



HEAD OFF HEADACHES

If your noggin has been pounding and you're having trouble finding relief, help is here. Take our quick quiz to figure out what type of headache you have—migraine, tension, sinus, or cluster—then read on for expert advice on easing the pain. by BARBARA BRODY

1. Does your head hurt on only one side?

YES My left or right temple—but never both—feels very tender.
NO The pain is spread across my skull, face, and/or forehead.

2. Besides the pain, are you nauseated?

YES Sometimes I even throw up.
NO I can continue eating and drinking normally.

3. Does the discomfort worsen with everyday physical activity, such as walking up a flight of stairs?

YES When I move around, the throbbing becomes excruciating.
NO I might not be in the mood to move, but it doesn't affect the pain.

4. Do light, noise, or strong scents (like

perfume) exacerbate your symptoms?

YES If I could, I'd turn down all the lights and get myself to a quieter space ASAP.
NO None of those things make me feel significantly worse.

5. Do bad headaches run in your family?

YES I remember my mom/sister/aunt often retreating to her room in agony.
NO I don't recall any relatives being sidelined by head pain.

6. Prior to an episode, do you hear ringing in your ears, smell something strange, or see zigzag lines or flashing lights?

YES I often hear, smell, or see something unusual.
NO I don't get any warning beforehand.

7. Would you describe your pain as very severe?

YES It's moderate to extreme. It hurts so much that focusing on anything else is difficult for me.
NO The pain is mild to moderate. I'm uncomfortable, but I can manage.

8. Does it feel like there's a vise around your head that's getting tighter?

YES That squeezing sensation is the worst.
NO It's more like a pounding or stabbing.

9. Do you typically have muscle tightness in your shoulders or your neck?

YES My shoulders tend to be hunched up around my ears.
NO I might feel achy in general, but my upper body isn't tense.

10. Do you feel a lot of pressure in your cheeks, behind your eyes, or around the bridge of your nose?

YES One (or more) of these spots is especially sensitive.
NO My face feels fine.

11. Did your headaches begin after you battled a cold or other recent upper respiratory infection?

YES And I'm still having a lot of discolored nasal discharge.
NO I haven't had any cold-like symptoms in quite a while.

12. Has your sense of smell been affected?

YES I don't notice odors (fresh flowers, garlic) that other people remark on.
NO My sniffer is just as sharp as before my headaches began.

13. Is the pain intense and concentrated around one eye?

YES That eye looks red, and it keeps tearing up.
NO My eyes aren't affected.

14. Do you feel very agitated?

YES The pain makes me want to hit my head against a wall.
NO I just want to retreat to my bedroom.

15. Do your attacks occur up to eight times per day (or every other day) for months at a time?

YES I'll think my head pain is gone, but then it comes back again months later.
NO I haven't detected this sort of a pattern.

TURN PAGE FOR RESULTS ➡

When to Get Help Right Now

If severe head pain suddenly comes on full force—or if it feels like the worst headache of your entire life—get to the ER stat. This could be a sign of an aneurysm or stroke, which means you need immediate medical attention, says Peter J. Goadsby, M.D. Other signs you should call your doctor (though not necessarily run to the hospital) include headaches that are accompanied by fever, vision trouble, weakness, or mood changes, or that are increasing in frequency or severity.

If you answered YES to at least four of questions 1 through 7...

You're probably experiencing **migraines. About 18 percent of women get this type, and females in their 30s are most vulnerable,** says Peter J. Goadsby, M.D., director of the Headache Center at the University of California San Francisco. Migraines last four to 72 hours and are accompanied by nausea or sensitivity to light or noise. The throbbing pain is usually on one side only and worsens with movement. Some people notice an aura (odd lights, sounds, smells, etc.) beforehand.

If you answered YES to questions 8 and 9 (and NO to at least four of questions 1 through 7)...

You very likely are getting **tension headaches,** the most prevalent type—up to 80 percent of people experience them on occasion, says Jennifer Kriegler, M.D., a neurologist and headache medicine specialist at the Cleveland Clinic. The pain is rarely as severe as that of a migraine; **usually they feel like a tightness or pressure (rather than throbbing or stabbing).** Many sufferers also experience cramped muscles in their neck, shoulders, scalp, or jaw.

