

## CASE STUDY 2:

### Managing headaches in children

Harry is a 12-year-old boy who has been cared for by his GP since birth. The same GP provided prenatal and antenatal care to his mother and knows the family well.

On this occasion, Harry presents with a 'sore head'. His GP consults the [Headaches in Children](#) page, and establishes that he has no red flags. He is likely experiencing an acute benign headache. His GP uses the [Analgesia in Children with Acute Pain](#) pathways, which has useful links to age-appropriate pain scales, to determine the severity of his current headache and to initiate appropriate first line analgesia.

Several months later, Harry returns with his dad. The family now report that Harry has been experiencing more regular headaches. His GP again uses the [Headaches in Children](#) pathway to

explore his history of headaches further, specifically to differentiate between migraine and tension-type headaches.

Harry also reports experiencing a pulsing ache on one side of his head, and sometimes noticed spots in his vision prior. He has no symptoms of vomiting or headaches on waking, no neurological findings on the examination, and is completely well between episodes, which have been occurring approximately once or twice a month.

His GP establishes that given no red flags, and no concerning features of a secondary headache, he is most likely experiencing migraines. He advises using a headache diary or a migraine app (links to which can be found on the [Headaches in Children](#) page), so that Harry can be access triggers, frequency and any patterns to his migraines.

## CASE STUDY 2:

The GP reads:

### Primary headache management

1. Provide education, [fact sheet](#), and reassurance that imaging is not necessary as serious causes do not present with episodic migraines or tension-type headaches.
2. Start a [headache diary](#) or download a migraine app such as [Migraine Buddy](#) to assess likely triggers, frequency, and any patterns.
3. Discuss non-medication management and headache [triggers](#), specifically:
  - Avoid skipping meals, ensure appropriate fluids but avoid caffeinated drinks
  - Routine bed and wake times, particularly on weekends, with appropriate uninterrupted sleep
  - Appropriate exercise

### Migraine management

1. Advise at first sign of migraine to:
  - provide [analgesic agent](#) and/or ondansetron for nausea or vomiting.
  - retire child to dark quiet room.
2. Consider [prophylaxis medication](#) if:
  - non-medication management has failed.
  - migraines are debilitating and are more than 3 to 4 per month.
3. If uncontrolled or frequent debilitating migraines, consider [non-acute paediatric medicine referral](#).

further assess his presentation, and together they formulate a plan to wean him from his current medication use, and better manage his symptoms. His GP directs him to some further resources around chronic pain and arranges early review.

Six months later, both Harry and his dad are doing well.

For further information, see the recently updated [Acute Analgesia in Children](#), [Headaches in Children](#) and [Medications in Chronic Pain](#) pathways.

The GP reviews Harry's case 6 weeks later and finds he is doing well. The headache diary has helped him identify triggers, and the migraines are well managed with simple analgesia and occasional use of a triptan. His GP provides Harry and his family some patient handouts, accessed via the pathway, and advises them when to seek review.

His dad uses this opportunity to ask the GP if he might book for a consult to discuss his own headaches.

On return for this appointment, the dad reports that he has had migraines for 'years', but that they have more recently become constant. He has been taking paracetamol regularly, and more recently started using some oxycodone found at home after an ACL reconstruction earlier in the year. He admits to having seen another GP and having obtained further scripts for oxycodone.

The GP accesses the [Chronic Non-Cancer Pain](#) and [Medications in Chronic Pain](#) pathways to