Failure to Mourn as a Possible Contributory Factor to Headache Onset in Adolescence

Ronald S. Kaiser, Ph.D., Joseph P. Primavera, III, M.A.

SYNOPSIS

Patients who have suffered from chronic headaches frequently are unable to identify a triggering physical or emotional event that precipitated the headache process. This study examined the headache histories of teenage headache patients, the majority of whom were found to be depressed, and found that personal loss occurred within 12 months of headache onset in 11 of 15 cases. Among the losses that were identified were those involving terminal illness and death of family members, separation and/or divorce in the family, or change of residence from a familiar area.

It is recommended that opportunities for dealing with feelings about their losses should be presented to patients, whether or not the patients express a need for this. Furthermore, it is recommended that patients of any age who cannot identify a triggering event prior to the onset of their headache histories should be questioned in detail about the possible correlation with personal loss.

Key words: headache, adolescence, failure to mourn (*Headache* 1993; 33:69-72)

INTRODUCTION

When health histories are given by adult patients who have suffered from chronic headache, it is quite common for them to report no recall of any triggering physical or emotional event for a headache process that may date back to childhood or adolescence. This study was designed to determine whether information about headache antecedents could be gathered by examining the life events of adolescent headache patients who did not have to deal with a lengthy time frame in order to recall their headache histories.

Previous research on a group of adolescent patients with chronic daily headache at our multidisciplinary headache center demonstrated that the majority of such patients suffered from some degree of depression in addition to their headaches. Various psychometric measures reflected this, although the clinical interview identified the

largest number--24 out of 28 patients--who met the diagnostic criteria for dysthymia or adjustment disorder with depressed mood.

While elements of depression have been noted in significant numbers of adolescents generally^{2,3} and in headache patients of various ages,^{4,5} the large number of depressed adolescent headache patients is distressing because of factors critical to their developmental stage. Adolescents are in a heightened stage of emotionality at a time when they are laying the groundwork for their future development.^{6,7} Since, by definition, depression virtually always implies a reduction in efficiency and/or activity level, one must be concerned about the possibility that adolescents may make future choices while operating from a state of pessimism and pain.

In studying pediatric headache (subjects ranged from seven to 16 years of age), Budd and Kedesky⁸ found that stress antecedents were among the common environmental factors preceding the onset of adolescent headache. Lanzi et. al.9 found that, in a sample of adolescents with various types of headache, 55% of those with chronic daily headache, 31% with classic migraine, and 27% of patients with common migraine had histories reflecting a psychologically important event associated with disease onset. DeBenedittis et. al. 10 examined the onset of the headache histories of adult chronic primary headache patients to determine whether certain life event changes could be correlated with the initiation of headache histories. In looking at four types of life event changes--entrances, exits, difficulties or arguments in interpersonal relationships, and work--DeBenedittis et. al. found that chronic primary headache patients were exposed to significantly more stresses in the year prior to headache onset than headache-free controls. This was true regardless of gender, age, headache type, frequency, or intensity. Exits, such as deaths or divorces in the family, were the stressful events that were most frequently identified by patients. Clinical descriptions from the work of Lanzi et. al.9 reflect the fact that many of the psychologically important events that proceeded headache onset among their youthful subjects also involved losses.

Co-Directors: Comprehensive Headache Center, The Germantown Hospital and Medical Center, Philadelphia, PA

Address all correspondence to: Ronald S. Kaiser, Ph.D., Comprehensive Headache Center, The Germantown Hospital and Medical Center, One Penn Boulevard, Philadelphia, PA 19144

Accepted for publication: October 3, 1992