



CHAPTER 13

Helping children with pain

Children get hurt all the time. They feel pain from falls, wounds, or other accidents, from illness, from physical or sexual abuse, or even from health care, such as injections, examinations, or side effects from medicines. Some pain is part of life, but no child should have to suffer pain if it can be avoided.

Pain and illness from HIV

Giving ART to children with HIV as soon as possible prevents a lot of pain. Without ART, children with HIV are ill more often. Their illnesses are harder to treat and take longer to heal, and some illnesses cause a lot of pain. For example, ART prevents mouth and throat sores that can be painful and long lasting in a child with HIV.

Untreated HIV can also cause serious and painful illnesses that are usually very rare in children, such as cancers. HIV infection throughout the body causes pains that can be difficult for a child to describe or understand, such as headaches, muscle aches, joint pain, and tingling or burning in arms or legs.

Pain can be hard on children

Some people think babies and children do not feel pain, but they do. Too much pain makes children more ill, especially when it makes them stop interacting with others, stop eating, digest food poorly, or breathe in slow, shallow breaths. Children in pain have less energy, grow poorly, and are slower in their abilities to think and understand things.

Feelings such as grief, worry, fear, loneliness, or exhaustion can hurt a child's spirit and cause or add to a child's pain. Unkindness and cruelty because of stigma from HIV cause a lot of emotional pain for children.

There is almost always something you can do to relieve pain. To lessen a child's pain, try to think of how she may be suffering physically, emotionally, socially, or spiritually, and the different ways you can help.

*I hurt all over.
Will I ever be
well?*



How to know when a child is in pain

Children show they are in pain in many ways. Some are easier to see and understand than others. But you know your child, and if you watch and listen closely and think of how your child usually behaves, you can often tell when something is wrong.



Some types of pain are sharp, sudden, and caused by something easy to see and understand.



Some pains are caused by things you cannot see, such as joint pain or headaches. These can be just as hard on a child as a bad cut, especially if they are long-lasting.

Common signs of pain in children

Because children are not always able to describe or tell us about pain, we have to watch for signs.



- Cries, groans, or moans when touched or moved, or without an obvious reason
- Is upset or unable to rest



- Holds a painful part of the body
- Does not move a part of his body



- Has fever or heavy sweating
- Breathing and heartbeat are fast



- Keeps to himself, is sad, or is very quiet
- Refuses to eat or play



- Holds hands over ears to keep out noise

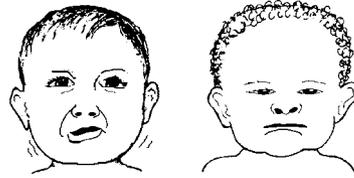
It hurts, mama!



- Talks about what hurts

Signs in babies

Look for crying and signs of distress on the baby's face or in how he holds his body. He may tap his head if it hurts.



A quivering chin, clenched jaw, or grimacing face can be a sign of pain.

Pain may also cause a baby to tense her legs, either kicking them out or drawing them up towards her chest. Or if pain is very strong, it may make a baby move around a lot.



A child in extreme pain may hold her whole body very stiff and still, or strongly arch her back.

He ate, he is dry, why won't he stop crying? Maybe his arm hurts. He cries louder when I touch it.



If your baby is crying and you know he is not hungry, wet, or tired, think about whether he might be in pain. Crying that sounds different from usual may be a sign of pain.

Signs in young children

Children old enough to talk or play have more ways to show you they are in pain. Sometimes children show you by how they play.

A child in pain may pull away or cry out when you touch him. You may think he does not want you near, but he will usually stay near enough so he is not left alone.

Children can also have pain and show no signs, especially if they are very weak, or have had pain for some time and have grown used to it.

Head hurt, baby?



How to talk with young children about their pain

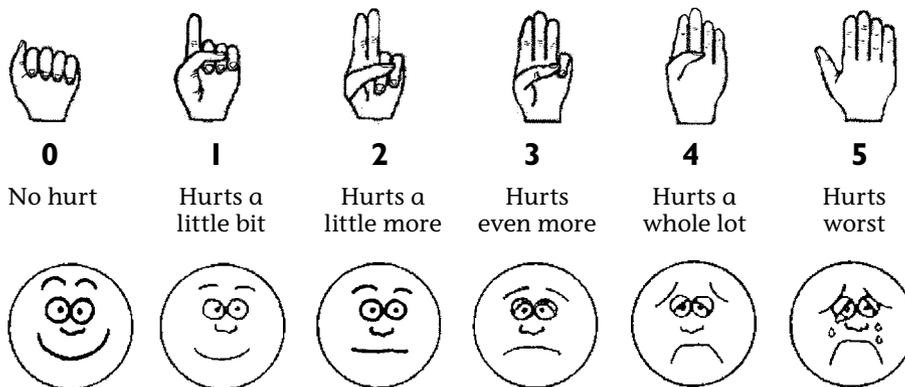
If your child is old enough to talk, you can ask her to tell you about her pain. Sit at the child's level and be gentle and patient. A child in pain may need more time and help to answer questions.

