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Awareness Month

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Dear Clients,

We do hope that you enjoy the July newsletter. Please contact us with any questions. Let us know if you have any suggestions on articles for future newsletters.

Understanding Your Headaches

It's critical to identify which type of headache you suffer from-tension, cluster, sinus, rebound, or migraine-so that the correct treatment can be prescribed. In one 2004 study, 80% of patients with a recent history of self-described or doctor-diagnosed sinus headache-but none of the signs of sinus infection-actually met the criteria for migraine. And two-thirds of those patients expressed dissatisfaction with the medications they were using to treat their headaches. Here's a cheat sheet to help you put a name to your pain.

Tension headaches

Tension headaches, the most common type, feel like a constant ache or pressure around the head, especially at the temples or back of the

head and neck. Not as severe as migraines, they are not usually accompanied by nausea and vomiting, and they rarely stop someone from continuing their regular activities. Over-the-counter treatments, such as aspirin, ibuprofen, or acetaminophen (Tylenol), are usually sufficient to treat tension headaches, which experts believe may be caused by contraction of neck and scalp muscles (including in response to stress), and possibly changes in brain chemicals.

Cluster headaches

Cluster headaches, which affect men more often than women, are recurring headaches that occur in groups or cycles. The headaches appear suddenly and are characterized by severe, debilitating pain on one side of the head often accompanied by a watery eye and nasal congestion or a runny nose on the same side of the face. During an attack, sufferers are often restless and unable to get comfortable and not likely to lay down the way someone with a migraine usually does. The cause of cluster headaches is unknown, but they may have some genetic component. There is no cure, but medications can reduce the frequency and duration of attacks.

Sinus headaches

When a sinus becomes inflamed, usually through an infection, it can cause pain. It usually comes with a fever, and can-if necessary-be diagnosed by MRI or CT scan (which can both detect changes in fluid levels), or by the presence of pus viewed through a fiber-optic scope. Headaches due to sinus infection can be treated with antibiotics, as well as antihistamines or decongestants.

Rebound headaches

Overuse of painkillers for headaches can, ironically, lead to rebound headaches. Culprits include over-the-counter medications like aspirin, acetaminophen (Tylenol), or ibuprofen (Motrin, Advil), as well as prescription drugs.

Migraines

The exact causes of migraines are unknown, although they are related to blood vessel contractions and other changes in the brain as well as inherited abnormalities in certain areas of the brain. Migraine pain is moderate to severe, often described as pounding, throbbing pain. They can last from 4 hours to 3 days and usually occur 1 to 4 times per month. Migraines are associated with symptoms such as light sensitivity; noise or odors; nausea or vomiting; loss of appetite; and stomach upset or abdominal pain. When a child is having a migraine they often look pale, feel dizzy, have blurred vision, fever, stomach upset, in addition to having the above listed symptoms.

July- Juvenile Arthritis Awareness Month

Juvenile arthritis (JA) refers to any form of arthritis or arthritis-related condition that develops in children or teenagers who are less than 18 years of age. Approximately 294,000 children under the age of 18 are affected by pediatric arthritis and rheumatologic conditions. To learn more, please visit their website.

www.arthritis.org

The referral of a friend or relative is one of the most satisfying rewards of our profession. Anyone that you have contact Alliant Financial will be shown the same courtesy and professionalism that you receive.

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Alliant Financial Services, Inc. | 4717 Grand Ave. | Suite 202 | Kansas City | MO | 64112