

Impact of Chronic Headache (Migraine) on Daily Activity of Adult Patients in Baghdad City

تأثير الصداع المزمن (الشقيقة) على النشاط اليومي للبالغين المصابين بالشقيقة
في مدينة بغداد

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الخلاصة:

الاهداف: تهدف الدراسة الى تقييم تأثير الصداع المزمن (الشقيقة) على النشاط اليومي للبالغين المصابين بالشقيقة في مراكز الرعاية الصحية الأولية في مدينة بغداد وإيجاد العلاقة بين الخصائص الديموغرافية (العمر والجنس والمهنة والتاريخ الطبي) وتأثير الصداع المزمن (الشقيقة) على فعاليات الحياة اليومية.

المنهجية: دراسة وصفية أجريت لتقييم آثار الصداع المزمن (الشقيقة) على فعاليات الحياة اليومية للمرضى في مراكز الرعاية الصحية الأولية في مدينة بغداد. وقد أجريت الدراسة للمدة من 1 أيلول 2012 إلى 18 آذار 2013 شملت عينة الدراسة (100) مصاب بالشقيقة لأربع مراكز للرعاية الصحية الأولية في مدينة بغداد. جمعت البيانات من خلال استخدام الاستبيان تتألف من جزأين. الجزء الأول: الخصائص الاجتماعية والديموغرافية التي تكونت من 6 فقرات: الجنس والعمر والحالة الاجتماعية، والمهنة، واستعمال العلاجات ومدة الصداع. الجزء الثاني: تم استعمال استبانة نوعية الحياة لتقييم مدى قوة الصداع الناتج من الشقيقة وتأثيره على الفعاليات اليومية بشكل طبيعي.

النتائج: وكان معظم العينة الذين يعانون من الصداع هم من الذكور ، وأكثر المصابين الذين يعانون من الصداع المزمن هم من يستخدم الأدوية. وكانت الغالبية العظمى من المرضى هم من الذين لديهم الصداع يستمر أقل من يوم واحد.

الاستنتاجات: أظهرت نتائج الدراسة أن أكثر من نصف المرضى من الذكور (60٪)، فيما كانت اعمار أكثر من ثلث العينة تتراوح من 20-30 سنة وبنسبة (38 ٪)، فيما كانت أكثر من نصف العينة من المتزوجين (58٪)، وأظهرت الدراسة أيضاً أن أكثر من نصف عينة الدراسة كانت من الموظفين (56٪)، في حين أن الغالبية العظمى من عينة الدراسة اشاروا باستعمال العلاجات (90٪).

التوصيات: أوصت الدراسة بالحاجة لاجراء الرصد المنتظم للصداع المزمن كي تساعد للحد من المشكلات والمضاعفات التي يمكن أن تنشأ نتيجة الصداع، وستكون هناك حاجة للعمل على تنفيذ برامج تثقيفية لتشخيص الصداع وكيفية معالجته.

Abstract:

Objectives: The study aims to assess the impact of (migraine) on the daily activity of patients with migraine at primary health care centers in Baghdad city, and to find out the relationship between their demographic characteristics which as age, sex, occupation, family history .

Methodology: A descriptive study was conducted to assess the impact of (migraine) on the daily activity of adult patients in primary health care centers in Baghdad city. The study was conducted from 1st September, 2012 to March 18th, 2013. The study sample included 100 patients were collected from four centers of primary health care in Baghdad city. The data was collected through the use of constructed questionnaire, which consists of two parts. Part I : deals the socio-demographic characteristics which as 6 items: gender, age, marital status, occupation , using of drugs and duration of headache attack. Part II: quality of life questionnaire assessment tool was used to measure the extent to which chronic headache are affecting the ability to function.

Results: The results showed that more than half of those study males (60%), while their age for more than one-third of the sample ranged from 20-30 years (38%). More than half of them are married (58%). The study also showed that nearly half of the study sample was employed (56%), while the use of the vast majority of the study sample use medications (90%).

Conclusions: Most of the affected by headache were males, greatest of clients who suffer from chronic headache was using medications. Majority of the patients have headache attack lasted less than one day.

Recommendations: The study recommended the need to conduct regular monitoring of chronic headache in order to help to reduce the problems and complications that can arise as a result of a headache, and there will be a need to the implementation of educational programs for the diagnosis of headaches and how to treat.

Keyword: Migraine, Daily Activity, Adult Patients

INTRODUCTION

Migraine is a common and often devastating neurologic disorder. Epidemiologic research data describing that the prevalence and distribution of migraine can be used to assess the burden of disease and the quality of medical care **(1)**.

