

# HEADACHES

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The Gonstead System combines Visualization, Instrumentation, Motion Palpation, and X-ray analysis to form a decision on which vertebra to adjust. This is especially true with patients presenting with headaches. Headaches may come from any part of the spine for various reasons. With that said here are a few clues that may help point to the right area. Remember...find the subluxation on the patient!

## Migraine Headache:

The pain from a migraine is usually one sided and is located in the temple. Many times there is an aura, seeing spots, or dizziness before the migraine begins. Nausea and vomiting may occur with a migraine. These patients try to get to a room with no lights, noise, or odors as they make the headache much worse. Foggy thinking and fatigue are very common. A migraine is almost exclusively a chemistry problem.

There are three major areas that control body chemistry from decreased gland output.

- 1) Most migraines are caused by malfunctioning thyroid gland. Look for subluxations at levels C6-T3.
- 2) Hormone imbalance from altered estrogen, progesterone, or testosterone levels. Look for subluxations at levels L1-L3.
- 3) Adrenal glands effect body chemistry. Look for subluxations at levels T10-T12.

## Headaches upon Waking:

These headaches begin in the early morning hours or when the patient wakes. These are usually body chemistry headaches as the body has a build-up of toxins over night from the chemical imbalance. Most commonly from a decreased output from the thyroid gland, so check C6-T3 for a possible subluxation. These patients need to get up and go for a walk or do some type of exercise before they start their day. If they sleep in, they will be worse so they should rise at the same time each day to exercise and then go back to bed if they choose. Be sure that the cause is not because the patient sleeps on their stomach and irritates the neck each night. Check for possible hormone involvement from L1-3 also.

## Tension Headache:

The pain is located in the temporal area and is worse as the day goes on. Look for a parasympathetic problem. This headache is most often associated with an upper cervical subluxation such as C1 with the laterality to the same side.

## Sinus Headache:

This headache has the patient rubbing their sinuses because of the build up of pressure. These headaches will come on in the morning but get worse as the day goes on...then go away in the evening due to the rise in temperature. Look for an upper cervical subluxation affecting the parasympathetic system. Many times, the headache

will go away but the sinuses remain congested. Then you need to check on lower neck for a sympathetic subluxation to speed up removal of sinus debris.

Remember, sinus drainage is usually parasympathetic system and sinus congestion is usually sympathetic system.

#### Frontal Headaches:

This is a headache above the eyes. Many times, this headache starts at the base of the neck. As the headache gets worse it will travel up the neck and over the top of the head to the frontal region. Look to the base of the neck at the C6-T3 levels as this is a sympathetic problem. There is often a reduced cervical curve or reversal of the curve if the headaches are severe and occur frequently. These are very common.

#### Menstrual Headache:

These usually occur before the menstrual cycle begins from too low estrogen/progesterone. Check the L1-3 levels. Also check the thyroid since they work hand in hand. On some occasions the patient presents severe cramping so you may have to adjust the S-I joints to relieve some of the cramping and then later take care of the low estrogen.

#### Digestive Headaches:

These usually occur on the top of the head. Look to T5-8 first for improper digestion. Food may help relieve a sympathetic headache. These can be from C1 with too much acid being produced. Remember, stomach pain 2 hours after eating is usually T5-T8. Stomach pain before eating or soon after eating is usually C1.

#### Blood Pressure Headaches:

With blood pressure headaches look to C1 for parasympathetic constriction or T10-12 for kidney malfunction. The upper cervical headache is usually much more severe. Headaches that stop with when the patient gets a bloody nose look to C6.

#### Non-Chiropractic Headaches:

A chemistry withdrawal headache may occur when the patient is corrected quickly, and they stop their medication too quickly.

Various medical treatments may cause headaches. Don't forget the obvious such as; needing glasses, just painted the house, etc. Many headaches have been relieved when metallic fillings have been removed.

Remember...patients have the right to more than one headache so you must ask questions about location, frequency, severity, etc. A patient may say they still have headaches but you may have helped one type but they also have another type in a different location.

As you can see, there is a lot of overlap or different possibilities for the level of the vertebra causing the headache. Once again this shows that it is often more difficult to find the subluxation than to fix it.