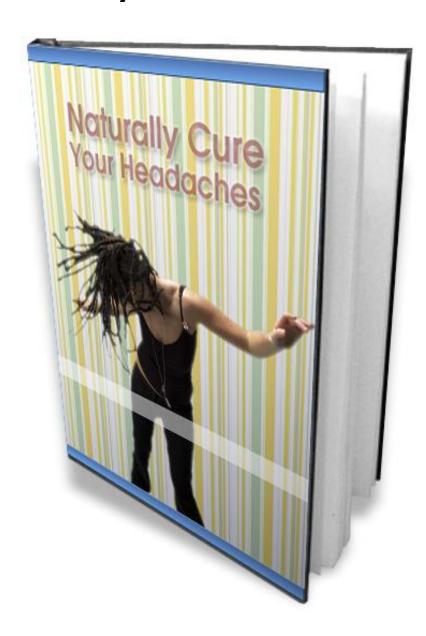


Naturally Cure Your Headaches



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Introduction

It would be a very rare individual indeed who has never suffered a headache at some time in their life so it follows that almost all of us are familiar with the agony of suffering a headache. Sometimes a headache can be relatively mild, something that barely disturbs the normal course of the day whereas at other times, the worst headaches can be totally disabling.

For some people, their headache problem is considerably worse than this, as they suffer an extreme form of headaches known as migraine or even the far lesser known cluster (or 'suicide') headaches. Migraine headaches are usually characterized by several factors in combination whereas cluster headaches are often described as the worse pain imaginable by sufferers.

There is no doubt whatsoever that for someone who is a regular or chronic headache sufferer, the pain goes considerably further than simply being a little uncomfortable.

In this report, you're going to read of many different ways of treating headaches entirely naturally, as well as some ideas for isolating what causes you to suffer headaches when you do so.

We will also consider many of the more common medical treatments that are used to treat headaches and migraine, whilst also analyzing the side-effects of many of these treatment methods, something which might dissuade you from grabbing the pill bottle quite so quickly the next time your head is a little bit sore!

And whilst there is no doubt that most people are more familiar with having a headache than they would like to be, it may come as a surprise to know that there are many different types of headaches.

There are several different systems of headache classification as well. However, it is now generally agreed that the most useful or widely accepted system of classifying headaches is that used by the International Headache Society, so it is with the IHS system of headache classification that we will begin.



The IHS system of classifying headaches

The earliest classification system which resembles those that are used nowadays was formulated in England by <u>Thomas Willis</u> is 1672.

Nowadays, the mantle of classifying headaches has been taken over by the <u>International Headache Society</u> who published the first edition of the International Classification of Headache Disorders (ICHD) in 1988, with the revised second edition appearing in 2004.

As this system of classifying headaches is accepted by the World Health Organization, it is also one that is most commonly used by medical professionals all over the world as well. The ICHD contains explicit diagnostic criteria that can be applied to various different types of headaches and uses a numerical code to classify the various different types of attack.

At the top of the classification system, there are four different types of headaches that are grouped together under the 'primary headaches' category. These are:

- Tension type headache (TTH);
- Migraine;
- Trigeminal autonomic cephalalgias (TAC) and cluster headaches;
- Other primary headaches including <u>hemicrania continua</u> and <u>new</u> daily persistent headache (NDPH).

Following these four primary types of headaches, there are 14 additional secondary headaches, the majority of which are conditions where the pain in the head is directly accountable to some other form of difficult to your problem. For example, headaches that result from head injury, those that are caused by an infection or by the administration or withdrawal of a particular substance or medication would all be included as secondary headaches.

The headaches that are classified as being primary are conditions where the headache concerned is not caused by any other immediately recognizable condition.

We will consider the various different causes of all of these different



forms of headaches over the next few chapters, where I'm also going to look at the various different types of primary headache and the different symptoms before considering the various possible causes.



Tension type headaches

What are they and what are the symptoms?

Tension headaches or tension type headaches as they were renamed in the first edition of the ICHD in 1998 are by far the most common form of headache, with some estimates suggesting that as high as 90% of all headaches suffered by people anywhere in the world fall into this category.

Tension type headaches are further broken down into two subcategories, episodic and chronic. The first of these would be defined as tension type headaches that occur on less than 15 days in every month, whereas any headaches that occur more regularly than this over a period of at least six months would fall into the chronic category.

With a tension type headache, the pain can radiate from the eyes, neck, back or indeed from any other muscles in the upper body. The pain is often described as being one of constant pressure, something that feels as if your head is trapped in a vice or between two bricks and it is relatively common for the pain to be felt on both sides of the head at the same time as well. This is known as suffering from bilateral pain.

Most commonly, a tension type headache is likely to range from relatively mild to moderately painful but sometimes, the pain can become severe or even extremely severe.

What causes tension type headaches?

Until relatively recently, it has long been believed that tension type headaches were generally caused by tension in the muscles around the neck area and in the head. For instance, it had long been suggested that a primary cause of tension type headaches was excessive clenching of the teeth which causes a serious contraction of the temporal muscle.

However, more recent research has suggested that many tension type headache patients do not have excessive tension in their muscles at all, so this theory now carries less weight than it did previously.

Another theory that seems to have more credibility is the idea that tension type headaches may have something to do with a temporary malfunction in the area of the brain which is responsible for sensing and controlling pain. The theory has it that due to some kind of

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malfunction involving neurotransmitters like serotonin, the brain misinterprets ordinary signals from the muscles as being pain, hence the presence of the headache.

What is not disputed is that there are many different causes that can bring on headaches of this type. Amongst these causes are the following:

- Stress;
- · Lack of sleep;
- Eyestrain;
- Caffeine withdrawal;
- Improper or bad posture;
- Irregular meals or eating food that triggers the headache.

However, you should note that these are just the widely accepted and well-known causes that often bring on tension type headaches and that what actually triggers an attack in any individual can be as personal as the severity of the attack itself. In effect, every individual who suffers tension type headaches will do so for their own different reasons.

It is therefore imperative that if you are either an episodic or chronic tension type headache sufferer, you need to isolate exactly what it is that is causing your problem before attempting to deal with it.

