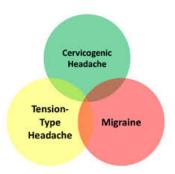
CERVICOGENIC HEADACHE By Dr. John A. Papa, DC, FCCPOR(C)

Cervicogenic headache is defined as a headache which has its origin in the area of the neck. The source of pain arises from biological tissues such as muscles, ligaments, joints, and nerves that have become injured and/or irritated. When these structures become stimulated, their nerve endings send pain signals from nerves in the neck to the head.

Cervicogenic headache is a relatively common cause of chronic headache and has symptoms similar to those seen in other well known headache disorders such as migraine and tension type headaches. For example, both migraine and cervicogenic headaches affect females more than males, with headache symptoms generally located unilaterally (on one side of the head). These headache sufferers may complain of severe pain, head throbbing, sensitivity to light and sound, and nausea. Neck pain and muscular tension are also common symptoms in tension headaches, migraine attacks, and cervicogenic headaches. The problem of symptomatic overlap in these common and frequent headache types makes



the accuracy of precise diagnosis difficult. Furthermore, the fact that an individual may have two or more headache types co-existing at any one time further elevates the diagnostic challenge.



Cervicogenic headaches are usually unilateral (occasionally bilateral), and can be experienced in several different regions of the head including the base of the skull, the forehead, or behind the eyes. The intensity of pain may fluctuate from mild to moderate to severe on a daily basis. Individuals with cervicogenic headache may also exhibit physical signs of altered neck posture and restricted range of motion of the neck. Headache symptoms can be triggered or reproduced by active neck movements or passive positioning. Tenderness can also be palpated in the neck and upper shoulder region with muscular trigger points spreading pain upwards into the head.

The cause of **cervicogenic headache** may be singular or multi-factorial. This may include a whiplash injury, sports injury, arthritic changes, chronic postural strain, stress, and fatigue. The evaluation and assessment of headaches should include a proper medical history and physical examination. Serious causes of headache symptoms must be ruled out before appropriate treatment can be administered.

After a diagnosis of **cervicogenic headache** is made, the goal of therapy is to minimize headache frequency and diminish levels of pain associated with each episode. Treatment and management options that have demonstrated effectiveness include: postural correction, joint mobilization and manipulation, acupuncture, soft tissue therapy, and rehabilitative exercises. Trying a variety of therapies or combination of therapies may be required to find relief. It should be remembered that many patients who are diagnosed with migraine and tension headaches may also respond to these treatment strategies.



For those suffering from headache symptoms that may be interfering with their activities of daily living, a qualified health professional can prescribe appropriate therapy, rehabilitation, and self-management strategies specifically for your circumstance. For more information, visit **www.nhwc.ca**.

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