



Headache Wellness Center

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Tension Type Headaches (TTH)

Tension-type headaches (TTH) are extremely common, effecting 90% of the population from time to time. The pain in a TTH is mild to moderate, generally not interfering with daily routines. These headaches may begin in the back of the neck, temples or forehead and often spread around the head like a band. Shoulder soreness may accompany these headaches. The discomfort is a pressure or vice-like sensation.

Acute TTHs are infrequent occurring less than twice per week. These headaches may relate to muscle spasms from staying in one position too long, such as working at a computer terminal or sewing machine.

Chronic TTHs occur more frequently, at least twice a week lasting from one hour to all day. These headaches may also be associated with muscle tightness but may relate to chemical changes in brain serotonin similar to migraines.

Serotonin is a "neurotransmitter" or chemical messenger between nerve cells. Serotonin is involved in the control of sleep, mood (emotions) as well as headache pain control. Therefore sufferers of TTHs may experience listlessness, sleep disturbances, difficulty concentrating, mood swings, and a feeling of being "down or blue." People with TTHs often awaken early with morning headaches. Because of the chemical (serotonin) predisposition both physical and emotional stressors may trigger TTHs.

Acute TTHs may be prevented by better muscle tone (through exercise), improved work posture (ergonomics) or identification and elimination of triggers. They may be relieved by application of heat or cold, massage, physical therapy or muscle relaxation. Over-the-counter pain & anti-inflammatory medication such as ibuprofen (Advil) or naproxen (Aleve) may be helpful. Muscle relaxant medications may also be of benefit.

Since there is a similarity between migraines and chronic TTHs, there are similarities in their treatment. When possible, triggers need to be identified and reduced. Use of over-the-counter pain medications more than twice per week should be discouraged, as these often lead to rebound headaches. Treatment may include exercise, medication, stress reduction and good sleep hygiene