

# Childhood Headaches Don't Take Them Lightly

By Dr. Brian Abelson D.C. RNC.

Headaches during childhood should be taken seriously. There is a growing body of evidence showing that headaches that occur during childhood can set a pattern for headache related dysfunction throughout a person's adult life. In the United States, it is estimated that more than 45 million people suffer from headaches on a regular basis. Most of these individuals suffer from more than one type of headache concurrently.

Even children, one or two years old, can suffer from severe headaches. The causes of these headaches are very similar to those of adults. Children experience migraines, tension headaches, sinus headaches, allergy related headaches, cervicogenic headaches, headaches from nutritional deficiencies, and headaches resulting from the excessive use of pain medications.

I have obtained very good results in treating headaches by using a combination of Chiropractic adjustments, cranial manipulation, TMJ protocols, percussor, and a wide variety of tension reducing exercises. Unfortunately, as good as these techniques are, we are still not addressing some major issues that can cause childhood headaches.

This article assumes that you have been conducting a thorough orthopedic and neurological examination, and have ruled out any serious pathological processes such as brain tumors or meningitis. I will focus on what I consider to be some key issues that are often overlooked or avoided in the treatment of childhood headaches.

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## Medications

In many cases a child may present to you after seeing a medical practitioner about headaches or some other syndrome. In many of these cases, you may be dealing with the secondary effects of drug treatment and not a primary headache. For example, the drug Imitrex stops migraine headaches by constricting blood vessels. Once the effects of Imitrex wears off, the constricted blood vessels swell at an extremely fast rate to normal size. This high rate of swelling causes a rebound headache. In many cases the patient takes more Imitrex to reduce the rebound effect. Additionally, Imitrex has also been implicated in heart damage caused by its systemic vasoconstrictive action. (Yes they do prescribe this drug to children.)<sup>1</sup>

Most medical doctors do not have the time to discuss the side-effects or adverse reactions with their patients. In fact, due to the existence and introduction of thousands of new drugs most medical practitioners are not aware of these side effects. Physicians rely on drug representatives to keep them informed about these medications. But these people work for pharmaceutical companies whose focus is on profit, not health.

Due to this, if a child presents to you with a headache and is on medication, you should research the side effects of drugs by:

- Checking to see if the drug is being prescribed as an "off label" to treat conditions that they are not approved for.
- Reviewing the adverse reactions caused by the drug

As health care practitioners, it is our responsibility to educate patients about adverse drug reactions. It is the patients responsibility to discuss and evaluate the drug with their medical practitioner.

You can find a complete listing of all pharmaceuticals, their adverse reaction, and side effects on the Internet at <http://www.rxlist.com/>.

The following table lists some of the common medications that I have causes headaches in children.

Medication	Condition	Medication	Condition	Medication	Condition
<b>Dexedrine</b> <b>Paxil</b> <b>Ritalin</b>	ADD/ADHD	<b>Claritin</b> <b>Prednisone</b>	Allergies	<b>Typhoid</b> <b>Pertussis</b>	Vaccination
<b>Ventolin</b> <b>Pulmicort</b>	Asthma	<b>Tetracycline</b> <b>Cleocin T</b>	Acne	<b>Cephalexin</b>	Infections
<b>Prozac</b> <b>Zoloft</b>	Depression	<b>Cyproheptadine</b> <b>Imitrex</b>	Migraines in Children	<b>Over Use of Pain Medications</b>	Causes Rebound Headache

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## Core Considerations

Diseases caused by environmental toxicity are increasing at an alarming rate in our world. Headaches are often directly related to environmental toxicity, especially when combined with fast foods, refined carbohydrates, chemical laden processed foods, and the stresses of daily life. The following are some of my key recommendations. Remember, even minor changes in environment and diet can make a difference.

### Avoid the Common Triggers

Staying away from the common headache triggers and rotating a child's diet can often eliminate headaches. Once the child has been headache-free or a period of two weeks, begin reintroducing one food group back into their diet every three or four days. Some of the most common triggers are:

Aged Cheese (Pizza) Aspartame (NutraSweet) Caffeine Chocolate Monosodium Glutamate (MSG) Nuts	Additives Colorings Concentrated Juices Nitrites, Nitrates Petroleum Based antioxidants (BHT, TBHQ)	Processed meats Refined Carbohydrate Diets Red Meats, Dairy Sweets, Candy Wheat
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### Check For Allergenic Responses

Many studies have show a correlation between allergens and headaches. I highly recommend that children with chronic headaches be given an **Elisa Test**. Scratch tests may not give a true picture of allergenic responses since allergenic reaction may not show up for days after the exposure to allergen. I recommend using the facilities at Great Smokies Laboratories. For more information see their web site at <http://www.gsdl.com>.

