

How the VA Rates Secondary Headaches (PTSD, TBI, or Cervical Spine)

Regulatory Source: 38 CFR § 4.124a – Diagnostic Code 8100

VA Source: <https://ecfr.gov>

Summary:

Headaches are often secondary to PTSD, traumatic brain injury (TBI), or cervical spine strain. Ratings depend on how often attacks occur and how severely they impact work or function. Prostrating means the need to lie down and stop activity.

VA Rating Table (Prostrating Attacks):

Rating	Explanation
0%	Headaches occur but are infrequent and not prostrating. Minimal disruption to daily activity.
10%	Prostrating attacks averaging one every 2 months over several months. Occasional work interference.
30%	Prostrating attacks averaging once per month. More frequent disruption to function or employment.
50%	Very frequent, completely prostrating, and prolonged attacks productive of severe economic inadaptability.

Required Evidence:

- Diagnosis of headaches or post-traumatic headaches
- Primary service-connected condition (PTSD, TBI, or neck strain)
- Headache log documenting frequency and severity (with dates)
- Medical records showing missed work, ER visits, or medication escalation
- Buddy statements or employer letters confirming prostrating episodes

Pro Tip:

Use a headache diary with specific dates, triggers, and how long you were down. If caused by PTSD flashbacks, neck strain, or concussion history, document the causal link for secondary service connection.