

Missing the Serious Headache Diagnosis in the Emergency Department: How Often Does It Occur?

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No one who examines a child wants to miss a serious diagnosis, yet this can happen. Headache is one classic symptom that usually is benign but occasionally can be something much more serious. To gain a better sense of the frequency that a child is seen acutely with a headache, sent home with a benign diagnosis, only to return and be found to have a serious neurologic or non-neurologic diagnosis (SNND), Zhou et al ([10.1542/peds.2020-1647](#)) studied this phenomenon using visits

for headache to the emergency departments of 45 children's hospitals between 2015-2019 that are part of the Pediatric Health Information System (PHIS). The authors wanted to see how many children discharged with the diagnosis of "headache" returned within thirty days with a SNND when compared to children discharged with other symptoms such as cough, chest or abdominal pain.

The good news or bad news is that of the 121,621 patients discharged with headache, 608 (0.5%) were diagnosed with an SNND within 30 days, of which 37.5% were diagnosed in the first week. The control population had a rate of SNNDs of only 0.0-0.1%. So, what were the diagnoses that were missed and why?

The authors provide a detailed look at these 608 patients in regard to what tests were done in the ED and what the leading missed diagnoses were (which included benign intracranial hypertension, cerebral edema and compression, and seizures). This study will give you a heads up and help raise your index of suspicion for signs and symptoms that can help you determine when to worry about your patient's headache. Stay ahead of headaches and link to this study to learn more.

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