Migraine affects millions of individuals worldwide, generally during the most productive years of a person's life. Studies show that migraineurs are under diagnosed, undertreated, and experience substantial decreases in functioning and productivity, which in turn translates into diminished quality of life for individuals, and financial burdens to both health-care systems and employers **(2)**. Now recent clinical studies suggest that migraine may be a progressive disease with cardiovascular, cerebrovascular, and long-term neurologic effects **(2)**.

In 1989, the American Migraine Study was the first study in the United States to provide a population-based estimate of migraine prevalence using a case definition based on the International Headache Society (IHS) criteria. This study exposed that approximately 18% of women and 6% of men suffered from migraine, for an estimated 23.6 million Americans with migraine. **(3)**.

Over the past decade, many new treatments for migraine have become available, and the knowledge of migraine has improved. Various studies suggest that the prevalence of migraine may be increasing for reasons that have not been elucidated. In addition, over the last decade, many initiatives to educate physicians and patients about migraine have been launched. Given these developments, we reevaluated the epidemiology, the burden, and the patterns of health. The American Migraine Study, describe the epidemiology of migraine in the United States circa 1999 to determine if its prevalence, sociodemographics, or burden have changed over the last decade **(4)**.

Headaches migraine vary broadly in terms of severity, frequency, and disability- from rare episodes of minor discomfort to daily, incapacitating headaches .The most common type of headache is tension-type headache, in terms of work loss and decreased quality of life, is high among those who experience tension-type headache, with 10% reporting lost workdays and almost half reporting decreased effectiveness at work, home, or school **(5)**.

In general, a migraine is a very bad headache that tends to come back. It may occur as often as several times a week or only once every few years. It can last anywhere from a few hours to 3 days. The amount of pain can vary. Some migraines can be fairly mild, while others seem almost unbearable. In addition, you may be very sensitive to bright lights, noises, and even smells when you have a migraine. Moving around, especially making rapid movements of the head, can make your headache feel worse **(6)**. Some studies show that 5% to 12% of the population in the different countries were classified as suffering from migraine. Approximately one-half of all migraineurs did not seek medical advice **(7)**.

Migraine is also affecting about 11% of adult populations in Western countries. Prevalence is highest during the peak productive years between the ages of 25 and 55. Prevalence of active cases of migraine increases steadily from infancy until approximately 40 years of age and peaks between ages 35 and 45 in both males and females and declines thereafter **(8)**.

Objective of the study:

The present study is designed to achieve the following objectives:

1. To measure the extent to which the chronic headache (migraine) will affect on daily activity at clients with migraine.
2. To identify the relationship between their sociodemographical characteristics of age, gender, occupation, marital state, family history and the extent of migraine.

METHODOLOGY

Design of the Study:

Non experimental design a descriptive study was carried throughout to measure the impact of chronic headache on daily activity for patients with chronic headache . The study is conducted from September 1st , 2012 to March 18th , 2013.

Setting of the Study:

The study was carried out in Primary Health Center in Baghdad City.

The Sample of the Study:

The randomly sample of (100) patients with chronic headache (migraine) who attended to Primary Health Center in Baghdad City through the use of questionnaire and interview technique.

The Study Instrument:

A questionnaire was designed and constructed by the researcher to measure the effect of chronic headache on daily activity. Final study instrument consist two parts: **Part I** : the first section was socio-demographic characteristics that consist of 6 items: gender, age, marital status, occupation, using of medications and duration of headache attack. **Part II**: Questionnaire tool that was used to measure the extent to which chronic headache (Migraine) are affecting the ability to function normally.

Data Collection:

The data were collected through the use of self-administered questionnaire. The data collection process has been performed from Feb. 11th 2013 until Mar.19th 2013.

Rating and scoring:

The items have been rated and scores according to the following patterns. Six point liker scales is used for rating the instrument scales consist from items scored as (1) for none of the time, (2)for A little bit of the time, (3) for Some of the time ,(4) for A good bit of the time,

(5) for Most of the time and finally (6) for All of the time. Finally the rating cut off point used to this scale (mild=27 ; moderate=28-56 and severe more than 57).

Variable	Items	No	Percent
Gender	Male	60	60
	Female	40	40
	Total	100	100
Age	10-20 year	6	6
	21-30 year	38	38
	31-40 year	22	22
	41-more year	34	34
Marital status	Single	58	58
	Married	42	42
Occupation	Student	36	36
	Employed	56	56
	Free worker	8	8
Using of medication	Using medication	90	90

RESULTS:

Table (1) Distribution of the Study Sample by Their Socio-Demographic Characteristics

	Not using medication	10	10
Duration of headache attack	Less than day	58	58
	More than day	42	42

This table showed that more than half of the study subjects were males (60%). Concerning to the age more than third of sample was ranged from 15-25year (38%), regarding to the marital status more than half of the study sample was single (58%). The study also showed that about half of the study sample were employments (56%). While the majority of the study sample was used drugs (90%). Approximately more than half of the study sample suffer from headache attack that persistence less than one day (58%) .

