

Relieving Your Child's Pain

Note to Parents

Your child's doctors, nurses and other caregivers understand that a hospital stay can be a very difficult and stressful time for you and your family. Our goal is to help your child return to the best possible health with minimal discomfort and pain.

We believe children should have access to the best levels of pain relief that can safely be given. That is why our staff includes pain management experts trained to ease your child's pain.

We hope this brochure answers your questions about how we treat your child's pain. If you have any additional questions, we urge you to share them with our staff, who are working together to make your child well.



Hasbro Children's Hospital
The Pediatric Division of Rhode Island Hospital
A Lifespan Partner

593 Eddy Street
Providence, RI 02903
401-444-8638

www.HasbroChildrensHospital.org

What is Pain?

Pain is a feeling of physical discomfort from an injury or disease and usually lasts until the injury heals. Reaction to pain is a personal experience. Each child's response is different.

Pain from a prolonged illness may not go away. Our staff works with children and their families to manage this pain.

Helping Us Understand Your Child's Pain

Our doctors, nurses, pharmacists, social workers, psychologists, child life specialists, physical therapists and occupational therapists work as a team to treat your child's pain and make your child as comfortable as possible.

Sometimes it is difficult for a child to express pain. You know your child best and can help to identify how your child expresses pain or discomfort.

The staff caring for your child may ask you the following questions:

- *What word or sound does your child use to describe pain?*
- *To whom does your child communicate their pain?*
- *How do you know your child is in pain?*
- *What treatments have helped to relieve your child's pain?*

Please let us know if you think the pain treatment is not relieving your child's pain.

How Do We Measure Pain?

Your child's pain is monitored regularly by watching for changes in behavior, specifically shifts in eating, sleeping and playing habits. Our staff also uses a pain scale so that your child can rate the level and intensity of the pain.

The pain scales are geared to the age of each child, their level of understanding and their ability to express pain.

The two most common scales for children are the faces scale and the ladder scale. These scales use pictures and terms children can easily understand to rate pain.

A special scale is used to rate an infant's pain or a child who is unable to communicate pain. This scale looks at behaviors such as crying, facial expressions and body movements.

Relieving Your Child's Pain

We use a variety of methods to help your child feel better, including non-drug treatments and drug treatments. Non-drug treatments to ease your child's pain include hot or cold packs, relaxation, music and other kinds of distractions. For more information on these methods, please ask a staff member.

Many times non-drug treatments and drug treatments are used together to help provide maximum pain relief for your child.

Medications called analgesics are used to help soothe pain. Opioids and non-opioids are two types of analgesics commonly prescribed.

- **Non-opioids** are used to treat mild to moderate pain and reduce fever and inflammation. Examples include acetaminophen (Tylenol) and non-steroidal antiinflammatory agents (NSAIDs). Examples of NSAIDs include ibuprofen (Motrin) and ketorolac (Toradol). Aspirin is sometimes used as an anti-inflammatory agent in children, but should be used only under the direction of your child's doctor.
- **Opioids** are for severe pain. They may be taken as a tablet or liquid or given intravenously. Medications like morphine, Fentanyl and hydromorphone (Dilaudid) are commonly used to treat a child's pain.

How Often Do Children Receive Pain Medication?

We evaluate your child's condition to make sure the child is receiving the best possible care. Pain medication is given on a scheduled basis.

Many medications work best when the appropriate amount of a drug is given at scheduled intervals to provide continuous pain relief. Giving your child medicine on a regular schedule provides better pain relief and prevents the need to administer a higher dosage of medication when the pain increases or returns.

Occasionally patients require breakthrough pain relief in addition to the scheduled medication. The decision to give additional medication is based on your child's reported pain rating, your observations and our assessments. In some cases, medication is given to a child to prevent pain during a test or procedure.

The staff caring for your child will keep you aware of these decisions.

Side Effects of Pain Medication

Side effects and reactions to pain medications such as constipation, nausea, vomiting, drowsiness and itching are very common.

- Children who are constipated should be encouraged, if able, to drink plenty of fluids and eat a diet high in fiber. There are also medications to help relieve the constipation.
- Sometimes when medication is taken on an empty stomach, nausea and vomiting may result. We encourage children to take some medicines with food. If your child is experiencing nausea, we will give medicine to settle the stomach.

- If your child is sleepier or drowsier than usual, it may be a side effect of the pain medication. Sleepiness typically disappears when your child's body adjusts to the medication.
- Itching is a common side effect of morphine and Dilaudid. If we can't control the itching with medicine, then we will change the pain medicine.

How Is Pain Medication Administered?

The health care team caring for your child may discuss a number of methods for administering pain medication. These methods include:

- **Oral** - a tablet, capsule or liquid given by mouth. The tablet can be swallowed whole or crushed and mixed with food.
- **Topical** - drugs in a cream or patch formula are applied onto the skin.
- **Rectal** - the medication is given as a suppository to children who have difficulty taking the medication orally.
- **Subcutaneous** - the drug is injected into the body with a needle just below the skin.
- **Intravenous (IV)** - the medicine is given through a vein, with IV fluid.
- **Patient Controlled Analgesia (PCA)** - your child can give himself/herself medicine by pushing a button. If he or she is on a PCA and you have not yet received an educational booklet, please request one from our staff.
- **Epidural** - the drug is given through a small tube inserted into your child's back.
- **Intramuscular** - medication is injected into the muscle; this is typically referred to as a shot.

Common Myths of Pain Management

There are many misconceptions about medications and pain management. Please review the list below to better understand pain management.

False	True
Pain medication is addictive.	People do not get high from pain medication. It is not addictive when it is used properly. The fear of drug addiction has made people believe that children with long-term pain will get hooked on their pain medication.
Pain will not be controlled if medication is used for a long period of time.	If the pain medication no longer provides effective pain relief, the staff safely adjusts the pain medication.
If the medication doesn't work right away, it won't work at all.	Everyone responds differently to pain medication and it may take time to choose the best combination of drugs.
Living with pain is a sign of strength.	If your child's pain is under control he/she will have more strength to recover.
Infants do not feel pain.	Infants and children do feel pain; they express it in different ways than adults.
If children can be distracted, they are not in pain.	Even though children can be distracted through social and play activities, they can still be in pain and need to receive medication.
Children can't tell you where they hurt.	Children can often identify their pain by using various pain assessment tools or drawings.

The information in this guide is provided by Hasbro Children's Hospital.