

# Headaches are vastly undertreated among racial and socioeconomic groups

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Significant disparities exist in diagnosing and treating headaches by race, socioeconomic level, and insurance status, despite the fact that

headaches afflict nearly all racial and ethnic groups at the same rate, according to research led by UT Southwestern Medical Center faculty.

Latinos are 50 percent less likely to receive a migraine diagnosis than whites, and African American men receive the least care for [headache](#) diseases nationwide, according to a review article published in the journal *Neurology*.

The undertreatment of headaches in Black patients is consistent with the available data on undertreatment of pain in these individuals and is believed to be partially influenced by the false view that African Americans are more biologically tolerant to pain. This erroneous belief has historically led to health care disparities, the study says.

"We have to look to ourselves as [health care professionals](#) and think: 'What we can do to help eliminate these disparities and inequities?'" said Jessica Kiarashi, M.D., Assistant Professor of Neurology, lead author of the article and Chair of the Underserved Population in Headache Medicine Section of the American Headache Society.

Dr. Kiarashi worked with 15 other headache experts to review more than 50 studies of headache disorders and health care disparities.

Part of the problem is a shortage of physicians specializing in headache disorders, but major failings nationwide include systemic and institutional racism and lack of health care in certain geographic areas.

Other findings included:

- Nonwhite children were less likely to receive medication for headaches, and they were three times less likely to receive imaging than white children.
- Black children are less likely to have [emergency room visits](#) for

pediatric sports-related head injuries.

- Lower-income groups have a 60 percent higher rate of migraines.
- Uninsured adults with migraines are twice as likely, and publicly insured adults one-and-a-half times as likely, to not receive evidence-based treatment compared with commercially insured adults with migraines.

Dr. Kiarashi said there was very little data on Asian Americans.

There is also a stigma attached to headaches, Dr. Kiarashi said. Headache disorders can significantly erode a person's quality of life, making it difficult to focus in the workplace, and negative social selection of individuals with headache disorders can further disadvantage minority groups in society, she said.

**More information:** Jessica Kiarashi et al, Factors Associated With, and Mitigation Strategies for, Healthcare Disparities Faced by Patients With Headache Disorders, *Neurology* (2021). [DOI: 10.1212/WNL.00000000000012261](https://doi.org/10.1212/WNL.00000000000012261)

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