

Case Report

An Osteopathic Approach for the Management of Chronic Headache- A Case Report

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ABSTRACT

Headaches are most common reason for using over-the-counter analgesic medications and chronic headaches are one of the most common presenting complaints in ambulatory care clinics. The full potential of available treatments for headache is unrealized. In this regard, Osteopathic manipulative therapy is commonly used for treatment of multiple types of headache in practice and anecdotally has good success. So, the purpose of the study is to find out the efficacy of osteopathic manipulation therapy by assessing the patient on qualitative measures like VAS score and Headache Disability index. It was concluded that osteopathic manipulative therapy provided a hands-on approach to optimizing physical and psychological well-being of patients suffering from chronic daily headaches.

Key words- Headache, Osteopathy, VAS

INTRODUCTION

Headaches are the most frequent neurological disorder account for 1-4% of all emergency department visits and are the ninth most common reason for a patient to consult a physician. Approximately 90% of individuals will experience headaches in their lifetime which fall under a few categories including migraine, tension-type and cluster headache. ^[1]

Also headache are most common reason for using over-the-counter analgesic medications and chronic headaches are one of the most common presenting complaints in ambulatory care clinics. Of the two broad categories of chronic headaches, migraine and tension-type, migraine headaches are likely to be more severe and disabling; however, tension-type headaches are more common. ^[2]

The frequency and duration are the two clinical parameters which distinguish between chronic headache from other types of headache. In Chronic daily headache, duration is defined as a daily or near daily

headache that lasts at least 4 hours and frequency is atleast 15 days in a month. ^[3]

While a wide range of effective pharmacological and non pharmacological therapies are available for treatment and prevention of headaches, current treatment of chronic headache is frequently suboptimal. Many patients with debilitating headaches fail to consult a doctor, and those who do may not have their headaches properly identified or classified. The full potential of available treatments for headache is unrealized. Of those who consult a physician about their headaches, the majority are dissatisfied with the care they receive, often because they were unhappy with their healthcare provider or because they had experienced negative side effects from their medication. ^[4]

In this regard, Osteopathic manipulative therapy is commonly used for treatment of multiple types of headache in practice and anecdotally has good success. It involves the diagnosis and treatment of structural disorders and muscular

dysfunction in the body to address various pain states and other illnesses. The use of Osteopathic manipulative therapy as an adjunctive therapy has also been associated with reduced medication usage after certain surgical procedures. [5] Little has been published, however, relating to the use and efficacy of Osteopathic manipulative therapy in treating chronic daily headache.

So, the purpose of the study is to find out the efficacy of osteopathic manipulation therapy by assessing the patient on qualitative measures.

CASE REPORT

A 73 years old female presented to GLSMH Hospital, Patiala with a chief complaint of headache with pain behind the eye orbit on both sides since 20 years. She experiences headache daily since 20 years but didn't hinder their daily routine and she was able to do her daily activities without any dependency. She describes pain as a dullache and Jabbing and jolting (electric shock like) in nature and rated as 5 out of 10 on VAS scale. She felt that the pain usually starts from back of the neck and head area, behind the eye with more on left side of the forehead.

On NNA (Neurology & Neuroscience Associates) Headache questionnaire, she described that sometime headache cause's word finding difficulty with or without confusion. The patient symptoms were worsened by sleep disturbances and weather changes. Also, she felt more pain when she was trying to lying down on bed at night. Her headache also causes the sleep disturbances like difficulty in falling and maintaining sleep, awakening at the middle of nights due to headache and waking up in the morning with headache.

On last 2-3 months, she also experiences weight loss and suffering from High blood pressure and taking it medication daily since 15 years. Almost 25 years back, she was diagnosed with a facial palsy on left side which was recovered on its own within 3-4 months. When the headache becomes severe in a day, she takes

a half tablet of Ultracet which was helpful in relieving pain (She was taking medication approx. 5 days a week). She was also taking medication daily to fall asleep.

On neurological examination, no focal neurologic deficits were found in the cranial nerves or the extremities. She was able to breathe normally with a respiratory rate of 12 per min. patient exhibited a reduced ROM in cervical spine with muscular tightness in scalene muscle, sternocleidomastoid and Levator Scapulae muscle on both sides (LT>>RT).

On Osteopathic examination, patient had right cranial torsion, motion restriction in frontal bones and thoracic diaphragm, occipital-atlantal compression. On palpation, A tender point was seen on the greater wing of sphenoid on left side was seen with mild swelling.

The baseline evaluation of Headache Symptom and its affect on quality of life (QOL) was assessed on NNA headache symptom questionnaire, VAS Scale for pain and Headache Disability Index.

The treatment protocol was described in table as follows-

Table- Treatment Regime	
DAY	TREATMENT PROTOCOL
Day 1-2	<ul style="list-style-type: none"> • Occipito-Atlantal Release • Frontal Lift • Mastoid release • Temporal release • Thoracic Diaphragm release • Still' s manoeuvre (CV4) • Rocking dural tube release • Hyoid release
Day 3-5	<ul style="list-style-type: none"> • Same Protocol • MFR of Scalene muscle, Sternocleidomastoid and levator Scapulae muscles



Fig 1- Frontal Lift



Fig 2- Still's manoeuvre.

The treatment sessions of 5 days 30 minutes was given to the patient in which first 2 sessions were on regular basis and last 5 sessions were administered on alternate days. After the completion of protocol, patient was discharged and advice him to review after 15 days.

Prognosis

The prognosis of the patient was evaluated on following two measures-

Tool	Baseline evaluation score	After intervention score
VAS Headache Severity Scale	5/10	3/10
Headache Disability Index	Total- 40/100 Emotional Component- 16/52 Functional Component- 14/48	Total- 16/100 Emotional Component- 12/52 Functional Component- 4/48

On subjective Evaluation, patient felt 60% symptomatic relieve from headache but sleep disturbances were still present. After the first 2 daily sessions, she fall asleep properly for 6 hours but morning headache was present. Patient felt that after intervention she felt very good but on the next day the effect wears off then headache starts again and intensity was more while lying down. The intensity of pain was about 20% less than before.

DISCUSSION AND CONCLUSION

In the present study, Osteopathic manipulative therapy was used as an adjuvant therapy for treating chronic daily Headache. Headache can be induced by physical, psychological and pharmacological causes and each requires a treatment. [6] In the present study, Osteopathic manipulative therapy was helpful in reducing the pain intensity and frequency of chronic daily headaches by addressing structural causes rather than merely battling symptoms.

It was concluded that osteopathic manipulative therapy provided a hands-on approach to optimizing physical and psychological well-being of patients suffering from chronic daily headaches.

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