If you answered YES to questions 10, 11, and 12 (and NO to at least four of questions 1 through 7)...

You may have **sinus headaches.** This type is relatively uncommon, as **90 percent of people who think they have them are really getting migraines,** says Benjamin Bleier, M.D., a sinusitis expert at Massachusetts Eye and Ear Infirmary. If you truly get sinus headaches, you will have facial pressure as well as signs like yellow or green nasal discharge, a diminished sense of smell, and/or a nasal blockage. They are often the result of a recent upper respiratory infection or allergies.

If you answered YES to questions 13, 14, and 15 (and NO to the majority of other questions)...

You probably have **cluster headaches.** These are very rare—"they're about as common as multiple sclerosis," says Goadsby—but easy to diagnose. **Extreme pain is concentrated around one eye,** lasts from 15 minutes to three hours, and then repeats itself up to eight times a day for a "cluster" of several weeks or months. People who get these become severely agitated and resist lying down, as falling into REM sleep often leads to more intense pain, says Kriegler.

MAKE IT STOP!

From doctor-prescribed solutions to natural at-home remedies, here's how to relieve your type of headache—fast.

MIGRAINES

MEDS Prescription fixes are often necessary; they include pain-relievers like sumatriptan (Imitrex), which you pop at the onset of a headache, and preventive ones (such as blood pressure drugs, used off-label) that are taken daily to reduce the severity and frequency of attacks.



SUPPLEMENTS Studies show that taking capsules containing 75mg of butterbur twice daily could cut migraine frequency and intensity by 50 percent. Or try 400 to 700mg of magnesium oxide every night at

bedtime; Kriegler calls it "nature's muscle relaxant."

BOTOX "If you've been getting migraines 15 days or more per month, this injectable may reduce the number of episodes," says Goadsby, "probably by reducing nerve activity."

TENSION HEADACHES

MEDS OTC options such as ibuprofen will probably suffice. But don't overdo it: Using these more than twice a week could prompt rebound headaches (your body gets acclimated to the meds, so the pain is worse when you stop).



MUSCLE RELAXATION

For a tight neck and shoulders, Kriegler suggests this DIY technique: Put two tennis balls in a tube sock and tie the ends together. Lie on the floor with the sock under the base of your skull, one ball on each side of your neck; slowly roll back and forth. If you're a jaw-clencher, try placing the tip of your tongue on the roof of your mouth behind your teeth. "It's impossible to clench and do that at the same time," she says.

SINUS HEADACHES

MEDS Ibuprofen or acetaminophen may help a little, but you really need

to see an ENT to treat the underlying sinus problem. "Inflammation can be targeted with oral and nasal steroids," says Bleier. If you have a bacterial infection you'll also need antibiotics.



NASAL IRRIGATION

Using a neti pot or squeeze bottle with a solution of salt water and baking soda (pre-mixed packets are sold in drugstores) can relieve your congestion and speed healing by clearing out any mucous along with bacterial or viral particles and other irritants, says Bleier. Always opt for distilled or boiled, cooled water to avoid infection.

CLUSTER HEADACHES

MEDS Expert help is essential, says Kriegler. A neurologist may prescribe an injectable form of a drug such as sumatriptan, which enters your bloodstream faster than the pill. You may also be given a preventive medication to lessen the frequency and intensity of these headaches.



OXYGEN If you end up in the ER because the pain is so bad, you might be given 100 percent oxygen through a face mask, as this therapy has been proven to ease the ache quickly. Your doc also could prescribe a tank for home use.

Joe: Friend or Foe?

Caffeine can be a double-edged sword, says Kriegler. "A little may help by constricting blood vessels; it also helps you absorb other medications." But at doses higher than 300mg a day (about two cups of coffee), caffeine can rev up stress hormones, making the pain worse—and you can get withdrawal headaches if you suddenly stop drinking it. Her advice: Limit yourself to a small cup a day and reach for a refill only when you feel a headache coming on.



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