For instance, many women will suffer tension type headaches just prior to the onset of the menstrual cycle, often associated with premenstrual syndrome.

In other examples, loud noises or bright, flashing lights can trigger headaches in some people, so there really is no way of listing every possible cause of tension type headaches because every individual is different.



Migraines

Migraine headaches are fortunately suffered by a relatively small percentage of people, but for those who do suffer, migraines can literally take over their life.

Migraines are categorized by the International Headache Society by degrees of severity, with a category 0 attack being extremely mild so that life goes on relatively normally, ranging to 3 which represents severe pain that prevents all forms of activity.

Migraine headaches are a neurological syndrome where the pain in your head can be accompanied by altered perceptions, nausea and/or vomiting. The typical migraine attack is unilateral (i.e. affecting just one side of the head) with a pulsing, throbbing pain which can last from four hours up to 72 hours.

The pain is often accompanied by an aversion to light or noise and it is believed that up to one third of people who suffer migraine headaches will recognize the onset of an attack because of altered visual, aural or olfactory perceptions immediately beforehand.

The widely accepted cause of migraines is that they come out as a result of some kind of imbalance in the serotonergic control system as scans have indicated that many migraine sufferers show significantly increased levels of blood flow to the brain just prior to the onset of an attack.

However, not all migraines seem to come on in exactly the same way with some people being genetically disposed to suffering migraines. On the opposite side, there are with no genetic propensity to migraine attacks who suffer because of malfunctions in the transport of potassium and calcium ions in the brain.

There also seems to be some connection with fluctuating hormone levels, indicated by the fact that in adults, 75% of people who suffer migraine headaches are women, whereas migraines affect similar numbers of prepubescent girls and boys. Furthermore, whilst some women suffer more migraine headaches during pregnancy, others find that their susceptibility to migraines disappears completely whilst they are pregnant.



As suggested, up to one third of migraine sufferers will find that their attack is preceded by a period where they sense, see or hear an 'aura' that will gradually come on over a period of 15 minutes or so, and last for less than one hour. Generally speaking, after the aura has disappeared, the migraine attack itself will begin within an hour of the disappearance, although it can be several hours before the attack happens.

For the majority of migraine sufferers who do not sense or see an aura, they will often experience other 'symptoms' such as heightened irritability, yawning, fatigue, euphoria or feeling blue as well as suffering stiff muscles, especially in the neck. Most sufferers have characteristic signs that almost always indicate the impending onset of a migraine attack which can follow anywhere from a few hours to a few days later.

Because these signs gradually become recognizable and clear over a period of time, a reasonably observant migraine sufferer (or family member of a sufferer) can predict with a degree of accuracy when they are about to have a migraine attack, meaning that they can try to do something about preventing the attack happening.

Whether such preventative action is going to be successful will depend on many factors but knowing when an attack is likely to happen does at least allow the sufferer to try to head it off.



Cluster headaches

Cluster headaches – so called because sufferers tend to have several headaches one after another in 'clusters' separated by periods of remission – are headaches of intense pain that can last from 15 minutes to up to 3 hours at a time.

Cluster headaches are most commonly unilateral (although some sufferers report having 'shifting' headaches that move from one part of the head to another with the onset of the next attack in the cluster) and the onset of the first attack is often very sudden and without warning.

They are far more commonly suffered by men than women and for the majority of sufferers, there is no warning that an attack is about to happen. However, some people do report a slight 'shadow' pain in the area where the attack is about to happen shortly beforehand.

What causes cluster headaches is currently unknown and due to the intensity of the pain, many sufferers mistake the first attack for something considerably more serious like the beginning of a brain tumor or multiple sclerosis until they seek treatment.

Sufferers of cluster headaches generally report that the pain associated with the condition is the worst pain that they have ever known with many women suffer is reporting that the pain is considerably worse than giving birth without anesthetic. Generally speaking, the pain is felt behind the eyes or in the temple, although it can stretch out into the muscles of the neck, with many sufferers describing the feeling as being akin to having a red hot poker stuck in their eye.

And, considering that some sufferers will have cluster headache attacks three or four times a day for weeks on end, it is hard to imagine how painful and debilitating condition could be (although this graphic might give you some idea!):





When the condition was first recognized and postulated by Dr. B. T. Horton in 1939, he suggested that suffering cluster headaches could drive any man to suicide, which is one of the reasons why they are also known as 'suicide headaches' as well.

Fortunately for the majority, it is believed that as few as 0.1% of the population are forced to suffer cluster headaches but for those who do, the pain is far worse than anything the rest of us (even the most severe migraine sufferers) are forced to endure.

Trigeminal neuralgia is a similar condition to cluster headaches, another form of headache where the pain is intense but in this particular example, it is more common for the pain to be felt around the cheek area rather than behind the eyes or in the temple.



Other primary headaches

There are a few other forms of headache that are categorized as being primary conditions because they are not caused by or associated with other medical conditions.

Hemicrania continua

Hemicrania continua is a persistent unilateral headache that is most commonly unremitting. According to the International Headache Society system of classification, for Hemicrania continua to be diagnosed, the sufferer has to have been blighted by their headache for a period of at least three months whilst demonstrating all of the following symptoms:

- There must be persistent unilateral pain which does not shift;
- The pain must be continuous and daily, without remission and
- The pain should usually be of moderate intensity, although there may be periods when the pain level increases markedly.

In addition to these three criteria and the requirement that the headache should have lasted for at least three months, your doctor would expect to see related eye or nose problems as well, such as crying or suffering from nasal congestion.

Very occasionally, there have been reports of occasional examples where remission does happen where Hemicrania is still diagnosed because in all other respects, the sufferers headache problem exactly matches all other requirements for Hemicrania continua.

New daily persistent headache

This is a condition which has only recently been recognized as a distinct type of primary headache by the International Headache Society, with the criteria for recognizing the condition being laid down in the second ICHD in 2004.

