

# Let's Talk About...

## Migraine Headaches

### What is a migraine headache?

Almost everyone experiences headaches, including children. Most headaches cause a dull pain around the front, top, or sides of the head. **Migraine** headaches are different. Migraines in children are headaches that usually last several hours, produce nausea, vomiting and loss of appetite, and are relieved by rest or sleep.

Often, bright lights and loud sounds make them worse. A migraine headache can be pounding or throbbing. It can be constant, and movement can make it worse. Children with migraines can have temporary problems with eyesight, speech, sensation, or movement of their body. Migraines can be disabling, and children who get them often need to stay home from school and skip sports or other activities until they feel better.

### What causes migraine headaches?

The brain cannot “feel” pain. The brain does not have nerve endings (pain sensors) like we have in our fingers and toes. However, there are pain sensors in the blood vessels inside and around the brain and in the tissues that cover the brain. Most doctors believe that migraines happen when blood vessels send pain signals to various areas of the brain.

**“Triggers” can bring on a migraine attack.**

**Common triggers are:**

- Stress
- Too much or too little sleep
- Missing or delaying meals
- Menstruation
- Certain foods like cheese, chocolate, MSG, caffeine, aspartame, nuts, pizza, and processed meat
- Weather changes
- Travel



**All migraines start differently.** Some children say they don't feel right. Light, smells, sounds, or physical activities may bother them and make them feel worse. They may become nauseated and vomit. Some have muscle weakness, lose their balance and stumble, or have trouble talking. Some children have an “aura” about 10 to 30 minutes before a migraine starts. An aura is a warning sign that a migraine is about to start. Blurred vision or seeing spots, colored balls, jagged lines, or bright lights are the most common auras. Some children say they smell something funny.

### How will the doctor diagnose my child's migraines?

A pediatric neurologist will evaluate your child. This includes your child's medical history and a physical examination. If your child's examination is normal and migraines “run in the family,” no additional testing is usually needed. If the headaches are unusual in their location or your child's examination is abnormal, blood or urine testing and brain imaging (usually MRI) may be needed.

## How will the doctor treat my child's migraines?

The first step is to make some healthy lifestyle changes. Without these basic health measures, other treatments may not work. Your child should:

- **Drink lots of liquids, and eat a balanced diet with healthy meals 3 times a day.**
- **Take part in an enjoyable physical activity for at least 30 minutes a day.** Some examples are walking, hiking, playing sports, or swimming.
- **Get the proper amount of sleep** (minimum of 8 hours). This is important. Lack of proper sleep often triggers migraines.
- **Avoid more than 2 hours of non-educational screen time** (movies, video games, texting, etc).

The next step is to recognize and avoid triggers that cause your child's migraines. Sometimes, triggers are not obvious and cannot be identified. To help figure out what triggers your child's migraines, doctors often ask parents and older kids and teens to keep a migraine diary. This will show you when migraines happen, how long they last, and what may trigger them.

Occasional migraines happen fewer than 4 times a month, last less than 24 hours, and do not interfere with school attendance or other activities. These can be treated with medicine. These medicines work best when given as early as possible after the headache starts. The longer a headache lasts, the harder it is to stop. Ask your child's primary care doctor to provide a letter for the school so your child can receive rescue medicine as soon as the migraine starts.

It's important to remember that different things work for different people. You can use non-medication treatments or complimentary treatments along with medicine. These may help treat or minimize the migraines. These include relaxation training, massage, physical therapy, biofeedback, self-hypnosis, and imagery therapy.

Most migraines can be managed at home. If a migraine does not improve with rescue medicines, the goal will be to get your child to sleep. Your child should lie down in a darkened, quiet room.

### Your child should see a doctor if:

- Your child has headaches that wake them from a deep sleep.
- Your child develops problems with vision, personality, coordination, or school performance.
- Your child has a sudden headache that is the worst ever.
- Your child has depression or anxiety.

Rescue plans typically start with over-the-counter medicines. Over-the-counter means you can get the medicine without a doctor's prescription. Your pediatric neurologist will help you and your child's primary care doctor make a plan. You can use this plan to treat migraines that do not respond to usual treatment. This should help you so you don't have to call your child's doctor or bring your child to the emergency room.

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