

## Headache and sleep disorders

***Hamed Amirifard,***

*Neurologist, assistant professor of neurology. Tehran University of medical science. Imam Khomeini hospital.*



Headache is one of the commonest reasons to seek medical attention. Worldwide, it is estimated that 3 billion people will experience a primary headache disorder, such as migraine, annually. The World Health Organization lists headache as one of the 20 most significant causes of disability worldwide. Although the potential relationships between sleep, biologic rhythms, and headache have long been postulated, they remain largely speculative and underused therapeutically.

These interactions are thought to feature prominently in several headache disorders, namely, hypnic headache, cluster headache, and migraine, in which attacks can arise from, be modulated by, and are associated with sleep, as well as being probabilistically more likely to occur at certain times during the 24-hour period. A more focused and detailed understanding of these relationships is likely to be helpful for headache sufferers.

Accurate clinical phenotyping of sleep-related headache, with particular reference to the differences in the diagnostic criteria of hypnic headache (HH), cluster headache, and migraine, is very important, as the management of each disorder differs. Imaging and blood pressure measurement during an attack is mandatory in Hypnic Headache. Identification and treatment of comorbid insomnia, RLS, and snoring in migraine may prove valuable in terms of reducing the risk of conversion from the episodic form of the disorder to chronic migraine. Sleep apnea headache appears to occur independently of the severity of OSA and is not pathophysiologically associated with oxygen desaturation.

Keyword : Sleep –headache –sleep disorders breathing