It may help to ask about pain in different ways:



Children older than age 5 may be able to use a simple pain scale. Say how much pain it means as you hold up different numbers of fingers. Then ask the child how many fingers best describes the pain he feels.

But even adults have problems describing their pain, so do not rely on this alone — watch and talk with the child.

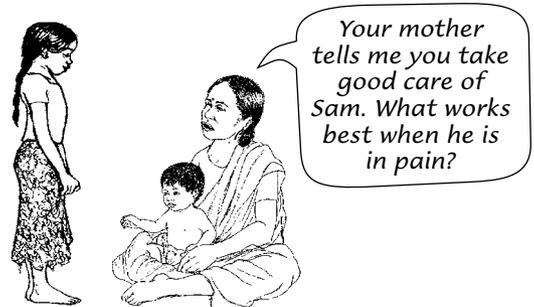


Believe a child when she says she has pain. No one wants a child to hurt, so sometimes we want to believe a child is not really in pain. In fact, many children try to hide pain to stop you from worrying. Or they may want to avoid medicines or an injection. Also, if a child thinks pain is a punishment for doing something “bad,” she may try to hide it so you will not know she was “bad.”

When talking to a young child, look for signs of pain and discomfort. Keep in mind that children in constant pain sometimes stop showing their pain much, and do not know how much they are hurting or how to describe their pain.



If you are a health worker, ask the child's mother or other caregivers how the child has been acting, what he is like when he is not sick, and how they think he feels.



When you first meet a sick child, get to know him a bit before you ask about pain. See Chapter 4: Communicating with children.



It may help to watch your child for signs of pain when she is playing or talking with another person — she may show her pain differently.

How to treat a child in pain

Pain should be treated as soon as possible — there is always a way to help a child feel less pain. A child in less pain is happier and also has more energy to fight illness, grow, and develop. To treat pain, see pages 256 to 258.

For a child with HIV, the most important way to reduce pain for the long term is to give him ART every day (see Chapter 11). ART prevents many illnesses that cause pain.

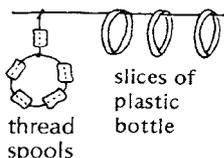
Treating all infections, wounds, or illnesses will lessen pain in children. Chapter 12 has information on how to treat common skin problems, stomach pains, ear infections, fevers, coughs, sore throat, and other infections that cause children pain.



How to help a child in pain

How we care for children can lessen pain. If possible, keep your child at home, not in a hospital. Familiar surroundings, not too bright or noisy, being close to you, and gentle touch all ease a child's pain.

Cuddle, carry, or rock your baby and protect her from too much light or noise. Being wrapped in a soft cloth can comfort her. Breastfeed more often if your baby has pain.



- Make a mobile to hang over the baby's bed. It can take her attention away from her pain.

- Gently massage your child with oil or lotion. This can relax the child's body, reduce pain, and keep the child's skin healthier.

- To prevent bed sores, help a child change positions every 2 hours.

Blow slowly and feel the pain go out.



Which feels better, warm or cold?



Here dear, take some soup.

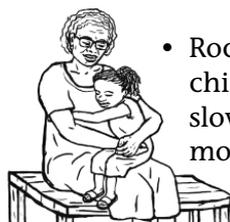


- Use a child's magical thinking. Show her how to blow out her pain, or let it go into a stone.

- Heat or cold can help with pain. Use hot or cold water to make a cloth warm or cool, and put it on the painful part.

- Sometimes a little food helps. Offer food, but do not force a child to eat.

- Gently squeeze her hand or press lightly but firmly on another part of her body.



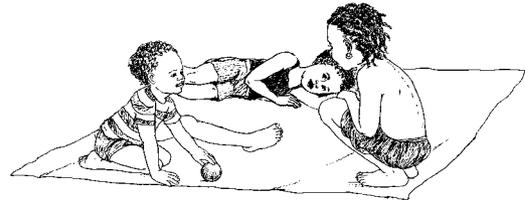
- Rock the child with a slow, steady motion.

