Headache & Arthritis, NHF

Headaches and arthritis are common problems. This causes an interest in the possible role of arthritis in causing headaches. Several major forms of arthritis exist. Two of the most common types are:

- Rheumatoid arthritis.
- Osteoarthritis.

Rheumatoid arthritis may begin at any age. It is a condition in which the body attacks some of its own tissues, thinking they do not belong. This leads to destruction of the bony areas around the joints. This condition may afflict any of the body's joints. It usually produces a deformity of the joint. The hands and fingers no longer appear straight but often appear angled towards one side. In some cases, the spine may be involved. Most often it is the vertebrae of the neck (*cervical spine*). The areas of the neck most commonly afflicted by rheumatoid arthritis are the first and second cervical vertebrae. Curiously, rheumatoid arthritis, though it often produces severe deformities, is not always painful.

The more common form of arthritis is osteoarthritis. It is a wear-and-tear form of arthritis. It usually does not produce deformity of the joints or destruction of the bony tissues. Rather the ligaments weaken. They may be calcified due to the body's attempt to heal the damage. The larger joints of the body and those joints that take the most stress and strain are the most often affected. In the neck region this osteoarthritis usually involves the fifth, sixth and seventh vertebrae. This is because the effects of posture produce the most fatigue on them. Osteoarthritis is often more painful than rheumatoid arthritis.

During workups for arthritis, a test evaluating inflammation, (the sedimentation rate) often is performed. In rheumatoid arthritis, this test will usually be elevated. Other tests for inflammation may also be elevated. In patients with osteoarthritis, x-rays of the neck or jaw joints will show changes from “lipping” of the vertebrae. This is caused by calcium deposits in the ligaments. Or they may show narrowing of the space between the vertebrae, or spur formation (from calcium deposits). If severe, it may cause obstruction of the holes where the nerves pass from the spine to the body. In rheumatoid arthritis, dislocation of vertebrae may occur in the upper neck. CT scan and MRI in patients with osteoarthritis may show bulging of the discs that cushion the vertebrae. In the most severe cases, herniation of the discs may occur.

Headaches, felt as a pain in the neck, may be caused by arthritis if the first, second or third vertebrae are involved. This condition is due to the nerves that supply the scalp only originating from this area of the spine. Neck pain itself, whether alone or coupled with headaches, can involve any portion of the neck. If the jaw is involved, the symptoms are similar to those of Temporomandibular Joint Syndrome (TMJ).

The progressive severity of rheumatoid arthritis may be slowed by a variety of potent medications. In osteoarthritis, its progression is not usually hindered by medication. The following may be helpful in slowing the advancement of the disorder:

- Lifestyle adjustment.
- Rest.
- Exercise.
- Weight loss.

Medications, such as the nonsteroidal anti-inflammatory agents (NSAIDs), are useful. They may reduce the pain and improve the reduced motion which occurs in joints afflicted by arthritis. From some studies, the use of acetaminophen appears to be as effective in controlling the pain of arthritis as the NSAIDs. Physical modalities may also be useful for arthritis. They include:

- Heat.
- Massage.
- Exercise.

But physical therapy must be prescribed by a caregiver, just as most medications for arthritis.

Information courtesy of the National Headache Foundation

Document Released: 03/09/2005 Document Re-Released: 10/15/2010
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