

ADOLESCENTS WITH MIGRAINE HEADACHES: MANAGING TRIGGERS TO SUPPORT A HIGH QUALITY OF LIFE

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Introduction

- Migraines are common among adolescents, beginning in early childhood and following them into adulthood. People who suffer from migraine headaches typically describe intense pain located on one side of their head, accompanied by other symptoms, such as nausea, vomiting, and sensitivity to stimuli. Migraines have a negative impact on the daily lives of those who suffer with them.
- It can be hard for healthcare workers to diagnose migraines in adolescents because the duration and symptoms differ from those seen in children and adults.
- Adolescents who suffer from migraine headaches have a decreased quality of life. A decline in school performance, social involvement, and physical activity commonly occurs. There may also be a disruption to sleep patterns, nutrition, health, and growth & development.
- Successfully navigating life is hard enough for people of this age group and healthcare professionals should have the goal of increasing the quality of life for both the patient and the family. It is important to know who is at risk for migraine headaches, relieve symptoms, and control triggers.

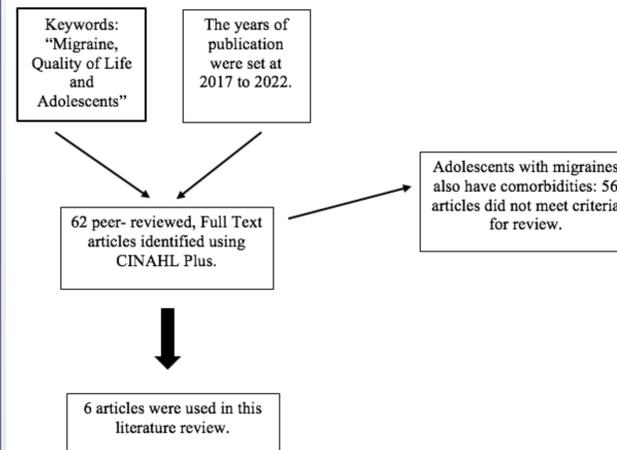


Background

- Headaches create pain or discomfort in the head, neck and scalp. There are subcategories of headaches that range in location, onset and pain.
- Migraines typically cause severe pain located on one side of the head and these forms of headaches come in stages. Unlike headaches, migraines do not occur as a result of another illness or trauma. They produce a variety of symptoms that can last from hours to many days. Migraines can be accompanied by nausea, vomiting and muscle weakness. Some forms of migraines create a sensitivity to light, sound and aromas. Migraines can come with or without an aura, pain, dizziness and sensation loss.
- There are many triggers for migraine headaches ranging from food to stimuli to other medical conditions. Triggers vary for each individual. The most common are alcohol, caffeine, cheese, chocolate, strong smells, stress, lack of sleep, asthma and the screen glow of an electronic device.
- Unlike triggers, core patient variables that are unique to the individual. These variables include but are not limited to medical history, genetics, previous trauma or illness, changes in environment and lifestyles.



Methods



Results

It is important to consider who is at highest risk for migraines so caregivers can work proactively

- Family history of migraines increases the occurrence by 74% for adolescence.
- Migraine headaches are more common in females than in males.
- Adolescents who have migraines are likely to also have sleep disorders and disturbances.
- Although stress, anxiety and depression play a role in migraine occurrence, there is no evidence that migraines are associated with a particular psychiatric disorder.
- Younger children do not seek medications. Medication requests to treat migraine pain and symptoms do not begin until late adolescence.

Migraines effect on health and school performance are important considerations when planning care

- Approximately, 16% of adolescents have other chronic illnesses that coincide with their migraine headaches. Children with migraines often complain of more health-related issues.
- Sleep disorders are more common in children with migraines. The pain that accompanies migraines impairs the sleep patterns and sleep quality that adolescents require each night.
- Exercise is important for the health, growth and development of children and adolescents. Adolescents in general do not exercise often and the occurrence of migraines reduces participation in physical activity even further.
- Adolescents with migraines are more apt to skip meals. Poor nutrition has a negative impact on the normal growth and developmental patterns of this age group.
- There are higher anxiety and depression scores for adolescents with migraine headaches. Stress is a common trigger for migraines. Together migraines and stress negatively impact the child's participation in academic and social activities.
- As a result of migraines, adolescents miss about 3.5 days per school year. Testing in schools is also seen as a trigger for migraine headaches. The impact of this is lower academic scores and disinterest in normal activities normally seen in this age group.

Results (cont.)

Quality of life for both the child and the family is an important focus for healthcare providers

- Migraine headaches have a negative effect on both patients and their families. Compared to other types of headaches, migraines have the greatest effect on quality of life. Children report an overall poorer health and lower quality of life. Quality of life was not as affected as much when they were younger.
- School performance is negatively impacted by migraine occurrences and symptoms. There is a decrease in concentration, participation and grades.
- Family members take an active role in caring for their children that suffer with migraine headaches. There is an increased family burden due to missing work, taking children to doctor visits, and providing constant comfort to the suffering child. Siblings and other family members can be negatively impacted.



Discussion

- It is important to understand who is most at risk for migraine headaches, taking into consideration age, family & medical history, lifestyles, and triggers.
- Controlling migraine triggers allows healthcare providers and families to take a proactive approach in caring for this child. This will increase the quality of life for the child and lessen the burden on their families.
- Migraine headaches have an extensive negative impact on the quality of life for both the patient and their families.
- Participation in academic and social activities are limited due to their migraines and is affecting their overall psychosocial well being. As a result of their migraines going undiagnosed & experiencing of symptoms, teens can feel a disconnect from their peers due to isolation and feeling the need to endure their condition.
- Nurses should educate the adolescent patient and their families on lifestyle changes that can help improve their quality of life.
- Health care providers should work with the teachers and family members involved in the adolescent's life. It will allow for the continuation of interventions in the child's daily routine, and increase their overall quality of life.



Conclusion

- The adolescents ability to understand their condition and participate in care depends on their age and developmental stage.
- The need for support from healthcare providers is crucial. It is essential that nurses determine a plan of care and educate the adolescent patient and their families.
- Education should be focused on relieving symptoms, reducing sleep disturbances and improving academic performance. Controlling the triggers and symptoms of migraine headaches will allow the adolescents to live better lives and lessen the burden on families.
- Nurses can teach patients relaxation techniques that will relieve pain and provide comfort. They should stress the importance of healthy diets, adequate sleep and daily physical activity. It is important for them to address triggers, exercise & stress levels, diet, sleep schedules and daily routines as a form of prevention and acute treatment. Providing guidance on what triggers to watch out for and avoid can allow for a decrease in migraine frequency. Working with families to control other health conditions of the child will decrease the occurrence of migraines and improve health & school performance.
- Nursing education is key! The patient and family should be well informed in the modifications that are needed in regards to sleep patterns, diet, exercise and health. This will allow them to be proactive and understand acute treatments that will help the adolescents improve their quality of life. In addition to positive outcomes and proper growth & development.

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Acknowledgements

- I would like to thank my family and friends for their support and encouragement throughout my college experience and while completing my honors thesis.
- I would like to thank Dr. Ebersole for her guidance in this thesis writing process.