- Teach the child to take slow, controlled breaths.

Take your child's mind off his pain. Playing with him, telling stories, and singing or playing music are good ways to hold his attention. Older children may also be able to read, do puzzles, listen to the radio, watch TV, or make things.



Older children used to being with their friends are often lonely when they are sick and hurting. While you treat your child's illness and pain, also look for ways she can play. Even sick children need to play.



If the illness cannot pass to others, ask a child's friends to come and play with her at home. Reassure their families that it is safe.

You can teach a child ways of breathing and thinking that can ease pain and worries. Ask her to think of a place or activity that makes her happy. Then teach her to count to 4 as she slowly breathes in, holds her breath briefly, and then breathes out slowly, counting to 4 or 5. Repeat several times.



Ask a local tailor to keep fabric scraps for you and make a comfort pillow or doll with your child. Like a "security blanket" or favorite toy, it will make her feel better.

Medicines for pain

Children with HIV or other illnesses, such as mouth or skin sores, serious infections, or cancer, may have pain that will only go away or lessen by using pain medicine. Pain medicine is available in most places and some clinics may provide medications without cost. Pain medicine is safe for children and can make a child feel a lot better.

To best treat a child's pain at home with medicine:

- Give medicine by mouth, not by injection.
- Give regular doses as prescribed and dose routinely. Do not wait until the pain gets worse.
- Start with ibuprofen or paracetamol (acetaminophen), see doses on page 257.

Ibuprofen and paracetamol are good, low-cost medicines that treat pain in children and are easy to find. They can be given 3 to 5 times a day, and paracetamol can be taken for long periods of time. If these do not control the pain, use stronger medicines.



Morphine and other narcotic (opioid) medicines are strong medicines used to relieve pain. Usually, a small amount is given at first and gradually increased as needed until the dose is enough to ease the child's pain. Sometimes other medicines are also given to the child, to prevent nausea or constipation caused by morphine.

Morphine is very safe to use with a child in pain. Many people, including some health workers, worry that morphine is dangerous for a child. They fear the child will become addicted, or that giving too much will kill the child. But morphine is not addictive to a person in pain. The right dose will stop the child's pain and will not endanger him.

Children need smaller amounts of pain medicine than adults. For babies, pain medicine often comes as a liquid that must be measured carefully. For doses and other information on how to use these medicines, see page 259. It may be best to get help from a health worker to find out what dose of morphine your child needs. Once you know, you can safely give the medicine each day.

Paracetamol (acetaminophen)

Paracetamol treats both pain and fever and is very safe for children.

But do not give your child more than the recommended amount. Too much can be poisonous. Read the label or talk to your health worker or pharmacist to know for sure how much paracetamol is in your medicine, so you can give the correct dose. Some cold and cough medicines include paracetamol along with other medicines. So also read the labels for any other medicines your child takes, and if they contain paracetamol, give less additional paracetamol to account for what the child takes in those medicines. Keep paracetamol where children cannot reach it, especially if it is in a sweet syrup.

Give medicine before a child is in pain. Do not wait until pain is very strong. Pain is easier to control this way and requires less medicine.

Dose by weight: Give 10 to 15 mg for each kg the child weighs, up to 4 doses a day, and no more than 60 total mg per kg in a day (sunrise to sunrise). Wait 4 hours between doses.

Dose by age if you cannot weigh the child. Babies must be at least 4 months old.

Age	Dose	Using liquid-120 mg in 5 ml OR Using 500 mg tablet		
A child under 1 year old	60 mg	2.5 ml		
A child 1 to 2 years old	125 mg	5ml	OR	¼ tablet
A child 3 to 7 years old	250 mg	10 ml	OR	½ tablet
A child 8 to 10 years old	375 mg			¾ tablet

Ibuprofen

Ibuprofen treats muscle pain, joint pain, headache, and fever.

Dose by weight: Give 5 to 10 mg for each kg the child weighs, every 6 to 8 hours, up to 3 or 4 doses a day, and no more than 40 total mg per kg a day (sunrise to sunrise). Do not give for more than 10 days in a row without talking to a health worker. Give with or after food to prevent belly pain.

Dose by age if you cannot weigh the child. Babies must be at least 4 months old.

