



Headaches in children

Headaches are common in children. Most are simple tension headaches which resolve on their own.

Causes

Tension headache	Brain tumours
Migraine	Meningitis
ENT infection	Encephalitis
Analgesia induced	CO poisoning
Visual problems	Emotional stress
Raised ICP	

Tension Headaches

Characteristics:

- Very common in children
- Band-like pattern
- Mild, achy pain
- Gradual onset/ resolution
- Symmetrical

Symptoms may be non-specific in young children (e.g. change in behaviour/ tiredness)

Management is with reassurance, painkillers, avoiding dehydration, regular meals and reducing stress

Infection

Infections in children can cause headache (URTI, Otitis media, Sinusitis, Tonsillitis)

The headache should resolve as the child gets better

Sinusitis tends to cause facial pain and tenderness over the affected sinus

Recurrent headache / migraine

Perform fundoscopy

Check blood pressure

Refer if headaches are worse when upright and relieved by lying down

Refer children with recurrent migraine if they have red flag features or if it is greatly affecting their life

Don't forget emotional stress can be a cause

Ask about analgesia use to exclude medication-overuse

Migraines

Occur in attacks which follow a typical pattern

There are several types

Children are at higher risk of abdominal migraines than adults (can precede development of more typical migraines)

Characteristics:

- Unilateral, throbbing headache
- Take longer to resolve than tension headaches
- May have additional symptoms (e.g. aura, photophobia, abdominal pain)

Management involves, rest, fluids, painkillers and sometimes sumatriptan and antiemetics

Frequent, debilitating attacks may require prophylaxis

- Propranolol
- Pizotifen
- Topiramate

'RED FLAG' symptoms in children <12 years

If any of the following are present refer immediately for neurological assessment:

- Wakes them at night
- Present on waking in the morning
- Progressively worsens
- Triggered or aggravated by coughing, sneezing or bending down
- Fever and features of meningism
- Vomiting
- Ataxia
- Change in conscious level or pervasive lethargy
- Within 5 days of a head injury
- Squint or failure of upwards gaze
- Child <4 years old

