

HEADACHES IN CHILDHOOD

Headaches are extremely common in childhood. The majority of headaches are harmless, although they may cause an interruption in the child's functioning. This pamphlet will discuss common pediatric headaches.

MIGRAINE HEADACHES

Migraines are often described as pounding or throbbing. They may be predominantly on one side or the other, and may switch sides. They start out as small headaches and grow in intensity over a few minutes to a few hours, and may be accompanied by nausea and vomiting. Some people have an "aura" or a warning sign that the headache is coming, such as spots in the eyes. Migraines are usually relieved by sleep and may be worsened by noise or bright light. Migraine headaches commonly run in families.

Some patients have migraines triggered by certain things: menses, caffeine, drugs, alcohol, irregular sleeping habits, skipping meals, stress, or foods such as aged cheese, chocolate, MSG, red wine, or nitrates (lunchmeat preservatives). Minor Trauma may also bring on a migraine. Often, there is no specific trigger identified.

Treatment depends upon frequency and intensity. Tylenol or ibuprofen relieves most migraines, but headaches that are frequent, severe or prolonged and are affecting quality of life require further evaluation and treatment. Medications typically referred to as "triptans," can reduce the severity and length of a migraine headache when taken early in its course. These medications are used only when a headache occurs. Other treatments are taken daily to prevent migraines. There are multiple medications that can be prescribed for migraine prevention and your provider can discuss the options. There are also over the counter treatments (OTC), such as vitamin B2 (riboflavin) that may help. We recommend speaking to your provider before starting any OTC treatment. Lastly, techniques such as biofeedback may be helpful.

TENSION HEADACHE

Tension headaches are described as squeezing or band-like in the front of the head and may extend to the back of the head or neck area. They are common in school-aged children. The exact cause is not clear. Studies have shown that people who have tension headaches have a heightened sensitivity to pain that is worsened by stress and emotions. The majority of episodic tension headaches are responsive to acetaminophen (Tylenol) and ibuprofen (Advil, Motrin). For chronic tension headaches, prescription medications can be used.

OTHER HEADACHES

Serious problems with the brain may result in headaches, although they are uncommon.

Hemorrhages are extremely sudden in onset and extremely severe – “the worst headache of my life.” The person may be fine one moment and overcome the next. This headache requires emergency attention.

Brain tumors cause headaches as well. Straining or bending may bring on this type of headache. (Any headache can be made worse by straining or bending.) Vomiting, especially in the morning, may occur. The headache may be at its worst in the morning and get better as the day goes by (the opposite of most headaches) and lying down may make the headache worse.

Meningitis may cause headaches and any headache with fever and/or stiff neck should be evaluated urgently.

SUMMARY

The overwhelming majority of childhood headaches are harmless. If headaches are a problem for your child, please our office for an appointment.