

Manhattan Headache & Neurology



Children and Head Pain: Reading the Early Signs of Migraine

By: Audrey Halpern, MD

Board-certified by the United Council for Neurologic Subspecialties and the American Board of Psychiatry and Neurology

Executive Director of Manhattan Headache & Neurology

Clinical Assistant Professor of Neurology at New York University School of Medicine

Children and Headaches

One out of four children will have complained of headache pain by the age of 15.* What parents might not know is that this common gripe, often dismissed with a painkiller and a nap, may actually be the beginning of a lifetime of much harder to manage migraine pain.

Ten per cent of adolescents are victims of migraine pain and 70% of those adolescents will continue to have some degree of migraine pain for the rest of their lives. This debilitating condition can negatively impact a child's day to day activities, affecting their school performance as well as social and personal growth. Children who suffer from migraines miss approximately two to three times more school days, have more difficulty concentrating on schoolwork and miss out on more extracurricular activities than children without migraines.

Diagnosis and Symptoms

Migraines can be difficult to diagnose in adolescents because parents, and even doctors, can misread signs and symptoms. Symptoms present themselves differently in children than in their adult counterparts, so classic migraine indicators are not necessarily applicable to pediatric migraine cases.

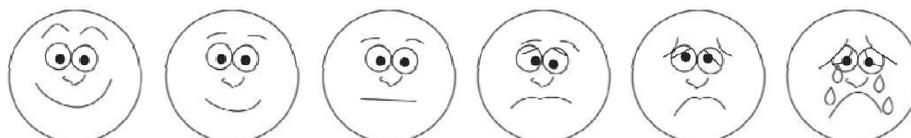
Children typically have shorter migraine attacks (sometimes as little as an hour) and feel pain on both sides of their head (bilateral). Their adult counterparts can experience migraine attacks for days at a time and suffer pain most often only on one side of the head (unilateral). Children may also have difficulty describing the type and extent of pain they are feeling, leaving out words like "throbbing" or "pulsing" which are key descriptors for adults complaining of migraine pain.

Being aware of a child's behavior is vital when looking for signs of migraine. For example, refusal to eat may be due to nausea and an insistence on turning off the lights during a headache is likely due to photophobia, or sensitivity to light, both signs that the headache may be a migraine.

In young children, episodes that include cyclic vomiting, abdominal pain and vertigo that last for hours or days may be indicators that the child will develop migraines later in life. Other neurological deficits such as abnormal eye and neck movements and weakness on one side of the body can be due to migraine and should be treated as an emergency until otherwise advised by the patient's doctor.

If a child is having a hard time describing the kind of headache pain he or she is feeling, it may be beneficial to have them draw a picture or rate their pain using a tool like a face scale to better assign severity.

Faces Pain Scale



0	2	4	6	8	10
Very happy, no hurt	Hurts just a little bit	Hurts a little more	Hurts even more	Hurts a whole lot	Hurts as much as you can imagine (don't have to be crying to feel this much pain)

Steps to a Solution

Addressing lifestyle factors such as diet, exercise and sleep habits can help reduce the frequency of migraine pain and cultivate a lasting, healthy lifestyle in children at an early age. Other approaches to migraine management include relaxation techniques, talk therapy, biofeedback and the use of natural supplements. While there are prescription medications to help manage pain, most are not approved by the FDA for use in children and the decision to administer such medication must be undertaken with serious consideration and care by the treating physician and family.

With careful attention to a child's complaints and behavior, pediatric migraines can be diagnosed, treated and managed quickly and successfully.

*<http://www.childrenshospital.org/az/Site986/mainpageS986P0.html>.

Common Migraine Triggers in Kids:

1. Weather changes
2. Lack of sleep
3. Skipping meals, particularly breakfast
4. Eating foods which contain nitrates or MSG
5. Exercise can induce migraines in some people, so watch for migraines during or after after-school sports.

Source: Manhattan Headache & Neurology

When to Seek Medical Attention:

1. Head pain persists more than 1 hour and is not relieved by OTC pain medicine or a nap.
2. Head pain is combined with hours of vomiting, vertigo or loss of appetite.
3. Head pain is associated with stiff neck, fever, lethargy or any neurological symptoms such as paralysis, funny eye movements, difficulty speaking or clumsiness/loss of balance.

Source: Manhattan Headache & Neurology

Tips for Avoiding Headache and Migraine:

1. Work on good sleep hygiene with kids, emphasizing consistent bedtimes every night, even on weekends, and same wake up times, too.
2. Eat a healthy, well-balanced breakfast, lunch and dinner each day, along with offering nutritious snacks. Avoid foods, such as cured meats and hot dogs, which contain nitrates and MSG.
3. Wearing helmets when engaging in risky sports not only helps reduce the risk of serious head injury, but also of milder head injuries which can trigger migraines as well as other types of headaches.

Source: Manhattan Headache & Neurology

Children Are More Likely to Suffer Migraines If:

1. One or both parents suffer from migraines.
2. Siblings or even grandparents, uncles, aunts or cousins suffer from migraines.
3. They have suffered from a head injury or other neurological conditions such as epilepsy.

Source: Manhattan Headache & Neurology

About the Author:

After graduating from the University of Pittsburgh School of Medicine with her MD, Dr. Audrey Halpern completed an internship in internal medicine at Yale University, along with her neurology residency training at Yale. Following her stay at Yale, she completed fellowship training in headache medicine at the Jefferson Headache Center at the Thomas Jefferson University Hospital in Philadelphia.



A Clinical Assistant Professor of Neurology at New York University School of Medicine, Dr. Halpern is board-certified in headache medicine by the United Council for Neurologic Subspecialties, and board certified in neurology by the American Board of Psychiatry and Neurology. With a belief in a combination of treatments for migraines such as behavior modification, conventional medication and holistic approaches, Dr. Halpern offers unique, advanced methods to treating and preventing migraines. Dr. Halpern practices concierge style care, offering in-practice visits at Manhattan Headache and Neurology in addition to house calls. Manhattan Headache and Neurology is located at 35 East 35th Street, Suite 206, New York, NY 10016, and Dr. Halpern can be reached at 646-648-3793, or through her website, www.ManhattanHeadache.com.