INTRODUCTION

Although not a life-threatening disorder, chronic headache in its severe forms is associated with a number of adverse physiological, psychological, and social consequences. Chronic headache has been estimated to affect 10–30% of the population and therefore exerts a considerable impact on society.

Recent reports indicate that the cerebral ischemia associated with the prodromal phase of migraine can be equivalent to that observed in occlusive cerebrovascular disease (Mathew, Hrastnik, & Meyer, 1976; Welch, Chabi, Nell, Bartosh, Meyer, & Mathew, 1978) and in certain cases can be sufficient to result in cerebral tissue damage. The pharmacological agents used in the management of chronic headache also exert their toll on the individual. Medication is the most common treatment for both migraine and muscle contraction headache (MCH) and is prescribed to an estimated 90% of those who seek professional help (Rachman & Philips, 1975; Turner & Stone, 1979). Iatrogenic effects of drug therapy for headache can include dependency (Medina & Diamond, 1977) and a variety of physical symptoms ranging from gastrointestinal problems to circulatory disturbances. In addition, an estimated 50% of headache cases are not under the care of a physician (Waters & O’Connor, 1979).
1971). It is likely that most of these individuals are self-medicating with various over-the-counter analgesics that are safe with moderate use; as their use becomes chronic, however, a serious health risk can exist.

The social and economic costs of chronic headache also attest to the serious nature of these disorders. An early investigation by Lindhardt (1960) indicated that approximately 10% of a series of 550 cases had missed between 123 and 164 days of work due to headache. Clarke and Waters (1974) observed that 8% of a general-practice population was absent from work for a total of 191 days during the year due to headache. Philips (1977a) reported that 15% of women with severe headache (vascular and muscle contraction) listed taking time off from work as a strategy for dealing with headache. In a more comprehensive analysis, Nikiforow and Hokkanen (1979) observed that of 2,000 headache subjects from the general population, 26% reported easing their pace of work in order to manage their attacks and 47% were at times forced to lie down. This latter finding suggests that the impact of headache is reflected in more than just the number of days of work missed. If one includes reduced efficiency at work and the potential impact on family life, individual and social losses are perhaps more accurately reflected.

Despite the significance of chronic headache and the substantial literature dealing with its etiology (see Bakal, 1975; Dalessio, 1972; Lance, 1978) and behavioral treatment (see Adams, Feuerstein, & Fowler, 1980; Jessup, Neufeld, & Merskey, 1979), there has been no integrative review of both etiology and management from a biobehavioral perspective. The present chapter fills such a gap. Particular emphasis is placed on research with direct implications for the current biobehavioral management of headache.

**HEADACHE TYPES AND CLINICAL CHARACTERISTICS**

Based on early epidemiological and clinical research, the Ad Hoc Committee on Classification of Headache (1962) differentiated 15 types of headache. Although it is now recognized that psychological factors can play a considerable role in any type of persistent pain problem (Melzack, 1973; Sternbach, 1978; Weisenberg, 1977), and can therefore influence each kind of headache, there are three major headache types to which psychological factors appear to contribute: vascular headache of the migraine type; muscle contraction headache; and a combination of these two referred to as the mixed or combined headache. The present chapter will focus on these three headache variants.

Although recent findings suggest that the hypothesized pain mechanisms forming the basis for the early classification of headache are not well substantiated (Bakal, 1980; Philips, 1978), it is important that, due to the absence of adequate alternatives, the reader be familiar with