

DEVELOPMENTAL DIFFERENCES IN COPING AND PAIN CATASTROPHIZING IN PEDIATRIC MIGRAINE: HOW PATIENTS AND THEIR MOTHERS CHANGE ACROSS AGE

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Background. We aimed to: 1) explore coping strategies and pain catastrophizing in children and adolescents with migraine and their mothers; 2) investigate differences according to developmental stage, headache frequency, and pain intensity.

Methods. The study included 166 pediatric patients with migraine with and without aura (mean age 12.2 ± 2.6 years; 67 children and 99 adolescents) and their mothers. Patients were stratified according to: developmental stage (children vs adolescents), headache frequency (daily, high and low frequency), and pain intensity (severe and mild). Pain catastrophizing was assessed using the Pain Catastrophizing Scale/Child (PCS/PCS-C), while coping strategies were evaluated using the Pediatric Pain Coping Inventory (PPCI) in patients and the Coping Strategies Questionnaire-Revised, Italian version (CSQ-R-I) in mothers.

Results. Compared with adolescents, children showed higher scores in "Seeking Social Support" (p= <0.001) and lower scores in "Cognitive Self-Instruction" (p= 0.004). Mothers of children reported lower scores in "Praying/Hoping" (p= <0.001) and "Magnification" (p= 0.012) compared with mothers of adolescents. No significant differences according to headache frequency were found among children or their mothers. In contrast, adolescents with daily headache showed higher scores in "Magnification" (p= <0.001), "Helplessness" (p= 0.015), and "Total PCS-C" (p= 0.007), whereas those with lower headache frequency reported higher "Distraction" scores (p= 0.009). No significant frequency-related differences were observed among mothers of adolescents. Pain intensity was not associated with significant differences in children; however, mothers of children with severe pain showed higher "Magnification" scores (p= 0.043). Adolescents with severe pain reported higher "Seeking Social Support" scores (p= 0.036), with no corresponding maternal differences.

Conclusions. Developmental stage significantly influences coping and pain catastrophizing in pediatric migraine. Adolescents and their mothers exhibit a more maladaptive cognitive-emotional response to pain, especially when headache frequency is high. These findings support the integration of age-specific and family-oriented interventions into pediatric migraine care.