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Should you treat kids' pain before going to the ER?

"Yes!" says UAlberta emergency room pediatrician, who debunks common myths.



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Parents of children in pain need to know that less pain makes diagnosing children's pain easier, not harder. (Pixabay)

By LESLEY YOUNG

Children often arrive at the ER in acute—and needless—pain, says UAlberta pediatric emergency medicine physician Samina Ali.

"Parents often aren't aware that they can and should treat the pain before heading to the ER," said Ali. "In some cases, they're leery about giving any kind of pain medication to their kids because of misconceptions. But pain medications are safe to use and no child should be in pain if they don't have to be."

- UAlberta's NO OUCH study looks to find best ways to treat kids' physical pain (<https://www.folio.ca/ualbertas-no-ouch-study-looks-to-find-best-ways-to-treat-kids-physical-pain/>)

Here's what you need to know next time your child's pain is severe enough to warrant a trip to the hospital or the doctor's office.



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Samina Ali

Less pain makes diagnosis easier, not harder.

Often parents believe that treating their child's pain before visiting the doctor will make it harder to diagnose the illness or injury, said Ali.

"It is a huge myth that doctors need pain to be present in order to properly assess a patient," she said. "In fact, it makes it much more difficult to examine a child and figure out what is going on when they are writhing in agony."

Most importantly, no over-the-counter pain reliever is capable of masking a more serious ailments, such as appendicitis, she added. "So don't hesitate to treat your child's pain on your own for that reason alone."

Pain is worse for kids than side effects of common pain medications.

"We have solid evidence over three decades that when you don't treat pain well in infants and children, there are long-term biological and psychological changes," said Ali.

These include heightened sensitivity to pain, health-care phobias like fear of needles, and either overuse of the health-care system or avoidance. Pain's long-term risks are far greater than any side effects that may result from over-the-counter painkillers like ibuprofen and acetaminophen, she added.

In addition to treating the pain with ice, heat, massage and/or medication, Ali encourages distraction. "After an injury or during a painful procedure like bloodwork is a great time to distract your child with interactive play or a portable electronic device."

Health practitioners often fail to offer pain medication.

Ali and colleagues conducted surveys in the Emergency Department (ED) staff and found that when offered by staff, parents accepted pain medication for their children 91 per cent of the time.

Unfortunately, staff were only offering it to families 45 per cent of the time.

"Often doctors are running between 10 to 15 patients in E at any one time. So they may be short on time, pulled in other directions by another very sick patient, they forget to ask or they're just not sure what pain medication to offer," explained Ali.

Bottom line: parents should feel free to ask any member of their health-care team for medication if their children are in pain and it isn't offered.

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