

# Headache and the Eye

## “Brain drain”

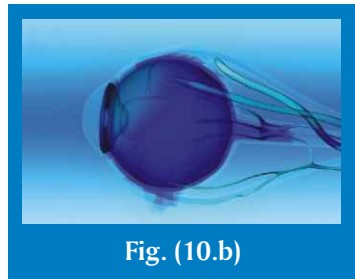
Each year about 90 percent of men and 95 percent of women experience at least one headache. Headaches are also common among children. Some headaches are associated with eye signs thus placing the eye specialist in the frontline of their recognition and management. While most headaches are benign in nature, some are symptomatic of serious and potentially life-threatening disorders. Therefore all headaches need complete evaluation. This includes an eye examination since eye problems can also cause headaches.



Here are some common causes of headaches:

### Headache due to Eye diseases

There are a variety of eye problems that can cause a headache. In some cases, the headache is caused by overworking the eye muscles in an attempt to better focus their vision. This is due to uncorrected refractive error. In other cases, problems of raised pressure within the eye (glaucoma) can ‘refer’ pain to other areas of the head. Inflammations of the outer coats of the eye (scleritis and uveitis) can also cause headaches with ocular pain. Inflammation of the optic nerve behind the eye causes sudden visual loss with deep-seated pain behind the eye. In elderly patients optic nerve damage can occur with pain over the temple (side of the forehead) and is a symptom of a serious condition called giant cell arteritis that needs prompt treatment.



Difficulties with vision, such as blurring

caused by long-sightedness, can be corrected with prescription glasses or contact lenses. Other disorders, such as glaucoma, need to be medically investigated and treated promptly. Once the eye problem is corrected, the associated headaches should cease.

### **Tension Headache**

Tension headaches account for 90% of all headaches and usually begin in early adulthood or later. Chronic daily stress is the most common trigger for most types of headaches. It can result when the head, neck, or face muscles contract but do not relax. The headaches are located around the sides of the head and the back of the neck. They may last for hours sometimes days, and are usually mildly to moderately painful.

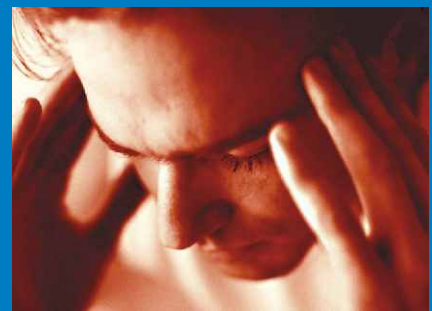


Fig. (10.c)

Attention to precipitating factors such as certain foods, emotions, posture, lack of sleep, hunger, and eye strain help in relief along with medication.

### **Migraine Headache**

Migraine is a condition that causes episodes ('attacks') of headaches. Between migraine attacks, the symptoms go completely. The headache is usually on one side of the head and is often described as 'throbbing' or 'pulsating'. Typically, it gradually gets worse and peaks after 2-12 hours, and then gradually eases off. Other common symptoms include: feeling sick (nausea), vomiting, discomfort with bright lights or loud noises, and wanting to lie in a dark room.

About 1 in 4 people with migraine have migraine with aura (warning symptom) before the headache begins. Visual aura is the most common type of aura. Examples of visual aura are: a temporary loss of part of vision, flashes of light, and zig-zag lines in the vision. Other

types of aura are numbness and 'pins and needles' in the upper limbs and face, problems with speech, and odd smells. Each aura usually lasts just a few minutes and is followed by the headache.

Most migraine attacks occur for no apparent reason. However, something may trigger migraine attacks in some people. For example: Diet (irregular meals, cheese, chocolates), Environmental (smoking, glaring light, flickering TV sets, loud noises, strong smells), Psychological (depression, anxiety, anger, tiredness), and Medicines (hormone replacement therapy, some sleeping tablets, and the contraceptive pill). Other trigger factors include "periods" (menstruation), different sleep patterns, and the menopause.

Migraine headaches are treatable. Painkillers and anti-nausea medications work well in most cases if they are taken at the very beginning of the episode as soon as symptoms begin. Other specific medicines are prescribed to prevent or abort the headache. Medicines to prevent migraine are also available, but are not painkillers, and are different to those used to treat each migraine attack. A Doctor can give advise on the various treatment options.

### **Sinus Headache**

The sinuses are air-filled spaces between and below the eyes, and communicate with the nasal cavity. The main causes of sinus headaches are allergies and sinus infections. The headache is associated with facial tenderness, pain, and pressure around the forehead, cheeks, or eyes. The upper teeth may ache. The pain worsens if the patient bends over or lies down, or if exposed to sudden cold air. Generally, symptoms of a sinus headache are worse first thing in the morning, after spending the night lying down. Symptoms of a sinus infection are almost always associated with symptoms of sinusitis, which include nasal congestion, chills, fever, and yellow discharge or mucus from the nose.

Steam inhalation can help soothe a sinus headache. Painkillers such as Aspirin, and Ibuprofen, also help. Severe sinusitis needs evaluation by an ENT specialist.

## Intracranial Headaches

These are rare but serious causes of headache. Headaches can be caused by raised pressure of fluid circulating in and around the brain. This may either occur spontaneously or due to brain tumours. The eye specialist is often the first person to detect this since it presents with swelling of both optic nerves detected when the inside of the eye is examined by an ophthalmoscope. Other causes of headache may be bleeding inside the head following head injury or rupture of an aneurysm (abnormally distended blood vessel).



Fig. (10.d) Papilloedema (Swelling of Optic Disc)

## Hypertension Headache

Hypertension (or high blood pressure) is associated with early morning or waking headache. Evidence has shown some relation to sleep disordered breathing.

## Seek professional advice

If you think your headaches may be due to eyestrain, it is important to have your vision checked by a qualified eye specialist. Some people who already wear prescription glasses may not be aware that their eyes may have changed a little over time. It is important to have your eyes regularly tested and your glasses or contact lenses updated.

### Caveats :

- Headache is never as simple as it is thought.
- Headache has to be evaluated for its cause by the right specialist.
- Eye problems may be a cause which goes undetected until an ophthalmologist finds it.
- A Neuro-Ophthalmologist role is important when Neurological and Ophthalmological problems co-exist