Headache is a common complaint in children and the source of a great deal of worry for parents. Every parent’s worst nightmare is that the child’s headaches are being caused by a brain tumor or other bad process inside the head. Thankfully, such awful things are rarely the cause of headaches in children.

In 2009, researchers at Children’s National Medical Center in Washington D.C. found that 17 percent (one in six) children age 4 and older had frequent or severe headaches. In fact, migraines are among the top five conditions that affect children, right up there with asthma, allergies, obesity, and depression. Even infants and toddlers can get migraines, though it is difficult to determine this in pre-verbal children.

Headaches become increasingly more frequent as childhood advances. One-half of teenagers will at least sometimes suffer from headache. Recurring forms of headache – such as tension-type or migraine – occur in about 5% of 7-year-olds and increase to about 15% of 15-year-olds. Curiously, before puberty boys are affected more frequently than girls, but after puberty, headaches occur two to three times more frequently in girls.

Thankfully, as children’s brains change with age, it’s likely that their pain will go away. Young children with migraines seldom have migraines when they are young adults. Also good to know: When a child gets a headache, it tends to go away more quickly than it does for an adult.

What Causes Headaches?

Headaches can develop for lots of reasons. Of course they often come with illnesses such as the common cold or flu. But recurring headaches are usually a migraine or tension-type headache. Either kind can last from 30 minutes to days at a time.

Most headaches are NOT caused by something bad, like cancer or brain infection. Headaches are classified as either primary (migraines, tension-type) or secondary (cold, flu, sinusitis, fever). Almost all recurring headaches are found to be one of the primary causes.

What Is A Migraine?

Migraines occur when overly stimulated brain cells cause blood vessels to dilate (swell) and the membranes covering the brain become inflamed, which then sets off pain signals in the head.

What Is A Tension-Type Headache?

Tension-type headaches are related to muscles tightening in the neck or scalp.

How Do You Tell Them Apart?

Surprisingly, this can be difficult. Both types of headaches tend to cause pain on both sides of the head, whereas adults generally feel migraines on only one side.

A tip-off that your child may be having migraines is her family history. Migraines have a genetic basis, and often one or more close relatives suffer from migraines, or did so as a child. Children who frequently get carsick or can’t tolerate spinning are also prone to migraines.
Stress can be another factor in both types of headaches. However, fluctuations in weather, bright light, loud noises, lack of sleep, lack of adequate fluids, and skipping meals are all potential triggers for a migraine, but not for a tension-type headache.

**When Do I Schedule An Appointment?**

If your child is having headaches **more than once a week**, or if her headaches are **causing her to miss school or play dates**, it’s time to schedule an appointment.

Ahead of the appointment, keep a headache diary. Write down what time of day the headaches occur, what day of the week, how long they last, and what medication is given and whether it helped ease the headache. Also note if your child experienced any nausea or vomiting, or any vision changes, and whether your child needed to sleep the headache off.

More worrisome signs associated with headache that necessitate consultation with a physician include:

- Headaches that are recurrently waking the child at night
- Headaches that are getting worse day by day or week by week
- Headaches associated with persistent vomiting
- Headaches that occur consistently in just one location

Call your doctor ASAP, or go to the emergency room if your child has a:

- Sudden headache associated with fever (temperature >100.4F or 38.0C)
- Headache associated with a stiff neck
- Headache after head injury, especially if your child begins to vomit repeatedly, has difficulty with balance, or becomes confused.
- Headache with difficulty speaking, numbness, and/or eye-movement problems
- Headache followed by a seizure

**What Can I Do When My Child Has A Headache?**

Whatever type of headache your child has, you can lessen the pain with these quick steps:

- Give her **ibuprofen** as soon as the pain begins, or better still when your older child reports feeling a headache coming on (some children experience what are known as **aurae**, an early warning sign before the headache begins, such as seeing lights or lines, or feeling tingling in the arms or face). Acetaminophen (Tylenol™) is not generally effective for headache. Remember never to give aspirin to children under the age of 15 years.
- Serve her **eight ounces of a sports drink** (such as regular, sugared Gatorade™, or Powerade™). Part of what happens during a migraine is the blood vessels dilate and leak. The sugar in these drinks helps the salt and water get absorbed, and the salt helps to keep the water inside the blood vessels. If you don’t have one of these drinks handy, fruit juice (orange juice is best) is a good substitute. Even cola may help, because caffeine constricts the blood vessels.
- Encourage her to **take a nap**, in a cool dark place. For many children, sleep alleviates the headache, though this becomes less certain as they get older.
- If she can’t sleep, **distract her** with books, games, puzzles, or toys.
- **Try to take away her fear.** Tell her “I know what’s happening to your head, and I don’t want you to worry, I know how to fix it.” Reassure an older child by reminding her that treatments for her headaches have worked in the past, and will work again.
Unless she is having a migraine, do NOT keep your school-aged child home from school due to a headache. This sets a precedent, and a bad pattern of using minor discomforts as an excuse to avoid school, or to create fictional pains as an avoidance mechanism. If you suspect that your child is doing this, she may benefit from evaluation and counseling with a mental health professional, after her physician has ruled out serious medical causes for her pains.

**Can Anything Be Done To Prevent Headaches In My Child?**

Yes, lots. One of the most important ways of reducing the number and severity of headaches is to get adequate sleep. Most American children do not. Children under age 5 years usually need 10-12 hours of sleep each night, children aged 5 to 12 years need 9 to 11 hours, and teenagers need 8 to 9 hours.

If your child has a television or video game player in his bedroom, remove it. Excessive bedroom screen time is far and away the leading cause of insomnia in children. And turn off all screens at least 30 minutes before bedtime.

Other ways of reducing or preventing headaches include:

- **Avoiding caffeine** (coffee, tea, iced tea, caffeinated sodas, and energy drinks). While a few sips of cola sometimes helps a migraine that is just starting, excessive caffeine consumption is a common cause of migraines.
- **Make sure your child stays well hydrated.** This is especially important during hot summer days, and for children who participate in athletics. Modern school policies have conspired to reduce the amount of fluids children drink during the school day – many children drink almost nothing during school hours, and most drink not enough fluids. Consider sending your child to school with a 12-ounce water bottle each day, and encourage them to drink it all by the final bell.
- **Don’t miss meals.** Wide blood sugar fluctuations can cause headaches, even migraines. Keep meals to a regular schedule in your home.
- **Take a daily multivitamin.** Deficiencies in riboflavin and Vitamin D can increase headache frequency.
- **Minimize family stress.** Parents should not argue in front of children, or discuss topics too mature or frightening for a young child.

Please call our office if you have any further questions.