## **Protein**

The right source of protein will help reduce a headache, while the wrong source may cause a headache. Red meats can lead to headaches through the arachidonic acid pathway due to the production of inflammatory prostaglandins. Processed meats are sources of nitrates, sulfites, and other additives that are directly related to headaches. The best sources of protein are cold water fish, tofu, egg whites, and free range hens. Because hypoglycemia is commonly related to headaches, I have my patients eat these sources of protein three times a day to reduce glucose fluctuations.

## **Carbohydrate**

Have your patients review their carbohydrate sources. Once they look at the glycemic index of various foods, they may be surprised at how much sugar they have been feeding their children. Hypoglycemia has a close relationship to headaches. You may be surprised to see that a baked potato has a glycemic index higher than that of table sugar. For a complete listing of the glycemic index and more information go to <http://www.mendosa.com/gi.htm>.

## **Essential Fatty Acids**

Fatty acids can play a major role in the development of childhood headaches. I recommend the elimination of all polyunsaturated vegetable oils, any form of trans-fatty acids (margarine and partially hydrogenated vegetable oils) from the child's diet. These substances promote the production of inflammatory prostaglandins. Children should eat foods high in gamma-linolenic acid (black current oil) and omega-3 fatty acids (salmon, oily fish, and flax oil). For cooking, use only use pure virgin oil.

## **Vitamin and Mineral Deficiencies**

Some of the most common vitamin deficiencies in children include folic acid, B12, B6, and Vitamins A and D. Many headaches can be triggered by a decrease in oxygen supply. Folic acid and Vitamin B12 are involved in the oxygenation of tissue and can help to reduce occurrences of such headaches.

## **Mineral Deficiencies**

One of the best ways to determine mineral deficiencies is through hair analysis. The other benefit of hair analysis is that you can determine if the child has been subjected to heavy metals in their environment. It is not uncommon to find high levels of aluminum and lead in children with chronic headaches. Hair analysis is available through Professional Health Products at 1-800-661-1366.

## **Supplementary Recommendations**

From a symptomatic perspective there are several supplements that you can recommend without the negative side effects of pharmaceuticals. The following table lists some of the most common supplements that we recommend for children.

Substance	Dosage	Function
Calcium & Magnesium	250 mg calcium citrate 125 mg magnesium With food- 2 times per day	Magnesium deficiency is often associated with onset of headaches.
Salmon Oil	500 mg - 2 times per day	Blocks inflammatory responses.
Chamomile tea Ginger tea Peppermint tea	As needed	Relaxes the child, clears sinuses
Feverfew	As recommended by the producer. Levels will vary depending on the concentration in the tablet.	Acts as an anti-inflammatory
Homeopathic Preparations	Will vary greatly depending on the signs & symptoms please refer to: <a href="http://www.healthy.net/asp/templates/book.asp?PageType=Book&amp;ID=547">http://www.healthy.net/asp/templates/book.asp?PageType=Book&amp;ID=547</a>	

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## Conclusion

Childhood headaches, if not dealt with appropriately can lead to long term dysfunction. Even though Chiropractic adjustments are a primary tool for addressing bio-mechanical and neurological dysfunction, numerous other factors (medications, common environmental triggers, diet, and stress), must be considered. Due to the complexity of this topic, I strongly recommend taking the time to further research this topic. See the websites at the end of this article.

- Diagnosing Childhood Headaches  
<http://www.chiroweb.com/archives/11/04/22.html>
- Evaluation of Headaches  
<http://internalmed.about.com/health/internalmed/library/weekly/aa092698.htm>
- American Headache Society  
<http://ahsnet.org/>
- MedlinePlus  
<http://medlineplus.nlm.nih.gov/medlineplus/headacheandmigraine.html>
- National Headache foundation  
<http://www.headaches.org/>
- Pediatric Headaches  
<http://www.chiroweb.com/archives/16/17/04.html>

All the best is health

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