

HEADACHE: A REAL PAIN IN THE NECK

BY GRAHAM NELSON

RUSSELL VISSER

ABOUT NORTHWEST PHYSIOTHERAPY GROUP

Northwest Physiotherapy Group was first established as Essendon and Moonee Ponds Physiotherapy Clinic in 1990. We have over 50 years combined experience in muscle and joint conditions, and a fully equipped, purpose built facility with state of the art pilates studio and rehab gym.

We can have you feeling fitter, stronger, more energetic and pain-free in the shortest possible time.

“Get fast, effective, long term results with new approach to Physiotherapy based on current pain research. We provide expert hands-on assessment and treatment of the whole body and teach you how to manage the cause of your problem”

We guarantee you will be completely satisfied with our professional, caring and comprehensive service. To book an appointment call us on 03 9370 5654 or visit <http://www.nwpg.com.au/appointment>



HEADACHE: A REAL PAIN IN THE NECK

BY GRAHAM NELSON & RUSSELL VISSER

HEADACHE- A REAL PAIN IN THE NECK

Do you suffer from headaches that are generally one sided, begin in the neck and then may radiate into the head?

Are your headaches worse when you have been sitting for prolonged periods, especially at a computer or when driving?

If you answered yes to either question above, you may have **Cervicogenic Headache!**

CERVICOGENIC HEADACHE

Cervicogenic headache is a type of headache with distinct signs and symptoms that has been classified by the International Headache Society, an organisation that researches and classifies all types of headaches.

Headaches are generally classified as **Primary or Secondary**. Primary headaches occur **without an identifiable source** within the body or CNS(Central Nervous System). Examples are migraine, tension and cluster headaches.

Secondary headaches arise from an identifiable source, such as the eyes, sinuses or neck.

Cervicogenic headache (CGH) is a secondary headache, and research shows that it makes up for 15-20% of all chronic and recurrent headaches.

The good news for sufferers of CGH is that there is scientific evidence that it can be treated effectively once it is recognised and diagnosed.

HOW WILL I KNOW IF I HAVE CGH?

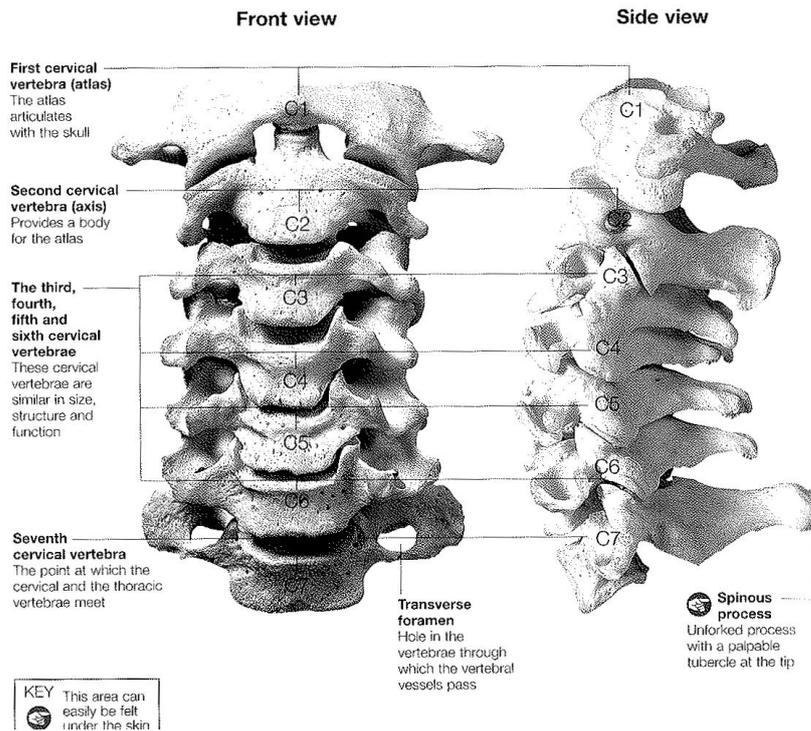
CGH is defined as pain that occurs in the neck or occipital (back of head) region but may spread forward to the side or front of the head. It is generally aggravated by neck movements or sustained neck postures, eg sitting at a computer or driving.

You may also experience one or more of the following characteristics:

- the pain is generally dull and not throbbing or piercing
- it is generally one sided but you may also experience shoulder pain on the same side.
- may be eased by massage or external pressure over the neck.
- there may be a history of trauma to the head or neck/shoulder from a fall or car accident.
- you may be able to feel tension/tightness in the muscles at top or bottom of the neck, and there may be “lumps” in the muscles that may be tender to touch.
- you may notice stiffness or even pain when you turn your head to one side.
- CGH is more common in females.

WHAT CAUSES CGH?

The pain of CGH is thought to be of Somatic origin, ie arising from joint capsules, ligaments or muscles in the neck, especially the upper cervical segments C1-3. These structures are innervated by sensory nerves that detect pain. When these nerves become irritated by mechanical load or inflammation, they send pain signals to the brain. The brain then detects these signals and sends an output signal to our conscious awareness that there is a problem and we need to address the underlying cause or at the very least treat the symptoms. New research on pain indicates it is more an output signal from the brain rather than a “feeling”.



