



Migraine in Children and its Causes, Symptoms and Treatment

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Annotation: *Migraine headaches are a common childhood complaint — as many as one-third of school-age children have had at least one of these headaches. Though they occur more frequently in school-age boys, after adolescence, migraines are more common in older girls and women. Half of the people who experience migraines have their first headache before age 20*

Key words: *migraine, caffeine, nitrates, aspartame, tyramine, headache.*

Migraines are provoked by external triggers. The majority of triggers fall into three groups: food and beverages, stress, and sleep patterns. Dietary triggers can result from consuming the following:

- Caffeine
- Chocolate
- Monosodium glutamate
- Nitrates
- Aspartame and tyramine

A lack of sleep or changes in sleep patterns can also lead to migraines. Stress related to issues with school work, family or peers can also have a strong effect on the frequency of headaches. Other factors include missing or a delay in meals, changes in the weather, sensitivity to bright sunlight or glares of light, and exposure to cigarette smoke. Hormone cycles can affect girls after they begin menstruation.

Migraine symptoms come and go with moderate to severe intensity, usually described as “throbbing.” The pain may be located on one side of the head, but children often say they feel pain across their foreheads. Before the pain of a migraine begins, a child may experience changes in vision (an aura) that can appear to be flashing lights, zig-zag lines and momentary vision loss. More often, individuals will report feeling tired or having mood changes for a while before the pain begins.

Migraines are usually associated with one or more of the following symptoms:

- Abdominal pain
- Nausea
- Vomiting
- Dizziness
- Sensitivity to light and/or sound
- Confusion

Children experiencing a migraine will usually seek a dark, quiet place where they’ll fall asleep and wake up feeling better.

After reviewing all of the child’s symptoms and health history, and completing a physical exam, your provider will discuss the best options for your child with you and determine if neurological testing is needed. Typically, migraines can be controlled after parents are educated about triggers and how to eliminate them. Avoiding certain food, improving sleep hygiene, and learning stress management are typically discussed. Patients are also instructed to keep a headache diary to establish a baseline of their symptoms, determine the triggers for a headache and to monitor their progress as triggers are avoided.



In conclusion, if the migraine headaches are still occurring once a week or more after triggers have been eliminated, or the episodes are dramatic and include severe vomiting or confusion, your doctor may recommend medication for prophylactic treatment.

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