What investigations can be done to identify the cause of my child's headaches?

When the doctor meets you and your child he will discuss with you the pattern of your child's headache, he will also carry out a general medical examination. Most headaches in children do not require further investigation.

Who can I contact for more information on childhood headaches?

•GP

•Local Hospital

•Migraine Association of Ireland.

If your child's symptoms change or worsen please contact your local GP.



How can I help manage my child's *headaches?*

•The goal of treatment is to control symptoms and prevent further attacks however there is no cure for migraine

•Keeping a diary of headaches may help to identify patterns and triggers for pain so triggers can be avoided.

•Pain killers such as ibuprofen and paracetamol may be effective if taken at the first sign of pain. (avoid aspirin based preparations)

•Keep well hydrated particularly while on sun holidays.

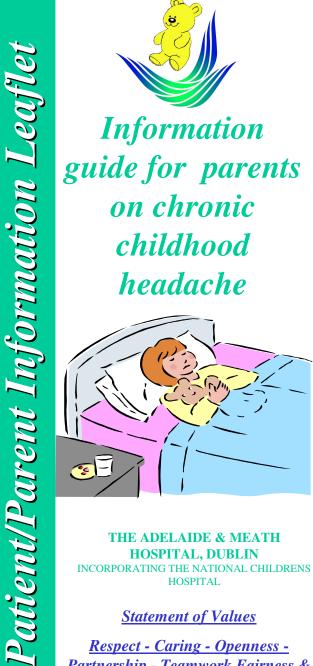
•Resting in a dark room can relieve pain.

•Alternative therapies for relaxation may help.

•Preventative medication can be given if episodes are very frequent or severe.



Developed by Dr David Coghlan (Consultant paediatrician) & Ann Connolly (CNS Neurology).



THE ADELAIDE & MEATH HOSPITAL, DUBLIN INCORPORATING THE NATIONAL CHILDRENS HOSPITAL.

Statement of Values

Respect - Caring - Openness -Partnership - Teamwork Fairness & **Equality**

Are headaches common in childhood/adolescence?

Headache is a common problem for children & adolescents. Headache occurs in up to 90% of school going children. Migraine is the most common acute and recurrent headache syndrome in children followed by tension and unclassified headaches.

<u>What are the possible types of</u> <u>headache?</u>

<u>Migraine</u> occurs in 10% of school age children in Ireland. The onset of migraine often occurs earlier in boys than girls (average for boys is 7 years, average for girls is 10 years). Migraine is a recurrent pulsating moderate to severe headache that can last two to twenty four hours. It may be associated with vomiting, nausea, abdominal pain and may be relieved by sleep.



<u>Tension</u> headache occurs in most people at one time or another. 3% of people suffer recurrent almost daily tension headache. Tension headache is characterized by a bilateral pressing tightness over the skull. It can last from 30 minutes to several days. It is not as severe as migraine and is not accompanied by vomiting.

Other headaches varieties include:

- •Cluster headache,
- •Caffeine withdrawal headache,
- •Chronic daily headache

•Analgesic rebound headache which is caused by overuse of pain medication.

<u>What can trigger my child's</u> <u>headaches?</u>

•Sleep disruption. Lack of sleep or oversleeping.

•Missed meals

•Certain foods may trigger headache i.e. caffeine cheese, chocolate and citrus fruits.

•Anxiety & Stress

•Hormonal changes such as menstrual cycle in girls.

- •Alcohol may be significant in adolescent headache.
- •Excessive physical exercise or physical overtiredness.

•Overuse of pain medication