Table (2) levels of effects of chronic headache on daily activity. N=100

Variable	Items	No.	Percentage
How the headaches interfered with their delay with your family, friends, and others who are close to you?	None of the time	12	12
	A little bit of the time	38	38
	Some of the time	26	26
	A good bit of the time	6	6
	Most of the time	14	14
	All of the time	4	4
How the headaches interfered with your leisure time activities, such as reading and exercising?	None of the time	2	2
	A little bit of the time	40	40
	Some of the time	24	24
	A good bit of the time	10	10
	Most of the time	11	11
	All of the time	2	2
Have you had difficulty in performing work or daily activities because of headache?	None of the time	4	4
	A little bit of the time	30	30
	Some of the time	26	26
	A good bit of the time	12	12
	Most of the time	22	22
	All of the time	6	6
Did the headaches keep you from getting as much done at work or at home?	None of the time	4	4
	A little bit of the time	34	34
	Some of the time	38	38
	A good bit of the time	4	4
	Most of the time	16	16
	All of the time	4	4
How often did the headaches limit your ability to concentrate on work or daily activities?	None of the time	4	4
	A little bit of the time	20	20
	Some of the time	34	34
	A good bit of the time	16	16
	Most of the time	18	18
	All of the time	8	8
How often have headaches left you too tired to do work or daily activities?	None of the time	8	8
	A little bit of the time	34	34
	Some of the time	26	26
	A good bit of the time	10	10
	Most of the time	18	18

	All of the time	4	4
How often have headaches limited the number of days you have felt energetic?	None of the time	20	20
	A little bit of the time	30	30
	Some of the time	20	20
	A good bit of the time	14	14
	Most of the time	10	10
	All of the time	6	6
How often have you had to cancel work or daily activities because you had a headache?	None of the time	24	24
	A little bit of the time	38	38
	Some of the time	22	22
	A good bit of the time	10	10
	Most of the time	4	4
	All of the time	2	2
How often did you need help in handling routine tasks such as every day household chores, doing necessary business, shopping, or caring for others, when you had a headache?	None of the time	24	24
	A little bit of the time	34	34
	Some of the time	20	20
	A good bit of the time	2	2
	Most of the time	16	16
	All of the time	4	4
How often have you had to stop work or daily activities to deal with headache symptoms?	None of the time	22	22
	A little bit of the time	22	22
	Some of the time	30	30
	A good bit of the time	16	16
	Most of the time	8	8
	All of the time	2	2
How often were you not able to go to social activities such as parties, dinner with friends, because you had a headache?	None of the time	14	14
	A little bit of the time	28	28
	Some of the time	32	32
	A good bit of the time	14	14
	Most of the time	6	6
	All of the time	6	6
How often have you felt fed up or frustrated because of your headaches?	None of the time	16	16
	A little bit of the time	36	36
	Some of the time	14	14
	A good bit of the time	14	14
	Most of the time	10	10
	All of the time	10	10
How often have you felt like you were a burden on others because of your headaches?	None of the time	20	20
	A little bit of the time	24	24
	Some of the time	28	28
	A good bit of the time	22	22
	Most of the time	4	4
	All of the time	2	2
How often have you been afraid of letting others down because of your headaches?	None of the time	54	54
	A little bit of the time	14	14
	Some of the time	6	6
	A good bit of the time	12	12
	Most of the time	6	6
	All of the time	8	8

Table 2 shows that duration of headache attack, more than half of clients has headache attack that persist less than one day (58%), For more than one third of the sample, chronic headache interfered with the ability to deal with family, friend, and who are close to whom was a little bit of time (38%).

While the headaches interfered a little bit of time with leisure activities for (40%) of sample, (30%) of samples have some of time have negative effects on performing the daily activities.

