

CAUSES AND TYPES

Headaches are common and have many causes. The most common type of headache is pain from tense muscles in the head, neck, or shoulders (muscle tension headaches). These are usually of little consequence to the Life underwriter. Severe headaches of recent onset may be due to serious medical conditions such as brain tumor, hypertension, arthritis, aneurysms, bleeding inside the skull, and stroke.

CLUSTER AND MIGRAINE HEADACHES

The most common types of severe headaches encountered by the underwriter are migraine and cluster. A cluster headache is excruciating pain near one eye. The eye may become red and watery, and the nose might run. The cause is unknown. They are more common in men than women. They tend to come in cyclical near-daily clusters (often at night) with each headache lasting 30 minutes to 3 hours. After a cluster stops, the sufferer may be symptom-free for long periods of time. Treatment includes oxygen inhalation and Sumatripan.

Migraine headaches, like cluster headaches, tend to be unilateral (one-sided) though not always. They are due to altered levels of a chemical called serotonin. They can be associated with nausea and vomiting, irritability, stuffy nose, tender scalp, intolerance of light, sound or smell, confusion, sweats, etc. They can also be associated with neurological symptoms such as visual disturbances, temporary paralysis, and loss of speech, making them difficult at times to distinguish from transient ischemia attacks or small strokes. Migraines are more common in women than men. They can be triggered by menses, birth control pills, activity including sexual activity, changes in weather, stress, fasting, etc. Many foods can trigger migraines as well, such as red wine and aged cheese. Many drugs are available to both treat and prevent acute migraines.

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HEADACHES DESCRIBED AS MIGRAINE OR CLUSTER		
Cause known	Rate for cause	
Cause unknown		
 Mild to moderate, occasional, few hours duration 	Non-rated	
Not incapacitating	Non-rated	
More severe	Rate as migraine	

HEADACHES DESCRIBED AS MIGRAINE OR CLUSTER		
Onset within 6 months, consider possibility of brain disorder or tumor	Postpone	
After 6 months and stable pattern		
 No more than once a month, incapacitating not more than 2 days, on medications but not narcotics 	Non-rated	
More severe attacks such as more than once a month, incapacitating more than 2 days, multiple medications or narcotic use, temporary neurological signs or hospitalizations for migraine	Table B	
If disabled from full-time employment or with co-morbid psychological impairment or narcotic abuse	Decline	

If rated, Waiver of Premium or Accidental Death Benefit is not available.

Ask "Rx"pert Underwriter (Ask Our Expert)			
After reading the Rx for Success on Headaches, use	this for an informal quote.		
Producer			
If your client has headaches, please answer the following:			
1. Date when first diagnosed.			
2. What type of headache was diagnosed?			
☐ Migraine ☐ Cluster ☐ Tension ☐ Other			
3. Was your client incapacitated from work due to t	he headache?		
☐ Yes. If yes, when and for how long? ☐ No			
4. Please describe frequency of attacks.			
5. Please give date of most recent attack.			
6. Is your client on any medications?			
☐ Yes. (Please give details.) ☐ No			
7. Has your client smoked cigarettes in the last 12	months?		
□ Yes □ No			
8. Does your client have any other major health pro	blems (e.g., heart disease, etc.)?		
☐ Yes. (Please give details.)			