These first criteria for recognizing a <u>new daily persistent headache</u> is that it is a headache that the patient has been suffering from for at least three months, and that it satisfies the following requirements as well:



- The pain must be felt daily and must be unremitting;
- It must demonstrate at least of the four following characteristics;
 - 1. The pain must be bilateral;
 - 2. The feeling of the pain must be of pressing or tightening, not pulsing or throbbing;
 - 3. The pain must be mild to moderate and
 - 4. It should not be aggravated by normal daily physical activity such as walking or climbing the stairs;
- The headache should also demonstrate both of the following qualities as well;
 - The patient must not be suffering more than one of phonophobia (sensitivity to noise) or photophobia (light) or mild nausea and
 - 2. There should be no serious nausea or vomiting either.

Because this particular form of headache exhibits some of the characteristics of tension type headaches and some of the characteristics of migraine, it is a condition that is not particularly easy to diagnose.

Furthermore, because other far more serious conditions such as a spontaneous cerebrospinal leak can mimic some of the indicators of this particular form of headache, it is necessary for doctors to run many other tests such as an MRI scan to rule these more serious potential problems out before arriving at diagnosis.

In addition, many doctors might also consider taking a lumbar puncture sample as well to rule out an infection before finally arriving at a diagnosis of new daily persistent headache.



The medical responses to headaches

If you are amongst the fortunate majority who only suffer headaches every so often, you will probably have gathered by now that for those who are less fortunate that suffer headaches on a regular or persistent basis, seeking medical attention is often necessary.

Although irregular headache sufferers would probably never consider doing anything more than taking an over-the-counter painkiller to get rid of their headache, for those who suffer the worst ravages of primary headaches as highlighted over the previous few chapters, self-medicating with painkillers in this way is not always a viable option.

Consequently, I am going to consider and highlight many of the medical treatments that your doctor may prescribe if you are a persistent or regular headache sufferer whilst also pointing out some of the potential side-effects of those drugs that you should be aware of.



Medical treatments for tension type headaches

If you are a person who only suffers headaches every now and then, then you are more than likely an episodic tension type headache sufferer.

In this case, most sufferers are likely to turn to an over-the-counter analgesic painkiller to treat their condition. We will consider the various different forms of analgesics towards the end of this chapter, because you might be surprised at some of the potential side-effects of even these apparently benign drugs.

For chronic tension type headache sufferers, there are many different types of drugs prescribed which will be known by a wide variety of brand names. Some of the most commonly prescribed drugs are as follows:

Amitriptyline

This drug goes under a huge range of different brand names:

Amitriptyline (Elavil, Endep, Vanatrip, Adepress, Adepril, Amiline, Amitid, Amitone, Amitril, Apo-Amitriptyline, Damilan, Damilen, Dohme, Elanil, Elatrol, Eliwel, Emitrip, Enovil, Etafron, Flavyl, Hexathane, Horizon, Kamitrin, Lantron, Laroxil, Laroxyl, Latilin, Lentizol, Levate, Limbitrol, Novotriptyn, PMS-Levazine, Proheptadiene, Redomex, Saroten, Saroten, Sarotex, Seroten, Sharpe, SK-Amitriptyline, Sylvemid, Trepiline, Triavil, Triptanol, Triptilin, Triptisol, Triptyl, Tryptanol, Tryptizol, Tryptomer) is a tricyclic

And although it was originally used as an antidepressant, it is nowadays often prescribed for people who suffer chronic tension type headaches or migraine, albeit in relatively small doses.

Some of the less pleasant side-effects suffered by some users are weight gain, nausea, constipation, dizziness, dry mouth, blurred vision and insomnia. In more serious cases, the drug has been seen to cause hypotension, psychosis, arrhythmias, heart blockage and depression.

Mirtazapine

Mirtazapine (known as Remeron in the USA, Canada, Australia and South Africa but as Zispin or Zispin Soltab in the UK and Ireland) is a psychoactive drug that is primarily used as an antidepressant.

In addition to being used as an antidepressant, it has also been found to be effective in the treatment of migraine and chronic tension type headaches, although once again, it is a drug with a long list of potential



adverse side-effects attached to it.

The common side-effects include blurred vision, dizziness, sedation, increased appetite and accompanying weight gain, shallow breathing or hypoventilation, malaise, decrease body temperature, restless leg syndrome and many, many more.

More seriously, side effects may include convulsions or seizures, excessive water retention and edemas, nausea and vomiting, diarrhea, sexual dysfunction and depression or anxiety that can in the most serious cases border on suicidal behavior.

In addition, the drug has also caused mild to moderate psychedelic experiences and effects in some patients, although whether everyone would necessarily agree that this is an adverse side-effect is open to debate!

Sodium valproate

Some doctors may consider using sodium valproate as a prophylaxis, that is, a drug that is designed to prevent chronic tension type headaches rather than get rid of them.

The main use of sodium valproate is as an antiepileptic drug, with the main downside of this particular drug being that the chances of a baby being born with a birth defect to anyone taking this particular drug are somewhere between two and five times higher than they are with other antiepileptic drugs.

Furthermore, there is some evidence that children born to a mother who is taking a valproate drug have a significantly higher chance of suffering autism as well according to a study carried out in 2005 by the <u>Autism Association of America</u>.



Medicines for migraine

As suggested in the previous chapter, both of the main prescription drugs that your doctor is likely to prescribe for dealing with chronic tension type headaches are also often prescribed for combating the worst effects of migraine as well.

Some doctors may also consider prescribing sodium valproate as well as a prophylactic to prevent the onset of migraine headaches before they start.

There are however some different forms of treatments that might be prescribed to deal with migraine headaches, with the first line of attack generally being over-the-counter analgesics like aspirin, Tylenol and paracetamol (acetaminophen in North America). If the individual suffering from a migraine headache is fortunate enough for it to be only a mild attack, such analgesics will probably be strong enough to deal with the problem, although whether you want to take analgesics is another matter entirely (for reasons highlighted later).

Sometimes these analgesics will be taken or rendered entirely on their own whereas at other times, it might be prescribed or taken in combination with other substances such as caffeine. Whilst migraine sufferers are generally advised to limit their caffeine intake, it does seem that combining analgesics with caffeine enhances the effectiveness of the drug (and caffeine is itself recognized as an overthe-counter drug by the FDA).

As suggested earlier, migraine headaches are often accompanied by nausea and/or vomiting, so it is not uncommon for the analgesics rendered to be combined with antiemetic drugs as well.

