



Authors



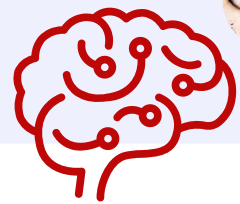
IHC25-DP-029

# Tiny Heads, Big Pain: Unraveling the Burden of Pediatric Migraine in Nepal



**Presenting author:**  
**Dr. Ayush Chandra, MBBS**  
ayushchandra1995@yahoo.com  
**Co-authors:-**  
**Dr. Avinash Chandra, MD, Neurology**  
Chandraavi@gmail.com  
**Dr. Sudikshya Acharya, MBBS**

## INTRODUCTION



Pediatric migraine is a prevalent yet often underdiagnosed condition in low-income countries like Nepal. It is a significant cause of disability in children, affecting their quality of life, academic performance, and social interactions. Despite its common occurrence, there is a lack of comprehensive data on pediatric migraines in Nepal. Contributing factors include limited awareness among healthcare providers, inadequate training, and lack of access to specialized care, which lead to delays in diagnosis and treatment.

## RESULTS



Of the 500 participants, 60% were female, and 40% were male. The demographic breakdown of the study population is shown in Table 1. The overall prevalence of pediatric migraine in our sample was 12.6%, with the highest prevalence observed in children aged 10-15 years (62%). Among the participants, 68% experienced episodic migraines, and 32% had chronic migraines. The most common migraine triggers included stress (52%), lack of sleep (47%), and dehydration (40%) (Table 2). Associated symptoms such as nausea (50%), vomiting (40%), and visual disturbances (35%) were frequently reported. Despite these findings, only 25% of children had been formally diagnosed by a healthcare provider, and 30% had received any form of treatment (Table 3). A mere 15% of those diagnosed were prescribed appropriate migraine-specific treatments such as triptans or preventive medications. Common barriers to accessing care included lack of awareness, long wait times for specialized services, and high treatment costs.

Table 1: Demographic Characteristics of Study Population

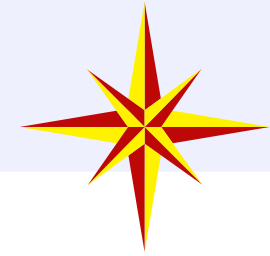
Age Group	5-9 Years	10-15 Years	16-18 Years	Total
Male	100 (20%)	80 (16%)	40 (8%)	220
Female	100 (20%)	120 (24%)	60 (12%)	280
Total	200 (40%)	200 (40%)	100 (20%)	500

## CONCLUSION



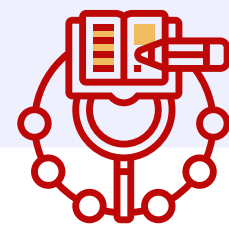
Pediatric migraines are prevalent in Nepal, but they remain underrecognized and undertreated. This study emphasizes the urgent need for increased awareness among healthcare providers and families, improved access to diagnosis and treatment, and the development of specialized pediatric neurology services. Addressing these challenges is essential to reducing the burden of pediatric migraines and improving the quality of life for affected children.

## OBJECTIVES



This study aims to explore the prevalence, clinical characteristics, and socioeconomic challenges of pediatric migraines in Nepal, highlighting the barriers to timely diagnosis and effective treatment.

## METHODS



We conducted a cross-sectional study involving 500 pediatric patients aged 5-18 years who were diagnosed with migraine at hospitals in Kathmandu and surrounding rural areas. Data were collected through structured interviews with parents and caregivers, clinical assessments, and a review of medical records. A standardized migraine questionnaire was used to gather information on migraine frequency, duration, triggers, associated symptoms, and impact on quality of life. Descriptive and inferential statistical analyses were performed using SPSS.

Table 2: Prevalence of Migraine Triggers in Pediatric Patients

Trigger	Percentage (%)
Stress	52
Lack of Sleep	47
Dehydration	40
Exposure to Bright Lights	35
Specific Foods	25

Table 3: Diagnosis and Treatment Status of Pediatric Migraine Cases

Diagnosis	Yes (n=125)	No (n=375)
Diagnosis Rate	25%	75%

Treatment	Yes (n=150)	No (n=350)
Any Treatment	30%	70%

Proper Treatment	Yes (n=75)	No (n=425)
Migraine-Specific	15%	85%