Emergency treatment of pediatric headache

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Headache is the most common pain condition in children and adolescents visiting a pediatrician and, the third cause of visits to pediatric emergency departments (ED). Most headache disorders seen in emergency departments are of a benign etiology, with migraine being responsible for 60% of all headache presentations. Attacks that lead patients to come to the emergency room are often more severe, refractory to home rescue medication, and have been going on for longer. All of these features make these attacks more challenging to treat.

The core principles of effective treatment are reassurance (This is migraine and can be controlled), ensuring adequate hydration, and control of headache and associated features (nausea, photophobia, and phonophobia). The main drugs including triptans, antidopaminergic agents, Nonsteroidal Anti-Inflammatory Drugs, dihydroergotamine, sodium valproate and, corticosteroids

Nonsteroidal anti-inflammatory drugs have been shown to be successful for outpatient therapy of pediatric migraines. Ibuprofen is the most thoroughly investigated agent. Triptans have demonstrated efficacy in treating migraines in children and have been approved for use in children and adolescents.

Primary Headache syndromes are the majority of headaches that admitted to ED. Sinister HA are rare, but must be strongly considered in the ED. A written plan for rescue treatments of HA and its preventive therapy may help for sooner pain control and better quality of life of the patients.

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