For migraines that do not respond to over-the-counter drugs or other analgesics, your doctor may prescribe a <u>serotonin specific reuptake</u> <u>inhibitors</u> (SSRI) which are effective for getting rid of mild-to-moderate migraine headaches that do not respond to analgesics or other first-line drug defences.

Although SSRIs are not approved by the FDA for the treatment of migraine headaches, tests and trials have indicated that they can help in certain circumstances.



Technically speaking, the primary usage of SSRIs is as an antidepressant drug and once again, there is a long list of potential adverse side-effects which you might suffer if you choose to take one of these drugs to deal with your migraine problem.

These side-effects include apathy, nausea and vomiting, drowsiness, dizziness, changes in appetite and sleep patterns, tremors and weight loss or weight gain.

Most of these side-effects are felt soon after starting to take the drugs as your body gets used to them and many of them will pass.

However, it is also known for SSRIs to cause far more serious sideeffects, with some patients reporting sexual problems and cardiovascular side-effects. Furthermore, because they are antidepressant drugs, SSRIs can create a degree of dependency in any patient who takes them for anything other than the shortest period of time.

Other forms of treatment that might be used as a way of dealing with migraine headaches include ergot alkaloids which though effective for aborting migraine headaches once they have started come with their own attendant panoply of potential side-effects.

For example, ergotism is a condition where the cumulative effects of taking ergot alkaloid-based medicines or drugs builds up over time and gradually poisons your body.

A proprietary drug like <u>Cafergot</u> probably works because both caffeine and ergot work as vasoconstrictors meaning that they narrow the blood vessels which helps to regulate the blood supply. This in turn should help reduce the severity of the migraine attack.

However, drugs like Cafergot are not all that easy to obtain in the USA or the UK and they do have potential side-effects such as causing numbness in your toes and fingers, angina pectoris, blurred vision and dizziness. These are all potential side-effects which are caused by the general vasoconstriction which happens all over your body, not just in your brain.

In addition to all of these drugs that your doctor may prescribe for you to help you get rid of your migraine headache, they may also suggest a



wide range of drugs which you would take to prevent the initial onset of migraine before you suffered the attack.

There are many drugs that might be offered such as beta-blockers, anticonvulsants and antidepressants. All of these drugs will have potential adverse side-effects attached to them depending upon the particular drug being prescribed.

Over the counter analgesics and their side effects

Perhaps you might think that because they are openly sold in pharmacies and drug stores with government approval that all over-the-counter analgesics must be safe, but this is an assumption that you should not allow yourself to make. Despite the fact that drugs sold in most western countries have to be government approved, the fact that they are should never be taken as proving that they are completely safe because even the most common or garden analgesics and do have potential side-effects.

For example, although it has been on open sale for more than 100 years, the humble aspirin does have acknowledged adverse side-effects in some people including stomach ulcers and gastrointestinal bleeding. Large doses of salicylate (which is a metabolite of aspirin) have been shown to cause tinnitus in rats, and it is not at all uncommon for people who take aspirin reasonably regularly to develop swelling and hives.

In a worst case scenario, it is also known that aspirin can cause a little-known condition known as <u>Reyes Syndrome</u> in children, which can cause serious damage to the brain and liver and might ultimately prove fatal.

If you are taking paracetamol (acetaminophen), there is a long list of possible side effects attached to the drug even though it is highly effective as a painkiller, especially when paired with other painkillers such as codeine as it often is in over-the-counter medicines.

Nevertheless, taken in large doses, paracetamol can cause liver failure and ultimately death – it is the number-one cause of acute liver failure in both the USA and the UK – but even at regular dosage levels, the same results can occur in some unfortunate people.

Furthermore, excessive use of paracetamol might cause serious damage



to other internal organs, whilst some studies have indicated that the drug can cause internal bleeding in even relatively small dosages too.

The bottom line is, even apparently safe and benign over-the-counter analgesics are not necessarily as safe as you might imagine them to be with plenty of nasty potential side-effects.

As suggested, this might give you cause to re-consider whether using chemical-based analgesics is such a good idea after all.



Taking the first steps...

By now, you have probably arrived at the same conclusion that I came to a long time ago, that dealing with headache problems – no matter how severe the pain is – in an entirely natural manner if at all possible has got to make a great deal of sense.

But the first thing you must do is establish exactly what it is that causes your headache problem in the first place. If you can establish what the root cause of your problem is, then headaches naturally become less of a problem because if you know what the trigger is, you can minimize the frequency with which the trigger event happens or remove it from your life altogether.

No doubt, some people can easily identify what it is that is causing them to suffer headaches but this does not apply to everyone. In fact, because almost anything you can think of could be a potential headache trigger, it can be extremely difficult to isolate exactly what it is that is setting off your attacks.

Hence, if you find yourself in a situation where you suffer headaches but don't really know why, you need to start keeping a journal or diary so that over time, you can build up a clear picture of what it is that causes your problems.

Rate the headaches that you suffer on a scale of 1 to 5 or something of this nature, with a 1 representing an ordinary, pain-free day up to a 5 where the pain is severe. Quite obviously, you want to focus more of your efforts on tracking down what causes you the most painful headaches and keeping a record in this way is one very effective way of help you to do so.

Either from the information that you have read of earlier in this book or from previous consultations with your medical attendant, you should have some idea of the kind of headaches that you are suffering, with the most likely possibility being that you suffer tension type headaches.

You have seen some of the most common causes of tension type headaches earlier in this book, so you should make a note of any occurrences that fall into any of those categories. For example, if you are faced with a stressful, high-pressure situation and your headache



seems to come on fairly soon afterwards, you have a very clear indication of what your problem is.

However, there really is no limit to the range of events and situations that can cause headaches, with food being one particularly obvious example. For some people, there are just certain foodstuffs that do not really agree with them, and one of the ways this 'lack of agreement' can be exhibited is through headaches.

Hence, write down what you eat at each and every meal time so you have an exact record of what you consumed just before the onset of your headache.

As mentioned previously, although many people will develop a headache within a matter of minutes or hours of a 'trigger' event or situation, this is not the case for everybody.

