Information for Patients

Headaches in Children

Did you know?

- Headaches can be a common problem in children.
- Somewhere between 4% and 10% of children have migraine headaches.
- Many adults with headaches started having their headaches as children, with 20% reporting the onset before age 10.
- Most headaches in children are benign - meaning they are not symptoms of some serious disorder or disease.
- Migraine headaches often run in families, so information on other family member’s headaches are important.
- Headache may interfere with participation in activities and school and can be a significant health problem.

What is a primary headache?

When to call the doctor about your child’s headaches?

Why do you need to know what kind of headache your child is having?

What is a migraine headache (episodic)?

What can we do to prevent my child’s headaches?

What should I do if my child gets a headache?

How do you know your child “really” does have a headache?

What is a primary headache?

Headaches can be divided into two categories, primary or secondary.

- Primary refers to headaches that occur on their own and not as the result of some other health problem. Primary headaches include migraine, migraine with aura, tension-type headache, and cluster headache.
- Secondary refers to headaches that result from some cause or condition, such as a head injury or concussion, blood vessel problems, medication side effects, infections in the head or elsewhere in the body, sinus disease, or tumors. There are many different causes for secondary headaches, ranging from rare, serious diseases to easily treated conditions.

When to call the doctor about your child’s headache?

You should consult your family doctor if headaches are frequent or severe or include unusual symptoms. Your physician may ask you to describe features of your headache (for example, the location of the pain, pain severity, and any other symptoms associated with the headache attack). To rule out possibility of secondary headache, the physician may decide to order special tests, including a CT scan or an MRI. Worrisome symptoms that should be brought to your doctor’s attention include:

- Headaches that wake a child from sleep.
- Early morning vomiting without nausea (upset stomach).
- Worsening or more frequent headaches.
- Personality changes.
- Complaints that “this is the worst headache I’ve ever had!”
- The headache is different than previous headaches.
- Headaches with fever or a stiff neck.
- Headaches that follow an injury.

Why do you need to know what kind of headache your child is having?

As you may be aware, children suffer from a number of different types of headaches. It is important to rule out any dangerous cause for their headache that may classify it as a “secondary headache.” It also is important to understand what type of headache your child has because it will impact treatment, level of disability, and lifestyle factors that will impact how to take care of a child with headaches. For example, a child with migraine may have a common factor that precedes their attack, such as fasting or low blood sugar. Therefore, it is important to know how to avoid conditions that may increase the risk of an attack and have medications that are specific for the headache being treated.

What is a tension-type headache (episodic)?

This type of headache has also been called a tension headache, muscle contraction headache, stress-related headache, and “ordinary headache.” These headaches can be either episodic or chronic and may include tightness in the muscles of the head or neck.

- Tension-type headache can last from 30 minutes to several days. Chronic tension headaches may persist for many months. The pain usually occurs on both sides of the head, is steady and nonthrobbing. Some people say “it feels like a band tightening around my head.” The pain is usually mild to moderate in severity. Most of the time the headache does not affect the person’s activity level.
- Tension-type headaches are usually not associated with other symptoms, such as nausea or vomiting. Some people may experience sensitivity to light or sound with the headache, but not both. Muscle tightness may be noticed by some patients but do not always have to occur.

What is a migraine headache (episodic)?

Migraine headaches are recurrent headaches that occur at intervals of days, weeks or months. There may or may not be a pattern to the attacks—for example, teenage girls may tend to have attacks associated with their menstrual cycle. Migraines generally have some of the following symptoms and characteristics:

- Untreated, they can last from 1 to 72 hours in children. Sleep or medical treatment can reduce this time period.
- Headache starts on one side of the head. This may vary from headache to headache and in children, they may start in the front or in both temples.
- Throbbing or pounding pain during the headache.
- Pain is rated as moderate to severe.
Pain gets worse with exertion. The pain may be so severe that it is difficult or almost impossible to continue with normal daily activities.

Nausea, vomiting, and/or stomach pain commonly occur with the attacks.

Light and/or sound sensitivity is also common.

Pain may be relieved with rest or sleep.

Other members of the family have had migraines or "sick headaches."

Auras, or a visual disturbance, may occur in some children between 5-60 minutes prior to the headache. These auras are recognized as blurry vision, flashing lights, colored spots, or even dizziness.

**What can we do to prevent my child's headaches?**

Taking good care of your child can decrease their frequency and severity of his/her headaches:

1. **Drink plenty of fluid (4-8 glasses per day)**
   - Caffeine should be avoided
   - Sports drinks may help during a headache as well as during exercise by keeping sugar and sodium levels normal

2. **Regular and sufficient sleep**
   - Fatigue and over exertion can trigger headaches
   - Most children and adolescents need to sleep 8 to 10 hours each night and keep a regular sleep schedule to help prevent headaches

3. **Eat balanced meals at regular times**
   - Skipping meals can cause low blood sugar, hypoglycemia, which can trigger a headache
   - Avoid foods that trigger headaches in your child

4. **Minimize stress and overcommitments**
   - Avoid overcrowded schedules or stressful and potentially upsetting situations

5. **Follow prescribed treatment plan**
   - Also, if your child’s doctor prescribed daily medication to reduce headache frequency (call preventive or prophylactic medication), remember to have him/her take it every day, whether he/she is having headaches or not

**What should I do if my child gets a headache?**

1. Have your child take pain medication for his/her headache as soon as they feel pain. He/she may be taking over-the-counter medication or prescription medication when they get a headache. Follow the doctor’s instructions in using the medication and treatment plan.

2. Keep a record of your child’s headaches. Write down everything that might relate to your child’s headache (foods, odors, situations), how long it lasted, and how much pain the headache caused.
   a. Learn the sings and symptoms that might be associated with a headache so you can recognize an oncoming episode.

3. Help teach your child on what to do when a headache starts. Your child needs to be able to treat his/her headaches at school and at home.
   a. Your child should not be afraid to tell you about their headache.
   b. Your child will need to know what to do at school, so you may need to work with the nurse to establish the treatment plan that the physician has established for your child. This may require that both you and the physician get involved in working with the school to implement a successful treatment plan.

**How do you know your child “really” does have a headache?**

Recognizing the signs and symptoms of a headache will help you and your child take control of them. For example, we can see a child may be getting a headache or has a headache because:

- The sit quietly in a chair, bed or sofa and do not watch TV
- They do not want to exert themselves
- They may fall asleep at an unusual time
- They may have nausea, vomiting, or other stomach-related symptoms
- Light and noise may bother them
- They may seem lethargic or fatigued

Looking for signs of headache will help you and your child realize that the disability associated with headache is real and should not be dismissed.