Pain management (acute) - children

Summary

- Always see your doctor for diagnosis and treatment if you think your child is in pain.
- Non-drug strategies can be very effective for relieving mild pain.
- If using an over-the-counter medicine, choose one specifically formulated for your child’s age. Follow the dosage recommendations exactly as directed and use the child’s weight to calculate the right dose.
- Measure the dose accurately with an oral syringe or the device that comes with the medicine – never a kitchen spoon.

Pain in children should always be managed. Causes of pain in children include injury, disease, medical interventions such as vaccinations or surgery and normal childhood events such as teething. If you think your child is in pain, always see your GP for diagnosis and treatment.

It may not be necessary to give your child medication to relieve their pain. Many other treatments are available that can be useful to help a child’s pain. If a pain-relieving medicine is needed, take care to always read the medicine labels and packaging and follow dosage instructions exactly as directed.

In mild cases, such as pain from a new tooth (eruption), over-the-counter products such as child formulations of paracetamol or ibuprofen may be used. In more serious cases (such as pain from a broken bone), a doctor may need to prescribe stronger medicines to manage the pain, often in combination with another pain reliever.

How to measure pain in children

Measuring a child’s degree of pain can be tricky, particularly in babies and very young children who have no direct way to communicate.

Suggestions include:

- See how the child responds to the pain – they may cry, moan and groan, grimace, writhe, cradle the sore body part or protect it from accidental bumps.
- See how the child looks – for example, they may be flushed and sweaty, or pale and drawn.
- See how the child behaves – for example, they may be quieter than usual or more irritable, stop playing, lose their appetite, be listless or regress to behaviours they have outgrown such as thumb sucking.
- Listen to the child – if old enough, they may use words or drawings to communicate the severity of the pain.
- Ask a child (7 or older) to rate their pain on a scale of 0 to 10 with 0 being ‘no pain’ and 10 being the worst pain.
- Measure physical reactions – the doctor can check for physical signs of pain such as heart rate, blood pressure and blood oxygen levels.
- Trust your parental instincts – no one knows your child better than you do.

Non-opioid pain-relieving medications

Non-opioid medicines are used to treat mild to moderate pain. Some examples of non-opioid medicines include:

- paracetamol
- non-steroidal anti-inflammatory drugs (NSAIDs)
- local anaesthesia block.
Paracetamol
Paracetamol is available over the counter and has been safely used for many years for pain in children, but giving too much paracetamol can harm your child.

Be sure to give the dose that is written on the bottle or pack according to your child's weight.

Note: Paracetamol is not recommended for babies under one month.

There is only a small difference between the maximum daily dose of paracetamol and an overdose, which can cause liver damage. Large amounts of paracetamol are very dangerous, but the effects often don’t show until about two to three days after taking the tablets. However, treatment must be started early to be effective, before the effects begin.

Always seek treatment for paracetamol overdose immediately, even if the person seems quite well.

Non-steroidal anti-inflammatory drugs (NSAIDs)

NSAIDs are medicines that reduce inflammation (redness and swelling), such as ibuprofen (available over the counter).

Note: Ibuprofen is not recommended for babies under three months.

Local anaesthesia block

A local anaesthesia block is an injection that a doctor may give your child directly at the injured area to numb the area and stop them feeling pain.

Opioid pain-relieving medications

Opioid medicines are used to treat moderate to severe pain. Some examples include:

- codeine
- morphine
- tramadol
- oxycodone.

Most opioid medicines should only be given to children under a doctor’s instructions. Your pharmacist can advise you if you need to see a doctor for a prescription.

Some parents may fear that their child could become addicted to opioid medicines, but addiction or dependence in children is extremely rare. A short-term course of opioid medicine may have other side effects, but it is unlikely to cause dependence in children when given according to a doctor’s instructions.

Over-the-counter pain relievers

Paracetamol and ibuprofen, both available over-the-counter, work equally well to relieve pain in children and cause few side effects when used correctly for a short period of time.

Giving more than the recommended dose may make side effects more likely or more severe, and can be dangerous. For example, giving too much paracetamol can cause liver damage, while too much ibuprofen may increase the risk of stomach problems.

Be sure to give the dose that is written on the bottle or pack according to your child’s weight.

