



Libyan International University
Faculty of Basic Medical Science

Effective treatment on Tension Type Headache In Adults.

Submitted by: Mohamed Faiz El-Jwhri, 3nd year, faculty of Basic Medical Science, at Libyan International University.

Supervisor: Dr. Sarah El-megerihi, tutor at the BMS Faculty, Libyan International University.

Date of submission: July 03, 2018

Abstract

Headache disorders are among the most common disorders of the nervous system. This report discusses the assessment of the efficacy and safety of Paracetamol, Aspirin, and Ketoprofen for the acute treatment of frequent episodic TTH in adults, proving that Paracetamol is the most effective one among the other two drugs.

Introduction

Headache disorders are among the most common disorders of the nervous system. Primary headache disorders, such as migraine, tension-type headache, cluster headache, and the so-called chronic daily headache syndrome, can cause substantial levels of disability. Headache can also occur as a symptom of a considerable number of other conditions. There are effective treatments for all types of headache. Tension-type headaches most commonly last from 30 minutes to seven days. ^[1] The pain is commonly described on both sides of the head (bilateral), as “a band around the head” or vice-like. The pain is generally mild to moderate and is not worse with routine physical activity, which means that most people with tension-type headache continue about their normal daily activities despite having their headache. ^[2] Most intermittent tension-type headaches are easily treated with over-the-counter medications, including: paracetamol, aspirin, and ketoprofen. ^[3]

Method

To assess the efficacy and safety of Paracetamol, Aspirin, and Ketoprofen for the acute treatment of frequent episodic TTH in adults.

Discussion

The first study found 23 studies involving 8079 participants looking at paracetamol for frequent episodic tension type headache. About 6000 participants were involved in comparisons between paracetamol 1000 mg and placebo. Results were usually reported two hours after taking the medicine or placebo. Paracetamol 1000 mg provided a small benefit in terms of being pain free at two hours for people with frequent episodic TTH who have an acute headache of moderate or severe intensity. About 10 in 100 people taking paracetamol 1000 mg reported having a side effect, which was the same as with placebo (9 in 100 people) (high quality evidence). Most side effects were mild or moderate in intensity and no side effects were serious. ^[4]

While the second study found five studies involving 1812 participants looking at aspirin for frequent episodic tension type headache. About 1668 participants were involved in comparisons between aspirin at doses between 500 mg and 1000 mg and placebo. A single dose of aspirin between 500 mg and 1000 mg provided some benefit in terms of less frequent use of rescue medication and more participants satisfied with treatment compared with placebo in adults with frequent episodic TTH who have an acute headache of moderate or severe intensity. There was no difference between a single dose of aspirin and placebo for the number of people experiencing adverse events. The amount and quality of the evidence was very limited and should be interpreted with caution. ^[5]

And the third study found four studies involving 1253 participants looking at ketoprofen for frequent episodic tension type headache. Only a fraction of the participants were involved in comparisons between ketoprofen 25 mg and placebo. : Ketoprofen 25 mg provided a small benefit

compared with placebo in terms of being pain-free at two hours or having mild or no pain at two hours for people with frequent episodic TTH who have an acute headache of moderate or severe intensity. Its use was associated with more people experiencing adverse events. Ketoprofen 25 mg was not superior to paracetamol 1000 mg for any efficacy outcome. ^[6]

Conclusion

Tension-type headaches most commonly last from 30 minutes to seven days. The pain is commonly described on both sides of the head (bilateral), The pain is generally mild to moderate and is not worse with routine physical activity. The three studies were based on other studies since assessing TTH needs to be screened over a large number of participants. Paracetamol 1000 mg provided a small benefit in terms of being pain free at two hours for people with frequent episodic TTH who have an acute headache of moderate or severe intensity, and being the most effective drug among the other two drugs.

Bibliography

- 1- Who.int. (2018). *WHO | Headache disorders*. [online] Available at: http://www.who.int/topics/headache_disorders/en/ [Accessed 29 Jun. 2018].
- 2- American Migraine Foundation. (2018). *Tension-Type Headache (TTH) | American Migraine Foundation*. [online] Available at: <https://americanmigrainefoundation.org/understanding-migraine/tension-type-headache/> [Accessed 29 Jun. 2018].
- 3- Mayo Clinic. (2018). *Headaches: Treatment depends on your diagnosis and symptoms*. [online] Available at: <https://www.mayoclinic.org/diseases-conditions/chronic-daily-headaches/in-depth/headaches/art-20047375> [Accessed 29 Jun. 2018].
- 4- Stephens, G., Derry, S. and Moore, R. (2018). *Paracetamol (acetaminophen) for acute treatment of episodic tension-type headache in adults* [Accessed 29 Jun. 2018].
- 5- Derry, S., Wiffen, P. and Moore, R. (2018). *Aspirin for acute treatment of episodic tension-type headache in adults* [Accessed 29 Jun. 2018].
- 6- Veys, L., Derry, S. and Moore, R. (2018). *Ketoprofen for episodic tension-type headache in adults* [Accessed 29 Jun. 2018].