

# Not All Headaches Are Brain Tumors (But Some Are)



By *Jamie Wells, M.D.* — April 1, 2019



Image by Gerd Altmann via Pixabay [1]

A [news report](#) [2] out today highlights an unfortunate situation of a young woman in the United Kingdom who claims repeated doctor visits for “crippling headaches” were erroneously dismissed as “migraines” when it turns out they were actually caused by a brain tumor. The published account of her experience is quite distressing, but it poses an opportunity to distill further what is worrisome and what is less so when it comes to such symptoms. Headaches come in many varieties that range from benign to this example which underscores unsettling red flags.

## Deciphering the disturbing and suspicious from the routine

According to [the article](#) [2], the pain was chalked up to a family history of migraines. Now, this can be a reassuring tidbit in the context of headaches. But, again, this information must be weighed against the entire patient and a comprehensive picture of their medical history, physical examination, symptom trajectory and clinical status, to name a few. And, it appears she was missing more days at work due to the headaches being increasingly accompanied by “[intense vomiting.](#)” [2] Then, [she](#) [2] “couldn’t keep any food down, and I could barely walk from my bed to the sofa...and I started getting double vision.”

Ultimately, a trip to the eye doctor revealed swollen optic nerves which prompted testing that revealed the brain tumor. It was surgically resected. She experienced a recent setback as it showed regrowth, so another craniotomy was performed while chemotherapy and radiation is underway too.

## What is the deal with headaches?

There are a number of types of headaches. Hormonal headaches are not uncommon. Women may experience them prior to or during menstruation due to an associated dip in estrogen. Another

common form is the tension headache, often described as feeling like a “tight band” around your head. This can be exacerbated by stress. Migraines can pulsate and throb, and may be associated with nausea or visual disturbances. Then, there are all of the headaches caused by secondary issues. For example, certain infections, toxic exposures, strokes, blood clots or ruptured aneurysms, trauma, or dehydration can trigger them. Often with children, since headaches are not a typical complaint, ineffective glasses can be the culprit while an updated formal vision check does the trick.

So, the range and severity is quite vast.

That is why a proper, thorough history is essential to teasing out the etiology of headaches and ascertaining quickly whether they warrant more aggressive intervention. What made them better or worse? Are they more frequent and more intense? Has their character changed? What other associated symptoms exist? What medications or activities were taking place at the time? A comprehensive physical examination which includes a complete neurological assessment can be very informative.

### **What suggested brain tumor?**

There are many types of brain tumors - some slow-growing others more rapid, some benign while others are malignant. Except in early infancy and toddler years, the skull is mineralized bone and represents a fixed, confined space. When the brain gets injured and inflammation ensues, there is a limit to how much it can swell before big problems arise. So, the primary injury itself and the secondary events it facilitates can do meaningful harm.

When a brain tumor has grown considerably, it exerts a mass effect on the surrounding tissues by compressing or displacing them. The consequence manifests in greater and greater symptom intensity (e.g. “crippling headaches” with intense vomiting, double vision, seizures). To learn more, read my two-part series, [Brain Tumors: Fact vs. Fiction Part I](#) [3] and [Part II](#) [4].

### **What is the bottom line?**

The good news is many headaches are quite manageable with the correct treatment for the right diagnosis, so formal evaluation by a physician is the safest path. Keeping a headache journal is a great way to advocate for yourself and help your doctor put the pieces of the puzzle together for diagnostic and treatment purposes. Continued communication with your treating physician regarding any changes or worsening of symptoms is ideal.

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## Links

[1] <https://pixabay.com/photos/despair-alone-being-alone-archetype-513529/>

[2] <https://www.foxnews.com/health/woman-19-claims-brain-tumor-pain-was-repeatedly-dismissed-as-migraines>

[3] <https://www.acsh.org/news/2016/10/10/brain-tumors-fact-vs-fiction-part-i-10281>

[4] <https://www.acsh.org/news/2016/10/11/brain-tumors-fact-vs-fiction-part-ii-10285>