

Abdominal Migraine

Abdominal Migraine, common in children, involves abdominal pain, vomiting, diarrhoea and other gastrointestinal upsets, and not necessarily headache.

The pain associated with Abdominal Migraine is generally located in the middle of the abdomen around the belly button. It is often described as dull or “just sore” and may be moderate to severe.

In addition to the pain, most Abdominal Migraine patients experience some combination of loss of appetite, nausea, vomiting and those affected may look pale. You may also experience slower movement of digested food through the intestines.

What's different about Abdominal Migraine?

The main difference with Abdominal Migraine is that the attacks affect the gastrointestinal system, and in most cases, there is no or little headache. For this reason, Abdominal Migraine is frequently undiagnosed or misdiagnosed for years.

Abdominal Migraine is most frequently experienced by children around the age of 7. Most children who experience abdominal migraine grow out of it by their teens and eventually develop other migraine variants with headaches, but it can persist into adulthood.

Abdominal Migraine has a clear genetic link, although the specific genes have not yet been identified. One study¹ found that more than 90 percent of kids with this condition had a parent or sibling with migraine.

1. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8132691/>

Managing migraine in kids

Managing migraine in kids can be tough, particularly if the parents are not familiar with migraine themselves. The best advice we can give you is to see a paediatrician, and if you can, a paediatric neurologist, for specialist care.

Migraine is best managed early and actively. Finding a care plan that works as soon as you can is key to giving your child a reasonably normal childhood and ensuring they don't miss too much school.

Abdominal Migraine is frequently misdiagnosed as Irritable Bowel Syndrome (IBS) or Irritable Bowel Disease (IBD) in adults.

How is Abdominal Migraine managed?

Best care for someone with significant Abdominal Migraine will include both a neurologist and a gastroenterologist.

Non-drug treatments, such as trigger avoidance and dietary management, are the first step in managing abdominal migraine. However, if episodes are severe or frequent, medications may be considered. The gastroenterologist may also suggest medications to calm the stomach.

Make sure you, or your affected child, gets enough sleep, eats regular meals throughout the day, and drinks plenty of fluids (without caffeine). If there is a lot of vomiting, remember to rehydrate.

An elimination diet to remove food triggers is also recommended. You will need the help of a dietician to do this properly.

Severe attacks must be carefully managed, including going to emergency if you feel it cannot be managed at home, to enable medications and fluids to be given intravenously.

