

Getting Ahead of Headaches

by Neil Grauer

Valerie Swartz used to get crippling migraine headaches on her job—which was in a physician's office.

Swartz, 55, worked for 30 years as a physician's receptionist in Shippensburg, Pennsylvania, which is about 40 miles south of Harrisburg. Although she had suffered from headaches ever since grade school, in recent years they had become "unbearable," she says.

"I had pressure on my temples, on the back of my head. I was incapacitated. I couldn't do anything. I'd come home from work, say hello to my husband and go right to bed."

Three years ago, her family physician "heard that Hopkins was performing miracles" with headache patients and recommended that she go to Baltimore for treatment. Once here, she was referred to Jason Rosenberg. "As far as I'm concerned, he did perform a miracle," she says. Dr. Rosenberg weaned Swartz off of a strong headache medication that only was recommended for occasional use, but which she had been taking daily; put her on different medication less prone to causing "rebound" headaches, due to over-medication; and devised vitamin therapy and a diet aimed at reducing the potential triggers of her disabling headaches.

It has worked. Swartz still gets occasional headaches, but they are far more manageable and no longer disabling. "I feel like I've gotten my life back," she says.

The now semi-retired mother of three and grandmother of five says she refers headache sufferers whom she meets to Rosenberg and hopes his new headache center will help others.

Migraine, tension, cluster, sinus—the types of headaches people experience are as varied as the people themselves. No matter what kind, headache sufferers agree—headaches are a real pain!

According to the American Headache Society, every 10 seconds someone in the United States goes to the ER with a headache or migraine. Though an ER visit may offer temporary relief, it's best to see someone who understands the process and many varieties of headaches.

The new Headache Center, founded by Jason Rosenberg, M.D., assistant professor of neurology and director of the new Johns Hopkins Headache Center at Hopkins Bayview, provides a multidisciplinary approach featuring a broad range of treatments for the hundreds of types of headaches from which people suffer. Eleven physicians—with specialties in vascular medicine, pediatrics, anesthesia/pain control, neurosurgery, otolaryngology, hydrocephalus and psychiatry—will work with the center. To better coordinate these services, nurse practitioner Cynthia Schuster, CRNP, and coordinator Beverly Wesko also have joined the staff.

According to Dr. Rosenberg, headaches are the illness for which patients are most frequently referred to the neurological department; 12 percent of the U.S. population suffers from migraines, which have symptoms far worse than typical headaches; and nearly one-third of young women have migraines. (Hormonal differences between the female and male brain may be one reason more women suffer from migraines; pregnancy and the influence of the menstrual cycle also can be factors). Most patients with chronic headaches are young, employed and become significantly disabled.

Headaches come in a seemingly endless variety and often have causes that are misdiagnosed. Headaches can be primary, or idiopathic, meaning they are not related to any underlying disease; or secondary—

"the ones everybody worries about"—that are related to aneurysms, brain tumors, problems with the spinal fluid and nerve inflammations.

The most common, characterized by a low-level, nagging pain, is called a tension headache. It is annoying but can be successfully treated with over-the-counter medications and doesn't prevent its sufferers from going about their daily activities. Migraines, however, come with "a whole constellation" of symptoms, ranging from light and noise sensitivity to motion sickness and intractable nausea. Migraines can be disabling, forcing the sufferers to take to their beds. Estimates vary, but a recent study in the *Archives of Internal Medicine*, which included data gathered in Baltimore County, says that otherwise healthy, young people spend more than 112 million bed-ridden days a year due to migraines—costing the national economy \$13 billion in lost productivity.

Other disabling varieties include cluster headaches, with excruciating, stabbing pains that are focused behind one eye. The patient may suffer several attacks a day for a few weeks or months (hence the "cluster" terminology), then not be afflicted again for a year or more. There is trigeminal neuralgia, featuring devastating, burning face pain; occipital neuralgia, with shooting pains in the back of the head; and exertion headaches that torment young athletes.

"When I was in the residency clinic, I was seeing a very high volume of headache patients. I began reading about headaches and discovered that these are people we actually can make better, which isn't always the case with a lot of our neurological illnesses", says Dr. Rosenberg.

Because no large academic center devoted to headache patients existed in this region, Dr. Rosenberg recognized "a huge, unmet need in the community—and at Hopkins" for the facility he now is launching. Hopkins Bayview's Headache Center will serve not only the patients but their physicians, providing them with a place to which they can send people disabled by incapacitating head pain.

The multidisciplinary services and "depth of expertise" offered by the new

center will be of immense benefit to patients. Johns Hopkins anesthesia pain clinic, OB/GYN physicians, psychiatrists, neurosurgeons—even a nutritionist (since some headaches are triggered by what the patient eats)—will offer "a unified, efficient patient experience that is going to be very important," says Dr. Rosenberg.

"There are a whole variety of headaches that have a number of warning signs of serious illnesses that a trained specialist can recognize and address to prevent harm to the patient," Dr. Rosenberg adds. "I see the center as not only a place where patients can get most of their care in a comprehensive way in one location, but as a seamless gateway for the patients to access all of the other allied professions at Hopkins that they may require."

The center also will have space in one of the Bayview outpatient clinics to provide rapid triage for incoming headache patients—sparing them long, desperately uncomfortable waits in the emergency room. Headache sufferers who go to the ER usually are seen only after those with heart attacks, strokes, broken limbs or other traumas are treated. "The emergency room is about the last place you want to be if you have a migraine," Dr. Rosenberg says.

Plans for the center include community outreach efforts that will feature education sessions on headaches. In the past three years, Dr. Rosenberg already has seen "thousands" of headache patients from throughout the metropolitan area, as well as southern Pennsylvania, Delaware and the Eastern Shore—even some from the West Coast. He estimates that 800 new headache patients a year will be seen at the center, with most treated on an outpatient basis.

In Dr. Rosenberg, they will find an empathetic practitioner who has occasional migraines himself. "I have more than a little sympathy for these patients," he says.

For more information, call 410-550-4416.