



Headaches Patient Information

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What are headaches?

Headaches are pain or discomfort experienced in the head. They are common in childhood and adolescents, with up to 50% of children seven years and above, and 80% of 15 year olds, experiencing at least one headache. Before puberty they affect males and females equally however after puberty three times as many females complain of headache compared to males.

They either occur on their own (primary headache), including migraine and tension headaches, or as a result of another condition (secondary headache).

What causes headaches?

The cause of a headache depends on the type of headache (primary or secondary). However some causes include:

- Infection / illness
- Dehydration
- Inherited (such as migraines)
- Triggered by foods / drinks, such as caffeine or alcohol.
- Lifestyle stress, fatigue, disturbed / poor sleep hygiene, missed meals, excessive screen time, loud music.
- Head injury
- Issues with vision
- Hormonal changes

Although the majority of headaches have a benign (not harmful) cause it is important to know the signs / symptoms of more serious causes, such as brain tumours.

HEAD SMART is a recommended symptom checker and can be found at the following website:

Better safe than tumour - Signs and Symptoms

Normal Symptoms

- Sudden or gradual onset of head pain (dull, sharp, throbbing, aching), resolving within a few hours to a day.
- Some children may experience vomiting.
 If secondary to illness your child may have other symptoms of illness such as a cough, runny nose, temperature.

RED FLAG (WORRYING) SYMPTOMS

- Persistent severe headaches
- Photophobia (dislike of bright lights)
- Non blanching rash (does not disappear under pressure)
- Neck stiffness / pain
- High temperature (38c or above)
- Changes to vision / abnormal eye movement
- Irritability
- High pitched cry in babies less than 6 months
- Difficulty speaking
- Drowsy / lethargic
- Numbness / weakness in arms or legs
- Headaches waking child from sleep
- Waking in the morning with headaches
- Morning vomiting / persistent vomiting
- Seizures
- Balance / coordination / walking issues
- · Behavioural changes.

Investigations and Treatment

Most headaches self-resolve and do not need further investigation however if your child is suffering from frequent headaches contact your GP for further assessment. Things you can do to help your clinician's assessment include keeping a headache diary detailing dates, times, symptoms, duration and any potential triggers and arranging an eye test for your child.

Following assessment, in rare cases your child may need blood tests or imaging. If assessed as necessary this would be discussed with you.

Advice / Caring for your symptoms at home

Most children can be managed at home under the supervision of their parent / carer.

- Paracetamol and Ibuprofen can be used to relieve symptoms.
- Rest in a cool, dark, quiet room if possible
- Encourage fluid intake (water, diluted squash, avoid caffeine)
- Lifestyle changes regular exercise, adequate sleep, avoiding any known triggers.
- Improve sleep hygiene:
 - Limit caffeine, fizzy drinks and energy drinks throughout the day.
 - Adequate exercise throughout the day
 - Implementing a bedtime routine
 - Reducing / limiting screen time (television, mobile phones, tablets) close to bedtime due to the light produced by these devices suppressing sleep hormones causing difficulty in being able to fall asleep.
 - Psychological support if stress / anxiety is considered a potential cause.

When to seek further help?

Return to CED if your child shows any of the red flag symptoms detailed above.

If you have concerns that your child is not showing signs of improvement or is worsening then please:

Contact your own GP for reassessment Call 111 out of normal working hours for advice Return to CED