In fact, some people will not develop a headache for a few days after a trigger event, although under normal circumstances, a headache will start to develop 3 to 12 hours after eating the wrong kind of food for example. Nevertheless, you may need to go right back over several days in your diary before you start to see a pattern emerging.

This is however exactly what you are looking for, a pattern of something happening after which you seem to develop headaches on a regular basis.

As I suggested earlier, once you can identify what it is that triggers your headache attacks, you can start doing something about it by removing that trigger from your life.

For instance, if you manage to narrow it down to a particular food stuff, then avoid eating that particular food from here on in, or if there is some especially stressful event which seems to trigger your problem, see whether you can avoid that particular event as well.

Of course, it is not always going to be a viable or feasible to avoid everything completely. For example, if you're headaches seem to be triggered by tensions at work, there is not much you can do to get away from those stressful situations completely unless you change your job (which may of course be an option worth considering if the problem gets too bad).



Nevertheless, even in this scenario, knowing the root cause of your problem is half the battle because armed with this knowledge, you can begin to do something about it. For instance, continuing with the previous example, if you establish that the primary cause of your headaches is stress in the office, you should consider taking up something which is going to help you learn to relax more.

Some people might choose to take up gardening or painting, whereas for other people, listening to music or reading a book might help them calm down.

Consider learning how to <u>breathe slowly and deeply</u> at those times when you're stress threatens to get on top of you, and you can perhaps consider combining deep breathing exercises with <u>yoga</u> and/or <u>meditation</u>.

If you're not in a position to expunge whatever it is that is triggering your headaches from your life, you need to teach yourself to deal with those triggers more effectively but you cannot do so until you know what they are.

As a general rule, applying moderation to your alcohol and caffeine intake is something that many headache sufferers find to be effective for reducing the severity of their problem whilst consistent sleep habits and eating regular meals can also be very helpful too.

Other fairly common tension type headache or migraine triggers are as follows:

- Allergic reactions. This can be a reaction to food or drink, or it may be something like a hay-fever style reaction to pollen;
- Loud noise, bright lights and certain smells or odors;
- Smoking or exposure to other people's smoke.

So, the first thing to do is keep a journal so that you can identify the cause of your headaches before removing that cause from your daily life if possible.

However, there is no guarantee that this is going to work because some people, it is not going to be possible to isolate one single cause of the headache problem in this way. If this is the case, you may have to look



for alternative answers.



Is gluten your problem?

Gluten is a protein that is found in many grain staple foodstuffs such as rye, barley and wheat. Consequently, gluten is a constituent part of bread and many other similar products, although it is not present in all grain foodstuffs, as corn, buckwheat and oats are gluten free.

Some people suffer a condition known as celiac disease or syndrome, a condition that is often known as a gluten intolerance meaning that their body cannot process gluten properly.

Over the years, <u>many studies</u> have indicated that celiac disease is a condition that many migraine patients suffer from, so there is a clear link between people who suffer regular migraine headaches and the presence of gluten in their diet. Consequently, if persistent migraine headaches are your problem, it may be that you are gluten intolerant and that cutting foodstuffs that contain gluten from your diet may be the solution to your problem.

It is believed that the problem for celiac disease sufferers is that they're gluten intolerance causes inflammation of the central nervous system as indicated by <u>studies</u> carried out using MRI scans on patients who suffer from this particular condition. Of these individuals, many suffer migraine and other forms of headaches, presumably as a result of this inflammation and once these people switch to a gluten free diet, the information abated and their problems ceased.

<u>Another study</u> has indicated that migraine sufferers are 10 times more likely to suffer from celiac disease as well, so the connection between gluten intolerance and headaches is clear.

Furthermore, in the same study, it was demonstrated that adopting a gluten free diet improved blood flow to the brain of the patients in question, which either removed migraine problems completely or lessened the severity and longevity of their migraine attacks.

All of the evidence clearly points to the fact that adopting a gluten free diet is often highly effective for anyone who suffers regular headaches to lessen the severity or even get rid of their problem completely. This is particularly true of migraine sufferers, although if you are a chronic sufferer of any kind of headache, you might want to consider adopting a



gluten free diet, because the chances are very good that doing so will help you.



Behavioral changes to reduce headaches

As suggested previously, if you can identify the triggers that cause your headache attacks, it becomes a relatively simple matter to change or remove those triggers from your life to reduce the severity of your problem.

However, there are other lifestyle changes that you can make which some doctors believe will reduce the frequency and severity of headaches that many chronic headache sufferers have to contend with.

Hence, if you are having difficulty pinning down a specific reason why you suffer chronic headaches or migraine, you might consider making some of these changes to see whether they are effective for you.

One such change that many physicians believe will help to reduce the frequency and severity of headaches and migraines is taking 20 or 30 minutes of regular aerobic exercise every day. To a degree, this makes a great deal of sense because taking regular exercise achieves many objectives which, whilst they may not remove or reduce headaches directly will nevertheless have many benefits, amongst which may be the reduction of tension type or migraine headaches.

For example, if you suffer a tension type headache because of stress, one of the best ways of working stress out is by running or cycling. Similarly, many people suffer tension type headaches as a result of anger or frustration, and once again, exercise is a great way of working these feelings out.

The concept of exercise as a way of reducing the severity and frequency of headaches makes a great deal of sense on many levels and if you do suffer, it would definitely be worth starting a program of regular exercise to see whether this helps reduce the problem.

Another change that often helps people to overcome headaches is to take more sleep and to do so more regular times. For most people in the modern world, getting enough sleep is never easy but it is a fact that one of the direct results of a lack of sleep is a headache.

Whether your problem is chronic tension type headaches or migraines, it is often true that sleeping the problem off is a highly effective way of



dealing with it, assuming that the pain is not so bad that it prevents you from going to sleep in the first place.

As suggested earlier, diet is a very important consideration when it comes to getting rid of headache problem as well. Common migraine and headache triggers foods include those that contain tyramine like red wine, smoked fish, aged cheese and figs, whilst other foods such as chocolate, nuts, peanut butter, bananas and dairy produce are also known to cause headache and migraine problem. Consequently, you should be particularly cautious with foods of this nature if headaches or migraine are a problem.

