

Is a Daily Headache the Same as a Migraine?

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Migraines and Persistent Headaches: Partners in Pain

When you have migraines, you become keenly aware of the pattern your headaches take and all of the triggers that cause them. You know when one is coming on, how long they last, and that post-migraine exhaustion you are left with the day following its departure.

But what if you suddenly get a headache that not only lacks a trigger, but does not go away...ever?

Migraine vs. Persistent Headaches

The argument between the classic migraine vs headache is all too common, so let me explain further about the differences of migraines and persistent headaches.

Migraines typically last about one to three days for most sufferers, but there are accompanying headache conditions you should be aware of if you find yourself with a headache that is lasting beyond several days. You may be wondering if it is one of the different types of migraines, and it in fact may not be.

A persistent headache every day, never going away, should raise numerous concerns. Your doctor will probably first rule out serious conditions, because there are other causes of sudden, persistent headache.

Your doctor may order imaging tests like an MRI or a CT scan to rule out conditions that may need immediate treatment. These include:

- **Meningitis:** an infection that swells the membrane covering the brain and/or spinal cord.
- Head injury: a blow to the head can cause sudden, severe, and persistent headache as well as internal bleeding.
- **Blood clots:** cerebral venous sinus thrombosis is when blood clots form near the brain, which will cause chronic head pain and is a very dangerous condition.

Once those are ruled out, your doctor should be looking for something called "new daily persistent headache," or NDPH.

A significant proportion of NDPH sufferers have "intractable" headaches, which is basically a headache that just won't go away, no matter what you and your doctor do. This known as a headache that is resistant to treatment.

Is NDPH a Migraine?

The short answer is no. The condition is best viewed as a syndrome rather than a diagnosis.

The headache can mimic chronic migraine, but regardless of the cause, it is a relentless, seemingly untreatable

headache.

Researchers do not yet have a solid understanding of what changes take place in the brain and pain receptors of someone with this condition. It is believed that pain signals are processed differently within the brain of NDPH sufferers.

What Can Be Done?

If you have found yourself with a new migraine-like headache, but this time it is not going away, you are probably desperate for answers. Your doctor or specialist will probably look at your overall diagnosis and reconsider what this headache really is.

In other words, if it never goes away it probably is not migraine. Typically, doctors divide headaches into two catchall categories:

- **Primary headaches:** headaches that are *not* due to another cause like a brain tumor or an infection, blood circulation issues, or another medical condition. NDPH or intractable headaches occur for no known cause and are considered primary headaches.
- Secondary headaches: those that *are* due to some underlying condition, diagnosed with imaging testing and labs.

The most common primary headaches are migraine and tension headaches. But other primary headaches, like NDPH, can mimic migraine or tension headaches — so those with migraine may receive the wrong diagnosis or treatment if they develop NDPH.

You may need to be your own advocate to pursuit diagnosis and treatment.

What Does NDPH Pain Feel Like Versus Migraine?

The pain is different depending on the patient and the day — sufferers have described it as extremely variable throughout the month.

It happens suddenly and without warning for most sufferers. Some describe it as mostly a throbbing pain, while others say it is more of a constant dull, aching pain.

Most sufferers of NDPH have bilateral head pain, meaning it affects both sides of the head, while many with migraine experience pain only on one side of their head.

The primary difference between the two conditions is that migraines subside after a few days, while NDPH does not.

How Do Specialists Treat NDPH?

Once your doctor is sure they have the right diagnosis, they should work with you to develop a treatment plan to address the pain as much as possible. But results are not very impressive in most patients:

- Usually there will not be a cure. Goals are set to decrease the severity of the headaches. If the expectation is to totally eradicate the headache you will probably be disappointed.
- It could take years before you find anything that breaks the cycle and eases the pain adequately. It is not common that taking a new medication solves the problem.
- In some people the pain is continuous, occurring 24 hours a day, seven days a week for at least three months and often longer even years. The headache may wax or wane and the pain severity is often moderate rather than severe. Though for some people it can periodically increase to the point that they must go to the ER for IV pain medication.

So, what can you do to keep going with migraines and NDPH?

- Take any migraine medication as you would if you did not have both types of headaches. But watch out for using too much medication overuse can cause worsening of symptoms in a rebound reaction.
- Identify lifestyle changes that help and introduce new therapies to regain control over triggers. Some sufferers find yoga beneficial, while others experience worsening symptoms with activity. Find what helps you cope.
- Wear sunglasses to ease photosensitivity.
- Get yourself a great doctor. If your doctor has never heard of this type of headache, get a different one.

Often diagnosis is not simple, though one would think it should be. First, seek a highly qualified headache specialist to begin diagnosis and treatments therapies.

Other helpful practitioners include a good nutritionist for specialized diet plans, and regular chiropractic care can also help ease the intensity of pain some of the time.

The primary thing you will need is the support and help of your loved ones to take over some household chores when needed and help you get the proper medical care you need quickly.