



PAIN

101

Many children and youth who come to the hospital often ask or worry about whether something 'will hurt.' Families may have questions and concerns about pain medications being used or wonder about the best way to support their child during a potentially painful experience. We hope that the following information will help you know what to expect and how to work with your healthcare team to help reduce pain.

At the Alberta Children's Hospital we are *Committed to Comfort*. This means that we will do our best to promote comfort by helping to lessen pain and anxiety. We will ask about pain on a regular basis and use both medicine and comfort measures to help reduce any pain.

What is pain?

Pain is an unpleasant sensation that may occur because of an injury, surgery or an illness. Pain is one way our body alerts us to pay attention and seek help. Every person is unique and experiences pain in a unique way. We know that *you are the expert in how you are feeling and how you want to try to feel better.*

How is pain assessed?

Your healthcare team wants to know how much pain a patient might be experiencing so that we can help reduce or eliminate the pain. We often use pain scales to help understand how a person is feeling. By answering questions or choosing pictures, pain is scored, using a scale of 0-10:

- A score of 0 means no pain
- A score of 4-6 is moderate pain
- A score of 7 or higher means more severe pain

There are even pain scales for young children and for children who do not communicate with words.

We also observe behavior, we might check any painful areas and measure pulse, breathing rate, or blood pressure. The tools we use to assess pain are based on a person's age and/or developmental stage. Parents can also be a big help by letting the healthcare team know how their child is feeling, as they know their child's feelings and behaviors best.

What can be done to help relieve pain?

People come to the hospital for different reasons. Sometimes it is because of a painful condition while other times a patient may need medical procedures such as having a blood test, getting an intravenous (IV), or having a bone set. To help relieve pain in these situations we have a number of options to choose from. We can help you decide what will be best for each situation.

We usually try to give liquid pain medicine by mouth (most people don't mind the taste). Pills can be given if that is preferred. Sometimes pain medicine can even be squirted into the nose. Numbing cream or a freezing spray can be used to ease the prick of a needle when a blood test is done or an IV is started. For procedures, we can help our patients to choose a comfortable position so that they feel less anxious.

Medicine isn't the only way to reduce pain. We have lots of items on our 'comfort menu!' Some of these items can be provided by the healthcare team and some might be provided by the family. For example; the healthcare team can provide a warm blanket, an ice pack, a splint, or something to watch, play with, listen to, or read. Families might be able to provide additional items to help distract a child or young person with pain, or they can provide a comforting touch. Relaxation techniques can also be helpful.

For children who have had surgery, their pain is managed by the anesthetist (the doctor who helps patients fall asleep) and the surgeon. For many children, especially those going home the same day, oral medications such as acetaminophen (Tylenol®) or ibuprofen (Advil®) will be used to relieve their pain.

Children who need stronger medicine often receive morphine. This type of drug is called an opioid. The amount given is carefully calculated based on weight to ensure that it is safe. It can be given as a liquid or tablet every 4-6 hours. For children who can't eat yet or need a stronger dose of medication, morphine or a similar opioid is given through an IV. The medication can be given as single doses or as a continuous infusion. When given, a child's oxygen level and breathing rate will be continuously monitored by a small sensor that is placed on his/her finger or toe.

Some side effects of opioids include nausea, vomiting, or itching on the face or chest. We can give other medications to help with these problems if they occur.

Some other ways that pain after surgery may be managed are:

- **Patient Controlled Analgesia (PCA)** - Patients receive a low dose of pain medication continuously through an IV. When needed, the patients can also give themselves extra medication by simply pushing a button, such as for dressing changes or getting out of bed. A pump is used to control the dose and it has many safety features to ensure patients receive the correct amount of medicine.
- **Parent Controlled PCA** - Some children need the benefits of a PCA but are too young, or are physically or developmentally unable to manage the button themselves. In these cases a parent or a nurse will be designated to use the pain button for the child. Further detailed information will be offered to you if this option is considered the best choice for your child.
- **Epidural analgesia** is sometimes used for surgeries of the hips, legs, abdomen, or chest. Pain medicine is given through a very narrow, flexible tube that is placed directly into the space around the spinal canal called the epidural space. The medicine is usually given for 3-5 days. During that time most children need a catheter to drain urine from their bladder because the medicine affects the nerves that control the bladder. Children may also complain of numbness or tingling in the legs or abdomen or a feeling of heaviness in their legs. This is normal. Once the epidural is stopped, normal sensation and movement should return within a few hours. The epidural is covered by a dressing, which the nurses check every few hours. As well, a child's breathing rate and oxygen level will be monitored continuously.

What can parents do to help relieve their child's pain?

Children may be fearful of new places, new people and new experiences, especially when they feel sick. Parents play a very powerful role in how children experience pain. In general, the calmer a parent can be, the less worried their child will be. We know that fear and anxiety can make pain worse. For this reason, we created a menu of comfort items to choose from to help calm fears and ease pain. We will work together to create a plan for your child. Encourage your child to let you and the healthcare team know how they are feeling and what might be worrying them. Recognize what your child is doing well, such as telling you about their pain, holding still during a procedure, or being brave.

Sample Comfort Menu: *Something to watch - Something to play with - Something to read - Music - Ice pack - Warm blankets - Splint - Deep breathing - Comforting touch - Relaxation methods*

Most kids find that they do best when they have both comfort measures and medicine.

To learn more about pain and to access resources please see the [Pediatric Pain Information Prescription](#) or contact childhealthinfo@ahs.ca for recommended resources.

Contact Us

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