Other experts suggest that <u>aspartame might trigger headaches</u> and/or migraines in some people, although this has not as yet been conclusively proven.

However, in a placebo-based test, it was established that people who were given monosodium glutamate were far more likely to develop headaches and migraines than people given a placebo, hence there is little doubt that MSG can be a cause of chronic headaches and migraines.

Another change that can help chronic tension type headache or migraine sufferers is to break the cycle of the problem. In many cases, when people are a chronic headache or migraine sufferer, the cycle of the condition follows a particular predictable path and breaking the path or cycle can be effective for reducing the severity of future attacks.

As suggested when looking at the situation where your headaches are caused by stress earlier, breaking the cycle involves making a conscious mental effort to step back from the situation when you feel your headache coming on.

To do this, having the ability to relax totally whilst breathing deeply will certainly help, as will the ability to practice visualization or <u>auto</u> hypnosis.

In both of these situations, you use your mind to control the way that your body is reacting, effectively telling yourself that the pain is nowhere near as bad as you initially believed it to be.

Some people doubt whether visualization or auto hypnosis can be



effective but the fact is, both practices can be learned and mastered and they are both very effective for reducing the severity of the pain that you consciously feel.

Think of it this way.

Have you ever noticed that once you have taken an analgesic painkiller, you often feel better almost instantly despite the fact that the drugs in the painkiller have not had anywhere near enough time to work? This is a classic example of your subconscious mind controlling the conscious by convincing it that the pain is going away despite the fact that the drug in question is not in fact effective yet.

How can you avoid the weather?

The simple and most obvious answer to this question is, you cannot avoid the weather, which is unfortunate because there is some evidence that the weather can cause of headaches and migraines.

One study of regular migraine sufferers established that 62% of subjects who were questioned believed that the weather had an effect on their condition, although only 51% of the subjects tested appear to be sensitive to weather changes.

Nevertheless, it does appear to be true that changes in the weather can trigger tension type headaches and migraines, with the likelihood of this happening being increased by the following changes (listed in descending order of importance):

- High or low temperatures combined with high humidity appears to be the combination of weather conditions most likely to bring on a headache or migraine;
- Sudden major weather changes;
- A sudden drop or increase in barometric pressure.

A further study established that when migraine sufferers were subjected to a strong chinook wind, they became more likely to get a migraine, possibly because of the increased number of positively charged irons in the air.

Of course, if you are a headache or migraine sufferer, it is almost impossible to avoid the adverse effects of the weather completely.



However, on those days when weather conditions make it likely that you will suffer an attack, it might make sense to stay indoors, especially if you can take refuge in an air-conditioned environment so that the weather has less effect.

Be careful how you wash your hair!

A study of 94 subjects in India established that for some people who suffered migraine attacks, washing their hair whilst in the bath induced an attack!

Furthermore, the same study also established that the way people chose to dry their hair after washing it seemed to induce migraine attacks in certain individuals as well. This seems to indicate that even something as simple and basic as washing your hair might act as a migraine or headache 'trigger' in some people, so even if this is something that you would never have thought of as a potential trigger, you should do.



Hypnotherapy as a headache cure

Another interesting idea is to consult a professionally qualified hypnotherapist to seek their assistance in getting rid of or reducing the severity of your headache problem because if you find that auto hypnosis is difficult, using the services of a qualified professional may be more effective for you.

The idea of hypnosis as a treatment for any medical condition like chronic headaches and migraine is that a hypnotherapist will shift your focus away from the pain and suffering on a conscious level to your subconscious level where such pain does not exist. Consequently, using the services of a hypnotherapist will allow you to 'forget' about the pain that you are suffering which in turn enable you to focus on far more positive aspects of your life.

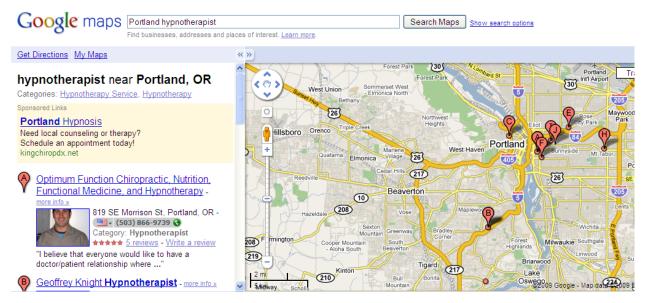
This works because one of the problems that might accompany a headache is that if the pain is moderate to severe, it is hard to focus on or think about anything else other than the pain. This in turn exacerbates the pain by making you more aggravated and tense.

Hence, if you work with a hypnotherapist who can help you to shift your focus away from the pain, it is almost certain that they will be able to help you reduce the severity of your headache problem very quickly. And once they have done so and you have learned how easy (and comfortable) it is to be hypnotized, it should become considerably easier for you to adopt a similar technique so that you can deal with your headache problem by <u>auto hypnotism</u>.

Even so, most headache sufferers are likely to find that the first time they attempt to deal with the problem using hypnotism, it is easier to do so by working with a professional hypnotherapist.

Finding someone who can help you in this way is not difficult because all you need to do is search <u>Google maps</u> for a hypnotherapist in your local area. For example, if I was looking for a hypnotherapist in Portland, Oregon, the result of my search would like this:





As you can see from the screenshot, Google maps includes contact information as well as an indication of where each of the hypnotherapists in Portland are located, which obviously makes establishing your first contact with someone who can help you extremely easy.

Furthermore, a standard Google search for 'online hypnotherapy' will throw up many sites where professional hypnotherapy advice and services are available online, so this is another option that you might like to consider:





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Acupuncture or acupressure

Another option that many people use to combat chronic headache or migraine problems is acupuncture or the closely related acupressure, both of which can be used very effectively to deal with problems of this nature.

Acupuncture is an ancient Chinese form of alternative medicine which involves the insertion of needles into the body at various different points as a way of relieving pain or dealing with certain medical problems. The basis of acupuncture is that according to the original Chinese concept, there are various meridians or channels throughout the body along which your 'qi' or vital energy flows, and sometimes these meridians become blocked.

