

Morning Headache Common in Sleep Disorders

BY DOUG BRUNK

SAN DIEGO — The prevalence of headache disorders in patients referred to a sleep lab for sleep-disordered breathing was 70% and consisted primarily of morning headache, a study of more than 200 patients showed.

A relationship between headache disorders and sleep disorder has been described anecdotally in the medical literature for several decades, but this marks the largest-known prospective study to evaluate the association, Dr. Timothy M. Quast reported during a poster session at an international conference of the American Thoracic Society.

“There have been very few studies done on this topic,” said Dr. Quast of the Walter Reed Army Medical Center,



If a patient reports waking up with a headache, ‘that’s highly predictive of sleep disordered breathing.’

DR. QUAST

Washington. “The ones that we did find were small, of 50-80 patients. We wanted to find out if there was something to this association, or if this is something anecdotal that’s just been repeated for decades.”

He and his associates asked 219 consecutive patients undergoing an overnight polysomnography for diagnostic purposes to complete a brief questionnaire to evaluate whether or not headache disorders were present. Respondents who were affected by headache disorders were asked to complete a more detailed questionnaire to diagnose and characterize the condition.

After all patients underwent polysomnography, the researchers conducted follow-up phone calls at 1- and 3-month intervals to evaluate compliance with their continuous positive airway pressure machine and the effect of CPAP on a comorbid headache disorder.

The mean age of the 219 patients was 44 years old, their mean body mass index was 30.4 kg/m², and 66% were male.

A total of 154 patients (70%) had a headache disorder present and 65 did not. Morning headache was most common type of headache disorder (55%), followed by tension type headache (49%), migraine headache (32%), and chronic daily headache (16%).

No polysomnography features were predictive of headache disorder, a finding that surprised Dr. Quast. “The patients who had headaches had better sleep indices,” he said. “They had less respiratory disturbances, woke up less frequently, and had fewer hypopneas or apneas. They didn’t move as much in terms of periodic leg movement syndrome, and they actually had higher mean oxygen saturation levels. That’s counterintuitive.”

The researchers also found that CPAP therapy appeared to improve headache

symptoms among patients who were compliant with their CPAP machines. “This is another reason that patients need to be compliant with their CPAP, because their headache might actually go away,” he commented.

Patients with a headache disorder tended to be younger, compared with their counterparts who did not have a headache disorder. They also reported being more depressed based on responses to

the Patient Health Questionnaire-9 and more tired based on responses to the Epworth Sleepiness Scale. “There’s something breaking out here, but we did not have the power to determine what makes these subpopulations different from one another,” Dr. Quast said.

He estimated that a study of at least 500 patients will be required to further elucidate the findings.

For now, he said, the clinical implica-

tions of the current findings are that if you have a patient that complains of waking up with a headache in the morning, “that’s highly predictive of sleep disordered breathing, and that person should undergo a sleep study,” advised Dr. Quast, who had no conflicts to disclose. ■

To watch a video interview of Dr. Quast, go to www.youtube.com/ClinPsychNews.

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