

IS POST TRAUMATIC HEADACHE A NEUROLOGICAL AS OPPOSED TO A PSYCHO-SOCIAL DISORDER?

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Most clinicians agree that the experience and maintenance of post-traumatic headaches (PTH) is due to a variety of biological, psychological, and socioeconomic factors. Frequently, treating physicians are put in a position of having to defend a purely “biological” vs. “psychological” etiology of PTH due to litigation or other social demands. The present debate will highlight points from the two extremes.

PTH is the most common result of head or neck injury. Though it typically has duration of a few days, weeks, or months (with gradual improvement over time), a minority of patients develop a chronic, ongoing, and disabling pain pattern. Pain is typically resistant to aggressive pharmacological and non-pharmacological treatments. Often, the frequency and severity of the PTH is disproportionate to the injury itself.

PTH frequently occurs with a constellation of other symptoms as part of what has been called a “post-concussive” syndrome (PCS). These include somatic symptoms (e.g., dizziness, tinnitus, photo- and phonophobia, and lethargy), cognitive disturbance (problems in attention/concentration and decreased speed of information processing), and psychological symptoms (depression, anxiety, irritability, apathy, and insomnia). These symptoms are frequently as troubling to the patient as the co-existing head pain and must be addressed by the treating physician. When viewing the patient from a purely “biological” vs. “psychological” perspective, the presence of such symptoms for many practitioners moves the patient to a more “psychological/behavioral” realm of treatment.

The maintenance factors involved in chronic symptoms of PTH and PCS are poorly understood. In the present debate, data regarding the impact of psychological, behavioral, cultural, and socioeconomic factors that may affect the severity and chronicity of PTH and PCS will be reviewed. Their role in these syndromes will be highlighted. The impact of cognitive variables (e.g., expectations) on neurochemical and brain functioning will be presented as well.