



Is There a Connection Between MS and Headaches?

by ERICA WILSON

MS and Headaches

Though headaches are not considered symptoms of multiple sclerosis (MS), many people who have been diagnosed with MS experience headaches at one time or another.

There are many types of headaches, and Mayo Clinic breaks them down into two categories: primary and secondary.

Cluster, migraine, and tension are the most common primary headaches. I have suffered with headaches for at least half my life. In elementary school, my headache pain was resolved with an eyeglass prescription. In high school, I was told they were tension headaches, and Tylenol usually helped alleviate the pain.

In adulthood, migraines kept the trail of pain going. I experienced migraine with aura and migraine without aura. My migraines with aura would begin with an ice-cold feeling from the back of my head to my forehead and within a day or two I would have a headache. Some were intense and would have me in a dark room for hours, sometimes days. Others were tolerable but hurt just enough to affect my life. Oddly, I have not experienced nearly as many migraines since my MS diagnosis.

Primary Headaches

Cluster Headaches: these headaches occur in clusters of time or patterns. They can wake you from sleep with pain on one side of your head. The pain can also occur in the eye on that same side. Though the pain can be severe, the headaches are not life-threatening.

Tension Headaches: tension headaches are not as severe but are quite uncomfortable. It is like wearing a headband that is way too tight, but you can't take it off. These headaches can last for a short period of time to as long as a week or more. If you experience tension headaches more than 15 days in a month's time for three months, they are considered chronic.

Migraine Headaches: in my opinion, migraine is the worst kind of headache. Like MS, it has several means of attack and can be difficult to treat. They usually occur on one side of the head. Symptoms include throbbing (when you touch your temples, you can feel the blood rushing) and sometimes nausea, vomiting, and sensitivity to light and sound. Often, they are accompanied by migraine aura, for instance, tingling or flashes of light.

Secondary Headaches

An underlying disease is usually the cause of secondary headaches. I will not list them all, but here are some of the most common causes:

- Sinusitis: more commonly known as sinus infection, sinusitis occurs when the sinuses become inflamed
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and lead to mucus buildup. I have never had a sinus infection, but I have heard they are horrible. Symptoms include pain when bending over, stuffy nose, and green or yellow mucus discharge.

- High blood pressure
- Dehydration: when your fluid intake is less than your fluid output, the result is dehydration. Most commonly caused by vomiting and diarrhea, the symptoms include extreme thirst, less urinary output, fatigue, confusion and lack of sweat, among others.

Can Headache Be a Symptom of MS?

I mentioned earlier that headache is not considered a symptom of MS, but according to the U.S. National Library of Health, 78% of patients with MS reported headache as one of their symptoms. Just before my diagnosis, I had experienced the worst migraine of my life. It lasted for about a month and a half and required two trips to the emergency room and the “migraine cocktail”, which brought miraculous relief. The second cocktail finally sent my migraine to the depths from which it emerged. Several months later, I was diagnosed with MS, and have maybe had one or two migraines in the three and a half years since.

Treatment

Treatment of headache pain depends, of course, on the type of headache you are experiencing or have been diagnosed as having. Treatments for tension headaches include:

- Aspirin
- Ibuprofen
- Acetaminophen

Prescription medications are also an option, along with a more holistic approach like massage therapy or acupuncture.

Migraine treatment may include over-the-counter medications along with resting in a dark room, caffeine, and a warm or cold rag on your forehead or the back of your neck. The dark room almost always works for me, along with a tablet that has caffeine in its ingredients. If your migraine is chronic, your doctor may prescribe a daily dose of medication to keep your headache at bay.

The Takeaway

Headaches are so commonplace, it's easy to pop a tablet and go on with your day. If you notice that you are using pain relief every day, it may be time to see a physician. If you have been diagnosed with MS and you are having headaches, especially if they interfere with your daily routine, speak with your doctor about a daily medication that can keep you from getting a headache in the first place. In short, always consult your physician about any symptoms you are experiencing. Perhaps keep track of them in a diary so that your reporting will be accurate.