



## Cervicogenic Headaches

Headaches are a common condition affecting people in the community and there are a number of potential causes. One common source of headaches affecting up to 20% of headache sufferers is the neck (in anatomic terms, the cervical spine – hence cervicogenic headache). Careful assessment is required to differentiate between cervicogenic headache and headaches that occur from other causes.

### Causes

There are two main situations where cervicogenic headache occurs. Disc bulging in the mid-upper part of the neck can refer pain upwards to the head. In these cases people will often also note stiffness in the neck that came on quite suddenly with the pain. Another common cause is adaptive shortening and/or distortion of joints and ligaments in the upper part of the neck. This occurs almost exclusively as a result of poor sitting and standing posture where the head is held in a forward protruded position for long periods and the joints of the upper neck gradually tighten over time. These joint tissues can become more sensitive as this occurs and refer pain up to the head. Poor sitting posture is the single biggest factor in the development of cervicogenic headache of either main cause.

### Characteristics

The symptoms of cervicogenic headache can be quite varied. The pain can radiate up the back of the head from the neck on either side or both, up behind the ear and forward as far as the temple in some cases. Some people will experience a frontal headache or pain behind the eyes. Others will have a more generalised headache. The headache will typically increase with sustained stress from poor posture.

### Treatment

Postural correction is paramount in the management of cervicogenic headache. Good neck posture is related to good lumbar posture, hence lumbar supports used in an upright chair will assist in maintaining a better neck position. Where the headache came on fairly suddenly and is accompanied by stiffness in the neck, a disc bulge may be implicated. These will usually display a directional preference which means that a particular direction of exercise will rapidly reduce the bulge, giving rapid relief of the symptoms. Physio applied mobilisation may be required to complete the reduction. A full McKenzie assessment is required to identify the directional preference which will vary between individual cases.

Where the problem relates to tightened structures in the neck, posture correction along with exercises to stretch the shortened structures can resolve the problem. Commonly, repeated or sustained retraction exercises which move the joints in the opposite direction to that which poor sitting posture places them will be useful.

Once your condition has resolved, your physiotherapist will teach you how you can manage it independently in the future to minimise the chances of recurrence.

*We employ professional, experienced, and highly qualified physiotherapists and we offer a range of services and products to meet the needs of our community. Open 6 days a week for your convenience in the heart of Mt Beauty. Home and hospital visits by arrangement.*

**To find out more make an appointment by visiting our clinic at  
5a Hollonds St, Mt Beauty 3699 or call us on 03 5754 1270.**