

OMT for Headaches

The etiology of headaches is varied. Therefore there are multiple ways to deal with their root cause. The ideal OMT protocol for headaches should address the most common causes of headaches. The following protocol addresses both tension headaches via treatment of the upper thoracic and cervical musculature and migraine headaches with opening of the sinuses. Cranial-Sacral therapy is also often utilized (especially in migraines) but is not included due to the level of provider skill necessary for successful treatment. However you will see significant overlap between this protocol and the OMT for Cranial Sacral Therapy Protocol.

Address Lifestyle Modification:

You cannot address recurrent headaches without also addressing ergonomic factors.

- In women reduce purse size and weight. Recommend small purses with long straps which can be worn across the body. Encourage larger bags to be left in cars or shopping baskets
- Discuss computer use and screen height and placement. Screen should be directly ahead at eye level. The OSHA website has great free tools you can print out for your patients.

Address upper thoracic, trapezius, and Address Paraspinal muscle somatic dysfunctions.

- Utilize contralateral soft tissue kneading
- More advanced students may utilize other techniques including HVLA to upper thoracic spine

Perform a suboccipital release

- Patient lying supine with provider seated at the head of the table
- Provider curls the fingers of both hands into a C shape and places the tips of the fingers on the suboccipatal region of the patient
- The weight of the patient's head acts as a direct force
- The provider weights for a feeling of "Softening" in the suboccipital musculature. Often the patient will take a deep breath or sigh with the release

Open the confluence of sinuses at inion.

- Patient lying supine with provider seated at the head of the table
- Provider places one or two fingers on the patient's inion, supporting the weight of the patient's head
- The provider weights for a feeling of "Softening" of the inion. Often the patient will take a deep breath or sigh with the release







Open the sagittal suture

If time permits may continue to open the sagital suture by using two fingers Crossed and allowing weight of head to open

