



NATIONWIDE CHILDREN'S
When your child needs a hospital, everything matters.

Helping Hand™

Health Education for Patients and Families

Headaches: Migraines

Migraines are severe headaches with specific symptoms that follow a pattern. They are common in children and can start at any age. Migraines tend to run in families.

If you think that your child has migraines, the health care provider will do a thorough exam, ask about symptoms, and ask if any family members have a history of frequent headaches. Other tests may also be ordered to help plan your child's treatment.

Stages of migraine headaches

The pattern that migraines follow is called stages. A child may feel some of the following symptoms in each stage before moving to the next stage.

- Stage 1: prodrome or warning phase – can last hours to days
 - tiredness
 - yawning
 - nausea
 - mood changes
- Stage 2: aura – 1 in 5 children will have an aura; can last for 5 minutes up to 1 hour
 - dizziness
 - numbness
 - weakness
 - confusion
 - seeing spots
 - squiggly lines
- Stage 3: migraine attack – severe pain can last 4 hours to 3 days
 - vomiting
 - nausea
 - severe throbbing head pain
 - sensitivity to noise and light
- Stage 4: postdrome or recovery – may last 1 to 2 days
 - tiredness
 - mood changes
 - decreased appetite

Triggers

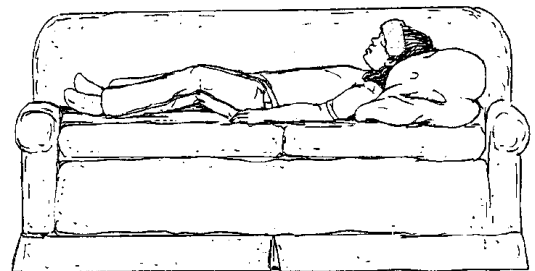
Things that may bring on a migraine are called triggers. They can be different for each child. Examples of triggers and their causes are:

- hormonal changes

- inadequate nutrition:
 - not drinking enough fluids
 - skipping meals or poor eating habits
- disrupted sleep:
 - too much or too little sleep
 - irregular sleep schedule
 - too much exercise
- good or bad stress:
 - problems at school or work
 - problems with friends or family members
 - doing too many extra activities
 - sad feelings all the time (depression)
 - frequent worry (anxiety)
 - a major change in life like moving to a new home or school
- environmental:
 - bright or flashing lights
 - bright sunlight, glare
 - certain noises
 - changes in weather, barometric pressure, altitude, high or very low humidity, or extremes in heat and cold
 - strong smells from perfume, tobacco, smoke, gasoline, cleaning products, chemicals, or foods
- certain foods and drinks:
 - caffeine (soft drinks, coffee, tea, chocolate, energy drinks)
 - meats prepared with nitrates (bacon, pepperoni, hot dogs, bologna)
 - food dyes
 - monosodium glutamate (MSG) sometimes used in Asian foods
 - baked goods with yeast
 - some fruits (citrus, fruit juices, bananas, pineapple, raspberries)
 - yogurt and sour cream
 - aged cheeses (cheddar, Gruyere, Brie, and Camembert)
 - artificial sweeteners (aspartame)

Treatment

- Have your child lie down or go to sleep until their headache is gone (Picture 1).
- Place a cool or warm compress, whichever works best for them, on their forehead.



Picture 1 Sleep or rest may relieve headache pain.

- If needed, give prescribed medicine as early as possible, at the first sign of a migraine coming on.
Your child's health care provider will tell you the dosage of all medicines to give.
- You can give over-the-counter pain medicines like ibuprofen (Motrin[®], Advil[®]), acetaminophen (Tylenol[®]), or naproxen (Aleve[®]). Read the label on the bottle to know the right dose and right timing for your child.
 - To prevent medication overuse rebound headaches, do not give pain medicine more than 2 days each week.
 - Do not give aspirin or other medicines unless the health care provider says it is safe to do.
 - Do not give over-the-counter pain medicines more than 2 days a week. Taking them too often can cause medication overuse headaches. These are headaches that come back sooner, more often, and are more painful. If your child needs medicine more frequently, talk to their health care provider.

Prevention

- Your child should develop a regular sleep schedule and get enough rest.
- Try to keep your child on a daily routine at school and at home.
- Serve well-balanced meals at regular times. Do not let your child skip meals.
- Remind them to drink water throughout the day and carry a water bottle at school.
- Encourage them to exercise regularly, at least 3 times a week
- Keep stress to a minimum. Good communication between parents and children is important so that you are aware of what is troubling your child.
- Ask your child's health care provider about alternate therapies that may help prevent or lessen a headache, such as biofeedback training, relaxation techniques, massage therapy, acupuncture or by seeing a counselor.
- Certain vitamin and mineral supplements help some people. Ask your health care provider about which ones are safe for your child to take.

DATE	TIME OF DAY	HOW LONG HEADACHE LASTED	DESCRIPTION OF HEADACHE (Describe the headache, including any other symptoms that occurred with the headache. Make a note of what activity the child was doing when the headache began and list any treatment that helped.)	PAIN LEVEL 1 to 10 (1 = mild, 10 = severe)
12/19	2:30 pm	1 hr	Stress during setting off school bus; took a nap	5
12/15	7:30 am	30 min	Taking	5

Follow-up appointments

- Keep a record of your child's headaches over a period of time (Picture 2). This will help the health care provider decide on the best plan of treatment for your child. Use the Headache Record on this handout, a calendar, or a headache tracking app.
- Bring the headache record to all follow-up visits.

Picture 2 Keep a record of your child's headaches and bring it to each follow-up visit.

When to call the health care provider

Your child's health care provider may need to make treatment changes if:

- migraines occur more than twice a month.
- migraines keep your child from doing normal activities or interfere with school or play.
- headaches keep coming back and get worse.
- the place where the headache starts changes.
- headaches occur early in the morning.
- they do not go away after a week, after a head injury.
- they frequently wake the child from sleep.

When to get emergency care

Take your child to an emergency room **right away or call 911** if your child has:

- Sudden, worst headache in your child's life, especially if the child has double vision (sees 2 things at the same time), seems confused, is hard to wake up, or has frequent projectile vomiting (vomit shoots out of the mouth).
- Headache that started with a high fever or severe illness and is getting worse.

