of the following:

- Pressing or tightening that does not pulsate (vice-like)
- Present on both sides of the forehead, temples, or back of the head
- Mild to moderate degree
- Not worsened by physical activity

Tension-type headaches typically last from 30 minutes to 7 days. Unlike migraine, there is no nausea or vomiting. However, like migraine, either **photophobia** (discomfort from light) or **phonophobia** (discomfort from sound) may be present. Tension-type headache has no **prodrome** (symptoms indicating onset of headache) or **aura** (such as flashing lights). Patients with migraine have milder headaches that are often called tension-type headache but are really mild migraine.

If your headache becomes more frequent, becomes significantly more severe (or is the worst headache of your life), is accompanied by fever, or does not get better with treatments that usually work, it is probably not a tension-type headache; you should call your physician or seek emergency care.

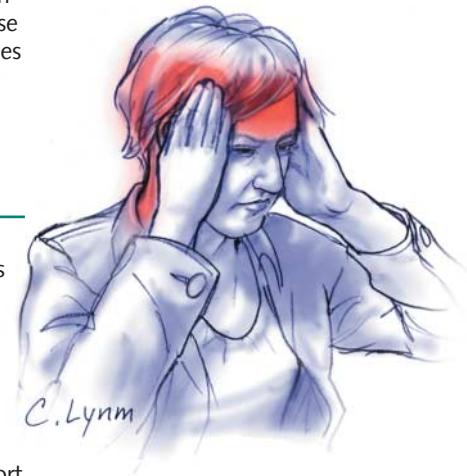
DIAGNOSIS, PREVENTION, AND TREATMENT

Tension-type headache is diagnosed when at least 2 of the main headache symptoms are present; there is no nausea, vomiting, or both photophobia and phonophobia together; and other causes of headache have been excluded. This may require a neurological examination and, rarely, imaging studies of the head such as MRI (magnetic resonance imaging).

The main preventive measure for tension-type headache is avoiding exposure to situations that trigger the headache. Treatment may include over-the-counter nonsteroidal anti-inflammatory drugs (such as ibuprofen) and analgesics (such as acetaminophen), behavioral therapies (such as meditation, biofeedback, or yoga), improvement of posture, and stretching/relaxation exercises.

Source: National Library of Medicine at the National Institutes of Health

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PROGNOSIS

Tension-type headache is harmless and in most cases is easy to control with proper treatment. It is seldom severe or disabling and generally does not interfere with normal quality of life and work. It does not affect life span.

FOR MORE INFORMATION

National Library of Medicine
www.ncbi.nlm.nih.gov/pubmedhealth/PMH0001800/

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Ryszard M. Pluta, MD, PhD, Writer

Cassio Lynn, MA, Illustrator

Robert M. Golub, MD, Editor

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