Hence, by inserting needles into the various different acupuncture points, these blockages can be removed and as a consequence, your vital energy is rebalanced or restored to its proper state:





Modern Western medicine has a slightly ambivalent relationship with acupuncture because whilst there is no basis in modern biomedical beliefs for the concept of meridians and vital energy, nevertheless, acupuncture is generally accepted in the West as a viable method of treating many different conditions including headaches and migraine.

In fact, many Western doctors now accept acupuncture as a valuable way of dealing with many medical conditions, so much so that many include acupuncture in their recommended treatment regimes.

Perhaps as a consequence of this wider acceptance of acupuncture, it is relatively easy to find licensed practitioners in almost every city in the West. If therefore you are a chronic headache sufferer, it might be worth trying to use Google maps to find a local acupuncture specialist.

In acupuncture, head problems including headaches are generally dealt



with by inserting needles to stimulate what are known as the hé gu points, which requires the insertion of needles into the webbing between your thumb and the palm of your hand. These particular points are considered to be the most important when it comes to dealing with problems related to the head and face.

For this particular headache treatment to take place, the patient should recline in comfort before the acupuncturist sterilizes the area where the needles are to be inserted. After this, he or she will puncture the skin to a depth of 3 to 5 mm until the patient feels a characteristic 'twinge' that is associated with 'hitting the blockage'.

The needles are then left in place for 15 to 20 minutes, during which most patients report a pleasant tingling and a feeling of extreme relaxation, as well as a marked diminution in the pain that they are feeling in the head.

One common misconception about acupuncture (and one that would perhaps put many people off) is the idea that having acupuncture needles inserted into your body is painful. In truth however, because the needles that are used for acupuncture are many times finer than those used with hypodermic syringes (remember, the acupuncture needle does not need to have a hollow centre to inject medicine), having needles inserted is almost completely painless and certainly nothing when compared to the pain of your headaches!

Nevertheless, even though the insertion of acupuncture needles is generally painless and if anything pleasant, it is a fact that some people still have a phobia of needles.

If so, even this should not necessarily prevent you taking advantage of acupuncture because it is increasingly common nowadays for acupuncturists to use <u>electro-acupuncture</u>, where electrical probes are attached to the skin to send a pulse of electrical energy to 'unblock the meridian', rather than inserting needles.

Undoubtedly, some people will find this form of treatment far more pleasant and less scary than traditional acupuncture, so you might want to try to find someone who can practice electro-acupuncture rather than the more traditional needle-based form if acupuncture appeals to you but needles don't.



Another option to consider is <u>acupressure</u>, where pressure is applied to various points on the body using the hands, fingers or even the elbows to do a very similar thing as you are doing when practicing acupuncture. The pressure is applied to the same acupoints as would be the needles or electric probes in acupuncture to achieve the same results, unblocking the meridians to allow the vital energy flow to be restored as a way of reducing your headache pain.

One great thing about using acupressure is that, once you are aware of the presence and importance of the hé gǔ points as far as traditional Chinese medicine is concerned, it is very easy for you to manipulate this particular area of the body yourself.

If you have ever massaged the webbed area between your thumb and the palm of your hand whilst you are suffering a headache, you may have noticed that it does seem to help to reduce the pain. Now you understand why this should be so and why massaging this particular area of your hand might be a big help the next time you suffer a chronic tension type headache or migraine.

Most people who suffer from chronic tension type headaches also find that massaging their own temples, the sockets next to their eyes and the back of their neck helps to relieve their headache as well, which gives you a clue to another effective way of dealing with or minimizing the adverse effects of headaches naturally.



Massage therapy for headaches...

Another highly effective way of dealing with and getting rid of headaches is by subjecting yourself to <u>massage therapy</u>, the gentle kneading and manipulation of your soft bodily tissue in an effort to induce extreme relaxation which in turn helps to reduce pain in many bodily areas.

There are literally dozens of different forms of massage therapy that you can enjoy and in the USA alone, there are reported to be in excess of 90,000 trained massage therapists, so finding someone to give you a soothing, pain relieving massage should not be all that difficult.

Many studies over the years have reported that massage is extremely effective for <u>dealing with various different types of pain</u> whilst at the same time, it is generally accepted that one of the best ways of reducing stress and tension is to enjoy a relaxing massage.

Consequently, if you're chronic tension type headache or migraine problem can be traced wholly or partly to stressful living, it might make a good deal of sense to incorporate a regular massage in your daily or weekly routine.

Some massage systems incorporate or include aromatherapy in the program, and it has been indicated that aromatherapy and massage in combination can help to stimulate your immune system as well.

Strengthening your immune system in this way could also help to lower the risk of suffering chronic tension type headaches or migraines, so including aromatherapy in combination with massage in your bid to overcome your problem is very well worth considering.



Other natural solutions for headaches

One thing that you should understand about defeating a persistent or chronic headache problem is that what works best for any individual is an entirely individual thing.

In other words, every natural headache solution or cure or that you read of in his book is worth trying because every one of the proposed solutions may be exactly the thing that you're looking for.

Unfortunately however, the opposite is also true, which is exactly the reason why you should try many different solutions until you find something that works for you.

The same proviso applies to all of the various different solutions that you are going to read of in this chapter of the report as well. All of the following have been reported as being effective for dealing with chronic headache or migraine problems by some sufferers but you should not assume that the first solution that you try is going to work for you.

Many headache sufferers find that it is a question of trial and error, using many different solutions until they find something that works for them. Consequently, it may be necessary to be a little patient when trying these proposed headache 'cures' but the fact is, they have all been reported as effective by different people.

There are plenty of herbal and nutritional solutions as well as traditional cures that are recommended for those who suffer from chronic headaches or migraines to try. I would therefore suggest that you give some or all of the following a go until you find something that works for you.

<u>Peppermint oil</u> is generally believed to be very effective for reducing the pain caused by headaches and migraine, to the extent that some doctors in Europe will prescribe peppermint oil capsules instead of analgesics for headache sufferers. In small doses, peppermint oil taken internally is completely harmless and has no adverse side effects for the average healthy adult whilst it can also be used by applying the oil to the temple or scalp in or around the area where the headache pain is most acute.



Combine peppermint and wintergreen oils in equal measures and apply the salve to your temples and the side of your head. You can also apply a small amount beneath your nose when congested nasal passages is a problem that might be causing a headache, although you should be careful to avoid getting it in your mouth or eyes.

