

Headache: Migraine or Sinus?

Headaches don't have to be a way of life. Learn more about migraines and why they're often mistaken for sinus headaches.

By Lila Havens, Staff Writer



Millions of people who suffer from headache pain say they wouldn't wish it on their worst enemy. Headaches *are* miserable. They come in all shapes and sizes - as persistent throbbing, a sharp stabbing pain, a dull ache, or a feeling of pressure.

Sometimes, confusing symptoms can make it hard to tell one type of headache from another. Because they have facial pain, many people think they have a sinus headache when in fact it's a migraine. So, they may take too many over-the-counter pain medicines, which can lead to rebound headaches.

Learn more about migraines and sinus pain, and talk to your doctor if you have frequent or severe headaches. With proper treatment, headaches don't have to be a way of life.

Migraine headaches

Migraines are the most common type of vascular headache. Experts believe they occur because of blood flow changes in the brain. Migraines can last from a few hours to 3 or 4 days.

Typical migraine symptoms include:

- Pounding or throbbing pain, usually on one side of the head
- Nausea or vomiting
- Sensitivity to light and/or sound

There are two main types of migraines: classic and common.

- **Classic migraines** cause an aura, neurological changes that occur about 10 to 30 minutes before the headache starts. The most common are visual changes, such as seeing zigzag lines or spots. Other symptoms may include such things as tingling of the hands or face.
- **Common migraines** don't have an aura. This can make them harder to diagnose and more likely to be mistaken for another type of headache.

Migraines can be triggered by any number of factors. These may include stress, lack of sleep, flashing lights, weather changes, and some foods such as red wine, chocolate, and aged cheese. Many women have "menstrual migraines" they get around the time of their periods. Some get migraines from taking birth control pills or estrogen.

A doctor will diagnose migraines by asking about the symptoms and the pattern of headaches. Keeping a headache diary can help identify the activities or exposures that may trigger the headaches. Tests may be done to rule out other possible causes.

Nonsteroidal anti-inflammatory drugs such as naproxen and ibuprofen may work for mild migraines. For more severe headaches, a doctor can prescribe stronger medicines that can stop migraine pain and some medicines can even be used to prevent them.

Sinus headaches

Sinus headaches can come from allergies or a sinus infection after a cold or the flu. Sinus headaches are caused by inflammation of the sinus passages, the air cavities in the bones around your eye and nose.

When the sinuses become clogged or infected, the added pressure makes your head hurt. The pain is usually severe and ongoing. It starts in the morning and gets worse if you bend over.

Common sinus headache symptoms include:

- Pain and pressure around the eyes and across the cheeks and the forehead; the area may be tender to the touch
- Achy feeling in the upper teeth
- Fever and chills
- Facial swelling

To diagnose a sinus headache, a doctor will ask about the symptoms. A fever may be a sign of a sinus infection. The doctor may also do an x-ray or CT scan to look for swelling or blockage of the sinuses.

A doctor may recommend a decongestant to help ease sinus swelling or an antihistamine to help control allergies. Acetaminophen or ibuprofen can help relieve pain. Check with your doctor before you take any over-the-counter medicines if you have any medical problems, allergies, or take any other medications. Antibiotics may be prescribed for a sinus infection.