

Cognitive Behavioral Therapy (CBT)

Our headache providers recommend that your child participate in cognitive behavioral pain management for headache. Data from multiple research studies shows that most patients experience at least a 50% reduction in headache with this treatment. Seventy percent of children receiving these interventions experienced significant improvement. This treatment can also decrease the negative interference headache has on their life.

What is CBT?

CBT is a psychological treatment that has demonstrated efficacy in treatment of chronic pain, including chronic migraine. CBT includes:

1. Bio behavioral treatment components of cognitive training
 - a. Cognitive modification
 - b. Distraction
2. Behavioral change strategies
 - a. Relaxation training
 - b. Activity pacing
 - c. Adherence plans

CBT gives kids the skills to teach their body to respond more helpfully to stress by learning stress reducing strategies. With CBT, patients acquire skills to make healthy changes in thoughts, feelings, physical sensations, and behaviors with the goal of improved pain and overall daily experience.

Frequently Asked Questions:

How many sessions of CBT does my child need?

CBT for headache management is frequently completed in 6-8 sessions, with home practice considered essential for treatment.

Why CBT for my child?

CBT should be highly recommended to any patient who is dissatisfied with their current headache status, but certainly for those patients who have chronic migraine or are experiencing moderate or greater disability from headache symptoms.

Shouldn't we just be able to handle this on our own?

A migraine is a very difficult and sometimes debilitating chronic condition for children. We want to make sure you have multiple evidence-based resources in order to minimize the amount of pain your child has.

It will take too much time.

Pain management treatment is often completed in 2-3 months. The time invested in treatment is actually shorter than the time spent staying at home when your child is absent from school, or time spent in the emergency room.

Ernst, M., O' Brien, H., & Powers, S. (2015). Cognitive behavioral therapy: how medical providers can increase patient and family openness and access to evidence based multimodal therapy for pediatric migraine. *American headache society*, doi: 10.1111/head.12605

Powers SW, Kashikar- Zuck SM, Allen JR, et al. Cognitive behavioral therapy plus amitriptyline for chronic migraine in children and adolescents a randomized clinical trial. *JAMA*. 2013;310:2622-2630.