Unless a doctor has advised otherwise, do not give aspirin to children under 12 years of age. Aspirin use in children is linked to an increased risk of Reye’s syndrome, a potentially fatal condition that involves damage to the liver and brain.

Check with your doctor first before giving over-the-counter medicines that contain codeine.

Safe use of over-the-counter pain relievers

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Parents and carers can follow some simple steps to ensure they give over-the-counter pain-relieving medicines to children safely and effectively. These include:

- Always check the active ingredient in a medicine to ensure you’re not doubling up with another medicine that contains the same active ingredient.
- Use a medicine that is specifically formulated for the child’s age.
- Follow the dosage recommendations exactly as directed. Work out the right dose using the child’s weight. Never guess the amount to give or try to figure it out from adult dosing instructions.
- If a child is heavy or underweight for their age, check the right dose to give with a doctor or pharmacist first.
- Give pain medicines regularly to keep on top of the pain.
- Do not think that increasing the dose will give your child more effective pain relief – it may increase their risk of side effects or cause them harm. If your child is in a lot of pain, seek immediate medical attention.
- Use an oral syringe or the measuring device that comes with the medicine to give the dose. Never use a kitchen spoon – this is not an accurate way to measure the right dose.
- Keep a record of all medicines given, by whom and for what reason. Include the date, time, strength of medicine, child’s weight, exact dose given and a tally of the daily total.
- If your child has a fever, this does not necessarily mean they will need medication. A mild fever is not usually dangerous and can help fight infection. Pain-relieving medicines should be given if your child is in pain, but may not be necessary for fever alone.

Always see your doctor if you are concerned about your child’s health; if your baby is under three months of age or if pain persists.

Remember - check the dose and active ingredient

When measuring and administering a child’s dose of medicine, ask yourself:

- What is the active ingredient in the medicine?
- Have I calculated the right dose based on the child’s weight and the strength of the medicine?
- What is the safest and most appropriate device for measuring the child’s dose?
- How do I measure and give the dose accurately?
- Have I recorded what, when and how much medicine was given?

Managing different levels of pain in children

A combination of medicines may be more effective in managing moderate to severe pain than a single medicine. Ask your doctor or other health professional to explain your child’s medicine schedule.

Other pain-management strategies for children

Many treatments other than medication can be used to relieve a child’s pain. Suggestions for parents include:

- Give plenty of cuddles and attention.
- Swaddle or wrap babies.
- Show the child that you are taking their pain seriously.
- Tell them what is happening using words they can understand. Fear and anxiety are known to increase perception of pain.
- Reassure them that their pain will be managed and that the treatment (such as an injection) will be less painful than the pain itself.
- Allow your child some control over the situation – for example, older children could decide whether to take their pain medication as a syrup or tablets, and ask what flavour of syrup they prefer.
- Distract your child with games, books or favourite television shows.
- If a child is teething, simple measures such as gently massaging the gum with a clean finger or chewing on a teething ring may help to relieve discomfort.
- Icepacks or heat treatments can reduce pain. Ask your doctor for advice.
If your baby is younger than six months and you are breastfeeding, feed them while they are receiving a painful procedure like vaccination.

Your health professional may give a baby younger than twelve months a sucrose solution to help with painful procedures.

Unhelpful pain-management strategies

Some approaches only increase a child’s fear and anxiety. Unhelpful strategies that are best avoided include:

- fake reassurance – don’t tell them that a procedure, such as an injection, won’t hurt when you know it will
- belittling – don’t ridicule your child for acting ‘like a baby’ in the hope they will respond with bravery
- being anxious yourself – don’t fixate on their pain or scare them with gruesome talk about future suffering they may have. Research shows that a person who expects the worst will perceive their pain as more painful.

Where to get help

- Your doctor
- Pharmacist
- Maternal and child health nurse
- Maternal and Child Health Line (24 hours) Tel. 13 22 29
- NURSE-ON-CALL Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
- Medicines Line Tel. 1300 633 424
- Adverse Medicine Events Line Tel. 1300 134 237
- Austin Health Inpatient Pain Service Tel. (03) 9496 3485
- Austin Health Outpatient Pain Service Tel. (03) 9496 2211

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