Age	Dose	Using liquid-120 mg in 5 ml OR Using 200 mg tablet		
A child 4 to 12 months	40 to 50 mg	1 ml	OR	¼ tablet
A child 1 to 2 years old	80 to 100 mg	2 ml	OR	½ tablet
A child 3 to 5 years old	120 to 150 mg	3 to 4 ml	OR	¾ tablet
A child 6 to 10 years old	200 mg			1 tablet

Use paracetamol and ibuprofen together for strong pain

If you have both of these medicines, and one alone does not control pain in your child, you can try giving both, either together or at different times. These medicines work in different ways, so doing this means your child gets more pain relief, but not a harmful amount of either medicine. You must plan the doses to be the right number of hours apart, and take care not to mix up the medicines. It is best to write down the time when you give each dose, to help you keep track.

An example: Your child is 3 years old and weighs 18 kg. Using only one medicine, she still has pain. Her paracetamol dose is 250 mg, every 4 to 6 hours. Her ibuprofen dose is 100 mg, every 6 to 8 hours. Both can be given up to 4 times a day.

Here are 2 different ways to use paracetamol and ibuprofen together for pain:

START	
	6 am ibuprofen and paracetamol
	7
	8 am
	9
	10 am
	11
	12 noon ibuprofen and paracetamol
	1
	2 pm
	3
	4 pm
	5
	6 pm ibuprofen and paracetamol
	7
	8 pm
	9
	10 pm paracetamol
	11
	12 midnight ... ibuprofen
	1 If she wakes in pain near midnight, you can give a dose of ibuprofen.
	2 am
	3
	4 am
	5
START AGAIN	

START	
	6 am ibuprofen
paracetamol.....	7
	8 am
	9
	10 am
paracetamol.....	11
	12 noon ibuprofen
	1
	2 pm
paracetamol.....	3
	4 pm
	5
	6 pm ibuprofen
paracetamol.....	7
	8 pm
	9
	10 pm
paracetamol.....	11
	12 midnight ... ibuprofen
	1
	2 am
	3
	4 am
	5
START AGAIN	

Morphine

Morphine relieves moderate or strong pain very well, and must be prescribed by a health worker. You can learn to give morphine to a child by mouth at home. In a hospital, morphine is often given in the vein (IV). It is safe to give children morphine and it makes them feel much better.

Ask a health worker how much to give. They often start with a small dose and give a little more every hour until the child's pain stops. Then they add up how much they gave all together to relieve the child's pain, and give that amount every 4 hours. The goal is to find a strong enough dose to control the pain, without giving so much that the child becomes sleepy or has too many uncomfortable side effects. Different children need different amounts of morphine for the same pain. As long as side effects are few and manageable, you can continue to raise the dose slowly until it works. For severe pain, you can also use ibuprofen and paracetamol with morphine, and you will need less morphine. This means there will be fewer side effects from morphine.

Morphine comes in a prepared solution to give by mouth with 2 mg in each ml of liquid, or as tablets of 10 mg. The least costly way is to have a pharmacy mix morphine powder into water for drinking. You can make a 5 mg, 50 mg, or 100 mg in 5 ml solution this way.

Give morphine regularly every 4 hours for pain. If the child becomes sleepy with this dose during the day, lower each dose a little but watch for signs of pain.

Dose:

A child 1 month to 12 months old: 0.1 to 0.2 mg for each kg the child weighs

A child 1 to 2 years old: 0.2 to 0.4 mg for each kg the child weighs

A child 2 to 5 years old: 0.4 to 1 mg for each kg the child weighs

A simple way to start a child of any age on morphine, especially if you cannot weigh him, is to start with 1 to 2.5 mg of morphine. Give this every 4 hours for 1 day. If the child still feels pain, add more morphine to the dose — half of the previous day's dose. You can increase the dose every day until you reach a dose that stops the pain between regular 4-hour doses.

Watch for signs of too much morphine — very slow breathing, difficulty breathing, or being very sleepy. These are signs the dose should be smaller.

To help a child sleep through the night

You may also give more morphine at bedtime so the child will not wake up in pain in the night. First try the regular dose plus half the dose (if the child's regular dose is 2 mg, give 3 mg at bedtime). If the child still wakes during the night with pain, double the regular dose before you put your child to bed for the night.

How to give an extra dose if pain returns between regular doses

If the child's pain comes back between regular doses, you can give an extra dose of morphine. It is best to give more medicine quickly instead of waiting for the next dose when the pain has become stronger and might need even more to be effective. To treat pain between regular doses, give an extra dose that is half of one of the regular doses. Keep track of how often you do this. If you must give extra doses more than half the time, you should increase the regular dose you give.

Side effects of morphine

Most side effects happen at the start of treatment or when the dose is increased. If they do not stop after a few days, the morphine dose should be reduced.

