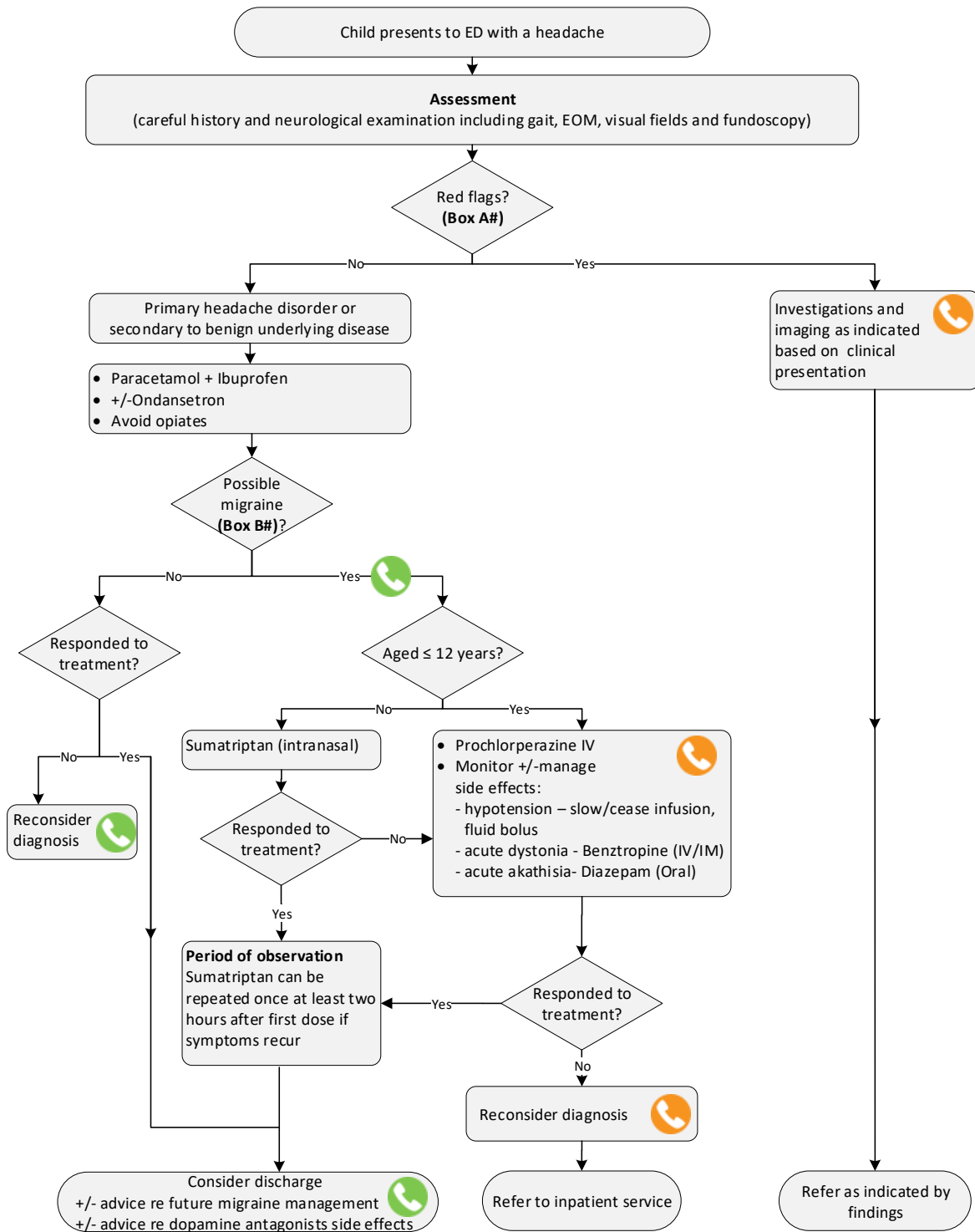


Queensland Paediatric Flowchart and Medications

Emergency

Headache – Emergency management in children – Flowchart



# See next page for Box A and B

Consider seeking senior emergency/paediatric advice as per local practices

Seek senior emergency/paediatric advice as per local practices

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For more information refer to [CHQ-GDL-60017 - Headache – Emergency management in children](#)



## Headache – Emergency management in children – Medications

### Box A: Red flags suggestive of serious underlying pathology

- worsening headache with fever
- sudden onset headache reaching maximum intensity within five minutes
- new-onset neurological deficit (transient or sustained)
- new-onset cognitive dysfunction or personality change
- impaired level of consciousness
- head trauma in previous three months
- headache triggered by cough, valsalva, or sneeze
- headache causing night wakening
- early morning headache +/- vomiting
- headache triggered by exercise
- headache that changes with posture
- clinical features of glaucoma
- significant change in characteristics of headache
- atypical aura
- compromised immunity (e.g. HIV)
- history of malignancy
- vomiting without other obvious cause

### Simple analgesia dosing in children

<b>Paracetamol (Oral)</b>	15 mg/kg to maximum of 1 gm every four hours, maximum 4 doses in 24 hours
<b>Ibuprofen (Oral)</b>	10 mg/kg to maximum of 400 mg every six to eight hours, maximum 3 doses in 24 hours

### Sumatriptan dosing for the acute abortive management of a migraine in children over 12 years

<b>Sumatriptan (intranasal)</b>	20 mg (maximum 40 mg in 24 hours).
<b>Contraindications</b>	Ergotamine, cardiac disease, SSRIs

### Dopamine antagonist dosing for the acute abortive management of a migraine in children

<b>Prochlorperazine (Stemetil) (IV)</b>	0.15 mg/kg to maximum of 12.5 mg in 20 mL/kg sodium chloride 0.9% up to maximum of 1 L administered over one hour.
<b>OR Chlorpromazine (Largactil) (IV)</b>	0.25 mg/kg in 20 mL/kg sodium chloride 0.9% up to maximum of 1L administered over one hour.
<b>OR Metoclopramide (Maxolon) (IV)</b>	0.2 mg/kg to maximum 10 mg
<b>Side effects</b>	Extrapyramidal symptoms such as akathisia and dystonic reactions

### Benztropine dosing for the treatment of acute dystonia in children

<b>Benztropine (IV/IM)</b>	0.02 mg/kg (to maximum adult dose of 1 mg) in children aged more than 3 years. May repeat in 15 minutes.
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### Diazepam dosing for the treatment of acute akathisia in children

<b>Diazepam (PO)</b>	0.04 – 0.2 mg/kg (to maximum adult dose of 2-10 mg) every eight to twelve hours
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### Box B: Migraine description

<b>Migraine without aura</b>	<b>Migraine with aura</b>
<ul style="list-style-type: none"> <li>at least two of the following:               <ul style="list-style-type: none"> <li>bilateral or unilateral location</li> <li>pulsating</li> <li>moderate to severe pain</li> <li>made worse with activity</li> </ul> </li> <li>at least one associated symptom (nausea, vomiting, photophobia or phonophobia)</li> </ul>	Aura (occurring seconds to an hour prior to onset of headache) may consist of: <ul style="list-style-type: none"> <li>visual disturbance (scintillations, gleam of light, blurred vision, blind spots)</li> <li>an odour</li> <li>paraesthesia in the hand or face.</li> </ul>

For more information refer to [CHQ-GDL-60017 – Headache – Emergency management in children](#)

