



Impact of Headache on Quality of Life: A Multidimensional Analysis

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Categoria: Fatores Psicológicos E Comportamentais No Manejo Das Cefaleias

Introduction

Headache, a pervasive symptom prompting numerous neurology consultations and accounting for 9% of Primary Care visits, stands as a pressing public health concern. Its persistent or chronic nature has far-reaching implications for the quality of life of those afflicted, transcending mere physical discomfort. This impact reverberates across occupational, economic, and social spheres. A meticulous clinical diagnosis, essential for excluding alternative etiologies and categorizing the headache type, guides tailored approaches to symptom alleviation and, consequently, quality of life enhancement. Treatment options encompass both pharmacological and non-pharmacological modalities, individualized to meet each patient's unique needs.

Objective

The article aims to conduct a multidimensional analysis, using scales, regarding the impact of headache on the quality of life of affected patients.

Methods

This study is an integrative literature review, which searched through the DeCS/MeSH descriptors "Headache" and "Quality of life" in the PubMed, ScienceDirect, and BVS databases. The period covered was from 1998 to 2023. In this way, 274 articles were found, according to inclusion criteria, in English, Portuguese, and Spanish languages, with full-text availability. In the end, 100 articles were analyzed, of which 10 were selected to compose this review.

Results

The European Quality of Life Assessment - Visual Analog Scale (EuroQoL-VAS), EuroQoL-VAS19, and a questionnaire specific to migraine, the Migraine-Specific Quality of Life (MSQ), were also used. The investigation revealed that patients with chronic headache had lower scores in terms of bodily pain and social functioning when compared to those with clinically refractory headache or migraine. The research also demonstrated significantly negative differences in quality of life scores when comparing the general population to those suffering from chronic or refractory headache. The impact of headaches on daily activities was assessed through questionnaires such as the Headache Impact Test (HIT-6) and the Migraine Disability Assessment (MIDAS), which showed negative and disabling results for this population with headaches. Another sample showed a higher comorbidity with anxiety and depression. Furthermore, the results indicated a high level of daily life restrictions, especially during active cluster periods. They also experienced restrictions in participating in family, work, or social activities. Due to these incapacities, many lost their jobs or retired early. Regarding the use of medical services, patients with headaches had higher utilization rates compared to the general population.

Conclusion

Notably, individuals afflicted with chronic headaches exhibited markedly lower scores in bodily pain and social functioning, when compared to those with clinically refractory headache or migraine. Moreover, the comparison between headache sufferers and the general population unveiled significant negative differences in quality of life scores. The debilitating consequences of headaches on daily activities were corroborated through the application HIT-6 and MIDAS, revealing profound negative impacts on this population. This, regrettably, translated into job losses and early retirements for many individuals grappling with chronic headaches. This comprehensive review substantiates the urgent need for other management approaches that encompass not only pharmacological interventions but also psychosocial support and patient education. It is only through such multifaceted strategies that we can aspire to alleviate the pervasive suffering endured by headache patients and enhance their overall quality of life.

Keywords: Headache; Life quality; Migraine.