

Tension Headache



PLAY PICMONIC

Presentation

More Common in Women

[Female Sex-symbol](#)

Tension headaches occur slightly more often in women than men.

Bilateral Band-like Pain

[Band across Both-sides with Pain-bolt](#)

The pain of tension headaches is often vague, and may be described as dull, aching, pressure, and “band-like”. The pain occurs bilaterally, or on both sides of the head. In contrast to migraine headaches, it is not associated with nausea, vomiting, or auras.

Occipital and Neck region

[Octopus at Occipital and Neck region](#)

Patients often experience pericranial muscle tenderness, or pain and tightness in the muscles at the base of the skull (occipital) and in the neck.

Exacerbated by Stress

[Stressed-guy making it Worse](#)

Mental tension, stress, and fatigue are the most common precipitating and exacerbating factors reported in tension headaches. In contrast to migraines, tension headaches are not exacerbated by physical activity.

Exacerbated by Fatigue

[Sleepy-guy Making it Worse](#)

Mental tension, stress, and fatigue are the most common precipitating and exacerbating factors reported in tension headaches. In contrast to migraines, tension headaches are not exacerbated by physical activity.

Duration

> 30 Minutes

[Greater-than Dirty \(30\) Minute-timer](#)

Tension headaches generally last between 30 minutes and several hours, but may last up to 7 days in some cases.

Acute Treatment

Relaxation

[Relaxing in tub](#)

Avoidance of exacerbating factors is a staple of tension headache management. Patients should be counseled to avoid high stress situations and to use relaxation techniques such as hot baths, massage, and biofeedback.

Caffeine

[Caffeinated-coffee](#)

Caffeine has been shown to increase the effectiveness of NSAIDs and acetaminophen in treating tension headache when given in combination. Due to the increase in side effects, caffeine-containing compounds should be reserved for patients who have failed initial therapy with simple analgesics.

NSAIDs

[N-sad](#)

Nonsteroidal antiinflammatory drugs such as Ibuprofen, ketoprofen, and naproxen have been proven effective in shortening the duration and intensity of tension headaches. Opioid and narcotic pain relievers are not first line treatments.

Acetaminophen

[A-cheetah-with-a-fin](#)

Another effective choice, and has less side effects than other treatment options.

Preventative Treatment

Amitriptyline

[Amish-trampoline](#)

Prophylactic treatment may be necessary in patients with frequent or severe tension headaches. Amitriptyline, which blocks reuptake of serotonin and norepinephrine, has been shown to decrease duration and intensity of tension headaches by 50% when taken prophylactically. It should be used with caution due to its narrow therapeutic window and severe side effect profile.