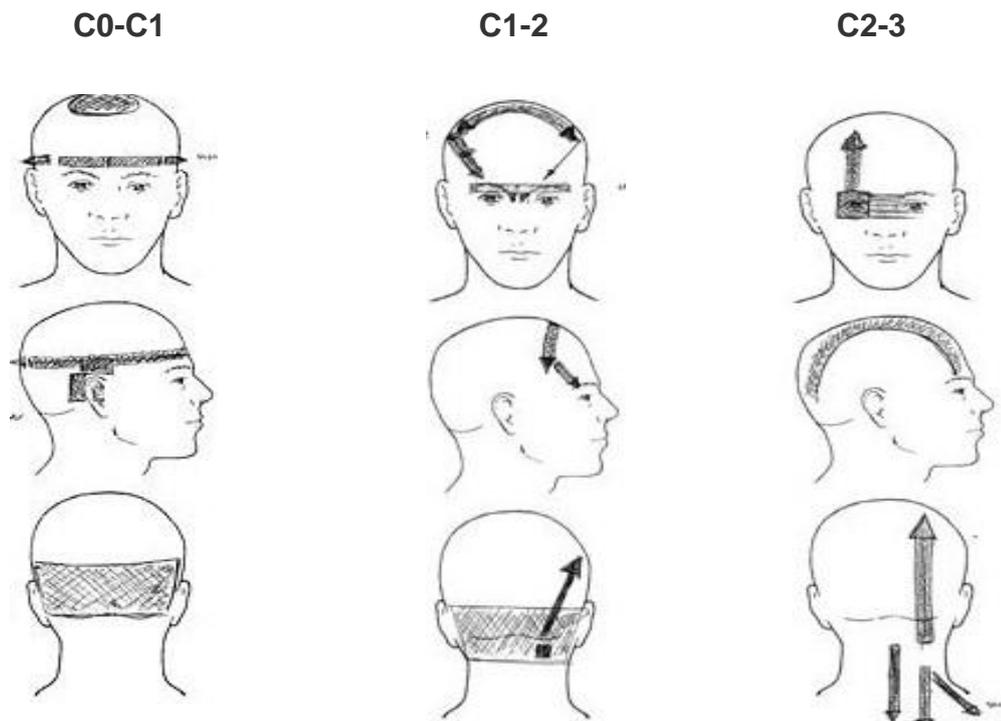
SO WHY DO THESE STRUCTURES IN THE NECK BECOME IRRITATED?

Well it is usually as a result of joint stiffness or muscle tension developing, ie dysfunction. **Why does this occur?** This is a slightly more difficult question to answer, as there may be several factors involved. One of the main factors is poor neck and back posture, which may be accentuated in sitting, especially at a poor workstation. There may also be muscle imbalances or weaknesses in the upper body that may lead to neck pain and headaches, *such as weakness in shoulder blade retractors, elevators or deep neck flexors.* Finally there may be degenerative changes in the facet joints or discs of the neck which can cause inflammation and hence irritation of sensory nerves.

Dysfunction in the upper cervical segments may give rise to neck pain, but could also give rise to pain in the back, side or front of head. Pain can even be transferred to the eye socket, jaw or temple region. Pain that originates in one part of the body, in this case the upper cervical segments, but is felt in other regions is called **Referred Pain**. The headache pain of CGH is a type of referred pain, and usually originates in the cervical segments C1-3. This region of the neck has nerve connections with nerves that supply the head and face (Trigeminal Nerve) and so the brain can misperceive

the origin of this pain, ie the brain sends the signal to us that the pain is in the head when it is actually originating from the neck. This is similar to Sciatic pain, which is leg pain referred from the lumbar spine (low back) usually secondary to disc bulge or prolapse.

There are characteristic referral patterns that relate to the specific segments that pain is arising from in CGH. The diagrams below show referral patterns for specific segments.



So if you have pain in any of these areas, there is a good chance that you may have Cervicogenic Headache.

SO WHAT DO I DO IF I THINK I HAVE CGH?

The good news is that there is scientific evidence that CGH can be treated effectively with Physiotherapy. Recent research has shown that cervical manipulation and specific exercise can reduce the frequency, severity and duration of CGH when compared to placebo treatments (sham treatments), and that these results are maintained at 1 year follow up.

Physiotherapy may also have a role in the treatment of other types of headache, such as tension headaches or migraines, as these headaches may have a cervical component, ie neck or spinal dysfunction may contribute to pain inputs to the brain which can make you more susceptible to headache.

SO IF YOU THINK YOU MAY HAVE CGH, OR YOU ARE EXPERIENCING HEADACHES YOU ARE UNSURE ABOUT, BOOK IN FOR AN ASSESSMENT AT NORTHWEST PHYSIOTHERAPY GROUP.

*The initial consultation includes a comprehensive assessment of cervical and spinal posture, range of movements, muscle strength and imbalance tests, nerve tests and passive spinal segmental mobility tests to determine the cause of your headaches and any possible musculoskeletal factors that may contribute to them. **We will also treat the dysfunctional areas to restore balance to your musculoskeletal system.***

Your satisfaction with our professional, caring and thorough service is guaranteed.

Simply call our rooms at Moonee Ponds on **9370 5654** or send an appointment request through the website and we'll book you in for your initial consultation.

(Please bring all reports/scans with you and be prepared to disrobe.)

Look forward to many years of increased energy, activity and enjoyment doing the things you love to do!!