

HOW LONG DO MIGRAINE ATTACKS LAST IN CHILDREN AND ADOLESCENTS? INSIGHTS FROM A COHORT OF PATIENTS AGED 6–18 YEARS

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Background. Attack duration is a cornerstone of the diagnostic criteria for migraine without aura (MwA). Since publication of first International Classification of Headache Disorders (ICHD), this criterion has undergone several revisions, particularly in pediatric patients. Although evidence has consistently shown that migraine attacks in children are often shorter than in adults, the current ICHD-3 criteria still define attack duration as 2–72 hours. Consequently, some children with otherwise typical migraine features may not fully satisfy current diagnostic criteria. This study aimed to evaluate the duration of untreated migraine attacks in a cohort of pediatric patients with MwA.

Methods. We conducted a retrospective study including patients (6–18 years) with MwA and evaluated at the Headache Centers of Bambino Gesù Children's Hospital and the IRCCS Mondino Foundation. Data were retrospectively collected from the medical records of patients evaluated between January 2026 and early June 2026. Attack duration was assessed only for untreated attacks and categorized into four predefined, mutually exclusive intervals: ≤2 hours, >2 to ≤4 hours, >4 to ≤72 hours, and >72 hours. For attacks lasting ≤2 hours, duration was additionally recorded in minutes. Descriptive statistics were used to summarize demographic and clinical characteristics.

Results. A total of 150 patients met the inclusion criteria. Mean age was 12.3 ± 3.2 years, and 62.7% were female. Attack duration was ≤2 hours in 45 patients (30.0%), >2 to ≤4 hours in 45 patients (30.0%), >4 to ≤72 hours in 56 patients (37.3%), and >72 hours in 4 patients (2.7%). Among patients with attacks lasting ≤2 hours, mean attack duration was 59.1 ± 37.1 minutes (median 60 minutes; range 5–120 minutes). Of these 45 patients, 37 experienced attacks lasting <2 hours. Attacks lasting <2 hours were more frequently observed in younger children, with proportions progressively decreasing with age.

Conclusions. Nearly one-third of children and adolescents with MwA experienced attacks lasting no longer than 2 hours. These findings suggest that the current lower duration threshold may not fully capture the clinical spectrum of pediatric migraine and support reconsideration of pediatric-specific duration criteria in future revisions of the ICHD.