Many children have constipation (hard stool) from taking morphine. To prevent and help with this, have the child drink plenty of water (or breastfeed often) and, if the child is older than 6 months, give foods high in fiber such as bran, cassava, carrots, turnips, pumpkin or sunflower seeds, and fruits. You can also give dried and crushed paw paw (papaya) seeds. If stool will not come out, giving the child a small spoonful of oil in the morning may help it move later in the day.

A child may feel ill or vomit during the first few days of taking morphine. A health worker may prescribe another medicine to help with this. Some children keep feeling ill on morphine and need to change to another pain medicine.

Sometimes children get headaches, or have a dry mouth, or become dizzy or light-headed, or have changes in their mood while taking morphine.

Morphine's most dangerous side effect is slow breathing. To check breathing, count breaths for a minute. Healthy breathing for children of different ages is:

- 20 or more breaths a minute in a baby from birth to 6 months old.
- 16 or more breaths a minute in a child from 6 months to 2 years old.
- 14 or more breaths a minute in a child from 2 to 5 years old.

Too-slow breathing is a sign the dose should be reduced. Try reducing by half.

Warnings: Some cough medicines contain codeine, which is related to morphine. Do not give a child any medicine with codeine in it while also giving morphine.

Do not stop morphine suddenly. Lower the dose slowly and give it less often, over a few days if treatment was less than 2 weeks. If longer, stop over 5 to 10 weeks.

Morphine sometimes comes in a prolonged release (slow release) form, which is given less often, usually every 8 to 12 hours. This form is more costly and not widely available. If you want to use it, ask a health worker how much to give and how often. Do not give this slow-release form every 4 hours.

Helping children who worry about illness and pain

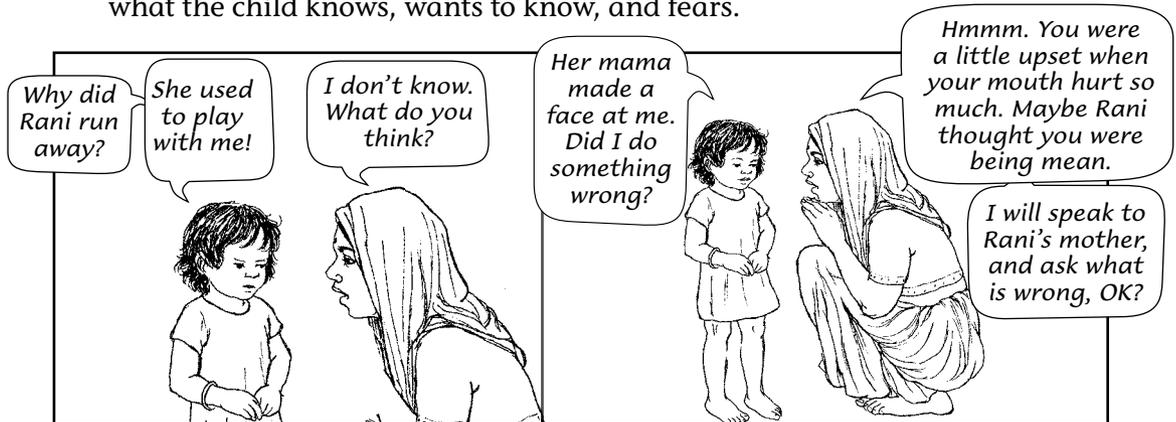
Children in pain, especially older children, are often worried and afraid, which can make their pain worse. Talk with them about their illness to learn what kind of support they need, and to gently correct any wrong ideas they have. Ask your child how she feels and listen with care to her answers. Help her understand that feeling distress is normal when you are ill or hurting. Reassure her that you will do all you can to ease her pain. But be honest. Do not promise you will completely stop her pain unless you are sure you can.



Children also need healthy ways to express their feelings. For example, ask them to tell a story or draw a picture that shows how they feel. For more ways to help children express feelings about illness, see Chapter 4.

Children may ask questions about their pain or illness. To help:

- Give your child your full attention and show you are listening. Be patient and listen to everything your child says.
- Try to answer difficult questions in simple, reassuring ways. Think about what your child can understand. Ask questions to find out more about what the child knows, wants to know, and fears.



It is difficult for most caregivers to have a child feeling pain and to be unsure how to help. Take care of yourself, so you can be calm and patient, which helps both your child and yourself as you try different things. Ask for support, especially if you are tired, upset, or also in pain yourself. See pages 17 to 19 for more about ways caregivers can support themselves and each other.