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Therapeutic Approach to Post-Traumatic Headache in Brazil: A Literature Review

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Introduction

Traumatic brain injury (TBI) can be considered one of the major problems worldwide, being one of the leading causes of morbidity and mortality among young adults. After a TBI, various symptoms emerge, with headache being the most prominent complaint. It is a complex and challenging condition in Brazil, as it depends on precise diagnosis for proper treatment. In this context, this condition can be classified based on its manifestation: acute, which persists for an average of 3 weeks after the trauma; and chronic, which can last for months to years, depending on the severity of the injury. It can also be stratified as mild, moderate, or severe, and can be exacerbated by other factors such as patient age, location of the TBI, and the patient's pre-existing health, demonstrating its multifactorial nature. Furthermore, it can be inferred that post-traumatic headache has various causes beyond the impact of TBI, including inflammatory processes, neurotransmitter alterations, or even psychological factors such as post-traumatic stress.

Objective

This study aims to analyze the prevalence of different types of post-TBI headaches in Brazil, their impact on the population, and the therapeutic approach suggested by the literature.

Methods

This study was conducted through a systematic literature review, focusing on the topic of post-traumatic headache, using the PubMed and Scielo databases. The evaluation criteria included publications in English and Portuguese, with publication dates ranging from 2018 to 2023.

Results

It was observed that various references define post-traumatic headaches (PTH) as conditions in which individuals experience headaches after cranioencephalic trauma or head injuries. However, this condition is further subdivided into various types, with six common subtypes in the population: post-TBI tension-type headache, post-TBI migraine, post-TBI cervicogenic headache, post-TBI tension-type hybrid headache type II, post-traumatic persistent headache, and post-TBI headache syndrome (PCS). Additionally, it was found that this condition affects more men than women (3:1) and results in functional impairment for approximately one year, after which it usually disappears. However, despite numerous studies, it remains a complex condition that varies significantly among patients, making precise diagnosis and subsequent individualized treatment challenging.

Conclusion

In conclusion, post-TBI headache is an extremely complex condition, subdivided into various types, with multifactorial involvement and different presentations in each individual. It requires an individualized and specific approach. Treatment depends on the type of presentation and the severity of the pain, which may involve pain-relief medications, non-pharmacological methods such as relaxation techniques, physiotherapy, and cognitive-behavioral therapy. In cases with well-defined headache patterns, a specific therapeutic approach for the subtype, such as migraine, may be attempted. However, evaluating patients with PTH remains challenging, as many of them continue to experience headache complaints beyond the one-year period due to the absence of objective findings. This underscores the need for a multidisciplinary approach to PTH treatment. Furthermore, more research in this area is needed to better understand this phenomenon and develop methodologies to assist non-specialist physicians in decision-making.

Palavras-chave: Brain Injuries, Traumatic; Headache; Post-Traumatic Headache.