Table (3) Statistical Differences between chronic headache item and socio-demographic

Socio-Demographic Characteristics	Items	Severity								P Value
		Mild		moderate		sever		Total		
		No.	%	No.	%	No.	%	No.	%	
Gender	Male	2	2%	50	50%	8	8	60	60%	p-value (0.0467)
	Female	0	0	20	20%	20	20	40	40%	
Age	0-15year	2	0	4	4%	2	2%	8	8%	p-value

	15-25year	0	0	18	18%	20	20%	38	38%	(0.05)
	25-35year	0	0	22	22%	0	0	22	22%	
	35-more year	0	0	26	26%	6	6%	32	32%	
Marital state	Single	0	0	20	20%	22	22%	42	42%	p-value (0.04)
	Married	2	2	50	50%	6	6%	58	58%	
Occupation	Students	0	0	16	16%	20	20%	36	36%	p-value (0.02)
	Employers	2	2	46	46%	8	8%	56	56%	
	Free worker	0	0	8	8%	0	0	8	8%	
Drug state	Using drug	2	2	64	64%	24	24%	90	90%	p-value (0.7881276)
	Not using drug	0	0	6	6%	4	4%	10	10%	
History condition	Less than day	2	2	42	42%	14	14%	58	58%	p-value (0.562)
	More than one day	0	0	28	28%	14	14%	42	42%	

This table indicates that there was a significant relationship between the items of the chronic headache and socio-demographic characteristics except the using of drugs and the duration of headache attack.

DISCUSSION :

Presents a systemically organized interpretation and reasonably derived discussion of results with the support of available literatures and related studies.

Regarding gender, the results showed that the more half of sample was males (60%). This result similar to a study done by Villalon, they found that the most percentage of gender that affected by headache were males(70%)(9). Concerning the age, the study showed that more than third of study sample was ranged from 21-30 year (38%). This result similar to - O'Brien, they found that the age ranged from 20 to 40 year (10). Concerning to the marital status, more than half of the study sample were single (58%).This results similar to Villalon, they found that more than two third of their study sample was single (61.2%) (9). Regarding to the occupational status, about more than half of the study sample was employed (56%). This result supported by Loeppke, they found in their study that great percentage of the study sample was employed (72.4%)(11). Concerning to use of drugs our study depicts that great percentage of clients who suffer

from chronic headache was using medications (90%), our results approximately similar to Villalon, who found that most of their study sample was using drugs (73.6%) (9).

Regarding to the duration of headache attack our study found that more than half of clients has headache attack that persist less than one day (58%), the study which similar to our result which produced Terwindt, they found that more than two third of their study sample have a duration of headache attack that persist less than one day (63.2%) (4). About (38%) of samples have some of time influencing the doing of home or work activities, and some of time the headaches limit the abilities to concentrate on work or daily activity about (34%) of samples.

Headaches left (34%) of samples too tired was a little bit of time, the headaches limit a little bit of time the energetic days about (30%) of samples, a little bit of time for (38%) of samples forced to cancel the work or daily activity because of headaches.

Need help to complete their routine tasks was a little bit of time because of headaches (34%). Some of the time for thirty samples forced to stop their activities because of chronic headache. For (32%) of samples were not able to attend social activities approximately was some of the time. (36%) of samples have a little bit of time felt frustrated because of headache, regarding (28%) of sample felt burden on other were some of the time. None of the time for (54%) of samples were not afraid of letting another down because of chronic headache.

Present study showed that there was a significant association between gender and chronic headache where a (70%) of clients a moderate level of chronic headache. This result similar to Steiner, et al (2003), they found a significant correlation between gender and chronic headache (76.5%).

According our study there were a significant relationship between chronic headache and age where a (70%) of clients were with moderate level of chronic headache. This study similar to (5), they found a significant correlation between age and chronic headache (80.1%).

Regarding to marital status our study found a significant association between chronic headache and marital status where a (70%) of our study sample where with a moderate level of chronic headache. our study similar to (12), they found a correlation between marital status and chronic headache (56%).

Concerning to the occupational status in our study a higher significant between chronic headache and occupation there was a (70%) of clients were with moderate level of chronic headache. This results similar to (13), they found a great correlation between occupation and chronic headache (81.6%). In our study there is no correlation between drug using and chronic headache. This study near to (14) they produced study about diagnosis and treatment of chronic headache. Our study showed there was no correlation between duration of headache attack and the chronic headache. This approximately similar to Leonardi and Mathers who founds in their study prevalence and characteristics of migraine the clients were suffered from 12 attacks per year. (15)

CONCLUSIONS :

Most of gender affected by headache were males. More than half of the study sample were single and greatest of clients who suffer from chronic headache was using

medications. Majority of the patients have headache attack lasted less than one day and that there were strong relationship between migraine and occupation.

RECOMMENDATION :

- 1- Regular monitoring of migraine will help to prevent problems and complications
- 2- The prospective studies would be needed in order to increase information about migraine
- 3- Need to produce health programs to provide awareness on migraine and how to deal with it.
- 4- Future research should also focus on ways of increasing clients' ability to cope with the stressors of migraine.
- 5- Physiological and psychological counseling to clients promote clients health status and reduce the effect of headache attack.

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