Alternatively, make a cold compress by soaking a cloth in ice cold water or by placing a damp cloth in the deep freeze for 10 minutes. Once the compress is ready, apply a couple of drops of peppermint oil to it and then apply this to the painful area for 15 minutes to reduce the pain levels significantly.

If you are suffering from a tension type headache brought on by stress or pressure, try applying an ice pack to the muscles of your neck and upper back. If you do this at the same time as bathing your feet in warm water, the pain relieving effect is often enhanced still further.

If applying an ice pack in this way does not relieve the pain of your headache, reverse the situation by applying a hot cloth or hot water bottle to the muscles in your neck and upper back. Again, this may work more effectively if you bathe your feet in warm water at the same time.

Even a hot foot bath on its own can help to reduce the pain of a headache as bathing your feet in hot water diverts your blood to that area of the body, reducing the pressure in your head that may be causing you pain.

In this case, add water that is around 95°F to your footbath and then add additional hot water to gradually increase the temperature to around 115° to 120°. Let your feet soak for 10 or 15 minutes before adding cold water to take the temperature back down to lukewarm before drying your feet and keeping them warm, wearing socks if necessary.

In terms of herbal remedies that are effective for dealing with headaches, one that is often put forward is butterbur (<u>Petasites hybridus</u>).

In a controlled test, 50 mg or 75 mg a day of butterbur was shown to induce a 56% reduction in the number of migraines suffered in those who were given the smaller dose, whereas those taking the larger

41





dose enjoyed a reduction of 68%. These results were compared to the placebo group who showed a reduction over the same period of 49%.

However, it is important to be careful if you are considering using butterbur to deal with headaches or migraine problems because in its native, natural state, it is believed that butterbur does contain some carcinogenic elements. On the other hand, the purified commercially produced version of butterbur Petadolex is safe and also relatively cheap too (search the net by brand name to find many cheap 'deals').

Another herbal remedy that is thought to be of benefit for reducing the frequency and severity of headaches and migraines is feverfew (Tanacetum parthenium), which is a traditional herbal remedy used to treat many different conditions.

Although over the years, its effectiveness for dealing with headaches and migraines has been questioned as being inconclusive, more recent studies suggest that a 6.25 mg dosage of feverfew every day will help to both prevent migraine attacks happening and reduce their severity when they do.

In an <u>open label trial</u> carried out several years ago, it was also established that supplementing your diet with coenzyme Q10 could prove a significant step towards preventing migraines, as the trial established that patients who were treated with 100mg a day saw the number of days on which they suffered migraines fall significantly.

Moreover, less than 1% of the study subjects reported any kind of side effects whilst a <u>further placebo controlled trial</u> a couple of years later reported very similar results.

There are a couple of the vitamin B 'family' of vitamins that are also reported to have beneficial effects for chronic headache or migraine sufferers.

The first of these is vitamin B2 (Riboflavin) which was shown to reduce the number of migraines suffered by regular sufferers in a placebocontrolled trail when taken in high dosages (400mg a day), whereas there is some tentative evidence that vitamin B12 can also to prevent migraines and headaches.

In a trial where migraine sufferers were given a form of vitamin B12,



1mg a day taken daily for three months was shown to reduce the frequency of migraine attacks in 10 out of 19 test subjects by more than 50%, suggesting that supplementing your diet with vitamin B12 could help to reduce the likelihood of suffering migraine attacks in the future.

Another substance that has been indicated as having some effectiveness as a migraine and chronic headache attack preventative is melatonin, a naturally occurring hormone found in many animals and plants such as algae. There are many websites where you can buy melatonin capsules on the net which can easily be found by running a search for 'buy melatonin' or something of this nature.

The final substance that is believed to have the ability to reduce the frequency and severity of migraine headache attacks is magnesium citrate, as in a placebo-controlled test, those who were supplementing their diet with magnesium citrate were seen to have a significantly lower number of migraine attacks than those in the placebo group.

Those test subjects who were taking 600mg a day of trimagnesium dicitrate reported over 40% less migraine attacks in weeks 9-12 of the test period, whereas those in the placebo group only saw the attack rate fall by 15.8%.

As you will have gathered by now, there are many herbal remedies and nutritional supplements that you can take to either prevent headaches and migraines or to reduce their longevity and severity when an attack strikes. In addition, there are also traditional natural remedies that you can use which are in many cases surprisingly effective as well.

And here's the final reason why you should try these natural solutions before resorting to drugs and analgesics.

For many headache and migraine sufferers, using analgesics will actually make the condition worse, as taking painkillers actually lengthens the period during which they suffer their headache or migraine. On the other hand, if these people take no painkillers or analgesics, then the period for which they have a headache or migraine is shortened.

In effect, bizarre as it may sound, taking analgesic painkillers can often



make your headache worse, which must be one of the best reasons for not doing so.



Conclusion

As you have read in this report, there are lots of different ways that you can deal with headaches and migraine attacks completely naturally and as always, it makes a great deal of sense to use natural treatment methods before turning to potentially harmful chemical-based drugs.

As suggested, even for those episodic tension type headache sufferers who are fortunate enough to only suffer a headache every now and then, analgesic painkillers can carry significant risks, particularly for the young and the old. On the other hand, all of the natural remedies recommended in this report have no such potential adverse side-effects attached to them.

In short, if there is no other reason for doing so, it is always a given that using a natural remedy for any medical condition or problem is a far safer option than using even readily available over-the-counter analgesic drugs.

And of course, all of the natural headache treatments that you have read of in this report will work, although as previously mentioned, they will not all work for everyone. For any headache or migraine sufferer who is looking for a natural remedy for the condition, it is therefore a question of trying as many different solutions as necessary until you find something that is effective for you.

Nevertheless, the bottom line is, there is no need to suffer the pain and misery of headaches any longer, nor is there any reason why you should turn to analgesic painkillers the next time a headache or a migraine strikes.

By taking appropriate preventative steps and by using natural remedies if you are unfortunate enough to suffer a headache or migraine, you can deal with the whole problem entirely naturally, without the attendant risk of side-effects, which always makes sense.