

Managing Pain in Children - General Principles

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Withholding evidence-based analgesia to hospitalized infants and children in pain is not only unethical, but may cause immediate and long-term harm. Analgesic treatment is mandatory for children when they undergo painful procedures and no avoidable suffering is acceptable nowadays, even for so-called minor interventions. In 2019 it would be considered inappropriate to perform elective painful procedures in children without treatment to avoid or minimize pain, because poorly managed pain has serious short- and long-term consequences.

Based on the 2012 WHO guidelines, the presenter will discuss evidence-based safe multi-modal analgesia, which may include one, several or all of the following approaches in the effective treatment of an individual child:

- Pharmacology (e.g. simple analgesia and/or opioids and/or adjuvant analgesia)
- anesthetic interventions (e.g. neuroaxial analgesia, nerve blocks)
- rehabilitation (e.g. physical therapy, occupational therapy, sleep hygiene)
- psychology (e.g. cognitive behavioral therapy), and
- age-appropriate positioning and integrative ("non-pharmacological) therapies, such as breathing techniques, self-hypnosis, distraction etc.

Multimodal analgesia act synergistically for more effective pediatric pain control with fewer side effects than any single analgesic or modality.