Headaches: A Complex Health Problem
by Mark Force, DC

Headache, referring to pain from the head or neck can be a frustratingly difficult problem to diagnose and treat.

The National Institute of Health (NIH) categorizes primary headaches by those being vascular in nature (migraine, toxic, and cluster headaches) and those that are associated with tension or muscle contraction (tension, chronic muscle contraction, inflammatory, and traction headaches). The NIH estimates that 90% of headaches are of the tension type. Women are significantly more prone to migraine and tension headaches, whereas men are more prone to cluster headaches.

Secondary headaches are due to specific illness or dysfunction for which headaches are a symptom. These include trauma (concussion), cardiovascular disease that includes the blood vessels of the head and neck, infections, tumors, and dysfunctions or diseases of thyroid, liver, kidney, eyes, ears, neck, teeth, sinuses, temporomandibular joint, and cranial bones. Headaches are a common side effect of medications and chemical stressors including air pollution, food additives, and both food and environmental allergies.

A complicated picture, indeed! The difficulty in accurately determining the actual cause and the precise therapy and selfcare needed to resolve the reason for headaches underlies the reason that most headaches either go untreated or are managed, but not resolved, through medication.

Diagnosis is the key to resolution. Examining your body functions through neuromuscular reflex testing (muscle testing) with applied kinesiology methods shines here. Applied kinesiology muscle testing can help us determine function of your nervous system and its’ relationships to your body structure, body chemistry, and emotional state and to enhance and integrate the information derived from your history, physical exams, and laboratory findings.

Often a focus on treatment for headaches can be useful in the short-term, but managing pain does not resolve the underlying cause for headache pain. This focus and approach is ineffective as a long-term solution. Pain medication for headache relief is not an effective way to solve headache and can often cause health problems, especially of the liver, when used over long periods of time.

So, what to do? Find the cause and fix it. Applied kinesiology (AK) is a precision tool for determining the underlying cause(s), effectively combining various therapies appropriate to the
underlying problem, and developing the selfcare program required to resolve the emotional stressors, dietary patterns, and environmental factors that may be contributing to headaches.

The key to resolving headaches or any other health problems is to restore body function to normal/optimal through balancing the triad of health - structural, chemical, or mental/emotional aspects of your health.

Mechanical, or structural, causes for headaches are common and commonly overlooked. Structural causes for headaches include abnormal mechanics to the structures of the head and neck, including the jaw and teeth, that put stress upon the cervical and cranial nerves. This stress can be to the joints of the neck (cervical spine) or skull (cranial sutures) or to the muscles and connective tissue (tendons, ligaments, or fascia).

Often past injuries to the head and neck heal incompletely or improperly and result in dysfunction of the muscles of the head and neck. The Headache Classification Committee of the International Headache Society suggests the performance of deep neck flexors has greater diagnostic value for musculoskeletal involvement in headache than any other finding.¹ This is a common cause dysfunction and pain and AK methods are very systematic, logical, and efficient for finding and resolving these lingering and often hidden injuries. Chiropractic and other manual therapies for the spine, craniosacral therapy, acupuncture, and muscle reflex therapies, all part of AK-focused therapy, are very useful here.² ³ ⁴ ⁵ ⁶

Biochemical and environmental stress is a key factor when considering headaches. Imbalances in body chemistry to consider with headaches are lactic acidosis (inefficient production of cellular energy), imbalances of pH and electrolytes, chronic dehydration (yes, a common reason for headaches!), liver dysfunctions (liver always be considered in headaches), digestive dysfunctions, neurotransmitter imbalances, and hormonal imbalances (the complexity of female hormone regulation accounts, at least in part, for the increased frequency of headaches in women). Combining health history, including environment and diet, physical exam, lab findings, and AK exams can be the key approach to finding which factors are involved in chronic headaches.

Air pollution and environmental exposure to toxic chemicals must always be considered as a possible cause. “Sick building syndrome” is becoming more recognized all the time as a possible culprit for headaches. My clinical experience has been that the most common environmental chemical offender for headaches is air fresheners.⁷ ⁸ ⁹ ¹⁰ ¹¹ ¹²

Diets excessively high in refined foods can cause headaches and improved diet, sometimes including vitamin and mineral supplements, can help resolve headaches. Food additives
(artificial sweeteners, flavorings, colorings, and preservatives) and processed foods have been shown to trigger headaches.¹³,¹⁴,¹⁵

Food and environmental allergies are possible culprits. Food allergies are often subtle triggers for chronic inflammation in the intestines that can result in headaches. The most common food allergy that triggers headaches is gluten, the protein found in most grains and especially wheat and anything made from wheat.¹⁶,¹⁷,¹⁸,¹⁹,²⁰,²¹

Low grade, chronic, and essentially hidden infections can be a trigger for headaches, as well. Most commonly seen here are sinuses, gums, teeth, and intestinal tract.²²,²³,²⁴

Inflammation is another biochemical stressor that can be a trigger for headaches. There are many pathways for inflammation and identifying the involved pathway(s) and the best way to correct it/them can be difficult. AK methods are elegantly direct at finding the involved inflammatory pathway and the best combination of clinical nutrition (supplements) and diet to control them.²⁵

Stress is an accepted cause of headaches. AK-focused care has unique tools for identifying and reconditioning emotional stressors and determining optimal selfcare for lowering stress levels. Function of your unconscious, or autonomic nervous system (ANS), is very sensitive to stress, especially if chronic. And, your ANS controls and regulates all body functions. It is often the overlooked key to solving headaches. ANS function and balance can be readily measured through heart rate variability, an inexpensive an non-invasive test that can be done in the office. Heart rate variability has been used extensively in a research setting and has in recent years become a recognized clinical tool for measuring stress levels and response to stress management. I use a combination of the heart rate variability and AK exam to identify the best approach for improving ANS function and robustness and for directing selfcare for better stress management. Often biofeedback, meditation techniques, and/or exercise will be part of the solution here.²⁶,²⁷

It is the complexity and the often multi-causal nature of headaches that can make them so difficult to solve. The solution is to bring various diagnostic methods together in order to properly diagnose the underlying causes and to develop an integrated approach to health care that can bring various healthcare methods into an synergistic whole. The AK approach to diagnosis and treatment shines here.
References


4 Tuchin, P.J., 2008, A case of chronic migraine remission after chiropractic care, Journal of chiropractic medicine, 7(2), pp. 66-70


6 Stack, B.C. & Stack, B.C., 1992, Temporomandibular joint disorder, American family physician, 46(1), pp. 143-50


11 Ando, M., 2002, [Indoor air and human health--sick house syndrome and multiple chemical sensitivity], Kokuritsu Iyakuin Shokuhin Eisei Kenkyūjo hōkoku = Bulletin of National Institute of Health Sciences(120), pp. 6-38


21 Grant, E.C., 1979, Food allergies and migraine, Lancet, 1(8123), pp. 966-9


