

# Pediatric Pain Management

## Pain coping strategies for families and caregivers

There are many ways that you can help your child's chronic discomfort. If you have questions about any of these tips, please discuss them with your pain physician, psychologist or physical therapist. Your involvement and response play an important part in your child's pain treatment. As your child's pain management team, we are here to help support you through this process.

### Minimize pain discussion

- Remember that all pain is real. Never refer to pain as being "all in your head" or something that is "made-up."
- Avoid ongoing or frequent discussions about pain or asking about pain symptoms.
- Focus discussions on activities your child can do.

### Responding to discomfort

- Encourage the use of coping strategies as directed by the chronic pain team:
  - Relaxation: breathing exercises, progressive muscle relaxation and visualization
  - Distraction: enjoyable or soothing activities such as listening to music or taking a shower/bath
  - Movement: walking, swimming, dancing, cycling

### Preventing and managing discomfort

- Make sure your child maintains good sleep hygiene (see sleep hygiene handout). Getting restful sleep will help your child's body recharge for the day.
- Encourage daily activities, hobbies, school participation and social events. Even when your child is having pain, do not be afraid to allow them to do the things they enjoy, especially if you have worked out a plan with your child's physician or physical therapist for not overdoing it. A big goal of treatment is to help your child figure out how to keep doing things they love.
- Keep a daily schedule that is structured and routine. Encourage school attendance, as cleared by your child's PCP. Although school might be tough at first, it is a great place to continue seeing friends, learning and allowing your child's mind to focus on things other than discomfort.

### Key points

- Overall improvement is first measured by increased activity tolerance.
- Part of treating chronic pain is building a strong set of coping strategies.
- Self-care is important for both you and your child.



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## Pain coping strategies for children and adolescents

There are many ways to help with your discomfort. If you have any questions about these tips, please discuss them with your pain physician, psychologist or physical therapist.

### Should I be worried?

When the body's nervous system is working effectively, discomfort is an alarm to get our attention. Sometimes, when the nervous system is not working well, the alarm keeps going off, even when it is not needed. This could result in pain that goes on for months (i.e., chronic or recurrent pain). If this is what is happening in your body, you don't have to worry about damage that is not being taken care of, because it is the alarm (nervous system) that is the problem. The great thing is, we can change the alarm by what you think, feel and do, and your pain management team will work with you to learn all the tips and tricks to lessen the discomfort.

### Tips for everyday life

- Maintain good sleep hygiene (see sleep hygiene handout for tips). Getting restful sleep helps your body recharge for the day.
- Participate in daily physical activity.
- Keep a daily schedule that is structured and routine. Although school might be tough at first, it is a great place to continue seeing friends, learning and allowing your mind to focus on things other than discomfort.

### Do things you enjoy

Even when you are having pain, don't be afraid to do things you enjoy, especially if you have worked out a plan with your physician or physical therapist for not overdoing it. If you have any questions about participating in a specific activity, don't hesitate to ask.

### Responding to discomfort

- Use your coping strategies!
  - Relaxation: breathing exercises, progressive muscle relaxation or imagery and visualization
  - Distraction: enjoyable or soothing activities such as listening to music or taking a shower/bath
  - Movement: walking, swimming, dancing, cycling



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## Pediatric pain psychology

### What is a pediatric pain psychologist and why should I see one?

Dealing with pain can be a challenging experience! Having a team of providers to help with different parts of the pain experience is an excellent way to make sure it is managed in the best way possible. Pediatric pain psychologists help with treating many of the things that lead to pain lasting longer, getting worse or even starting in the first place. They work with your child to help them get back to the things they want to do and find tools to help with discomfort without prescription medication or medical procedures.

### Pain psychologists can structure a program to help your child with pain

- Teaching your child to use different strategies to help the body and mind lessen discomfort
- Helping with the stress and worry that often come with long-term pain
- Helping your child do the things they may have stopped doing because of worry and/or pain

To get started, please contact pain clinic to schedule an evaluation. Your child's psychologist will then determine the need for additional follow-up sessions.



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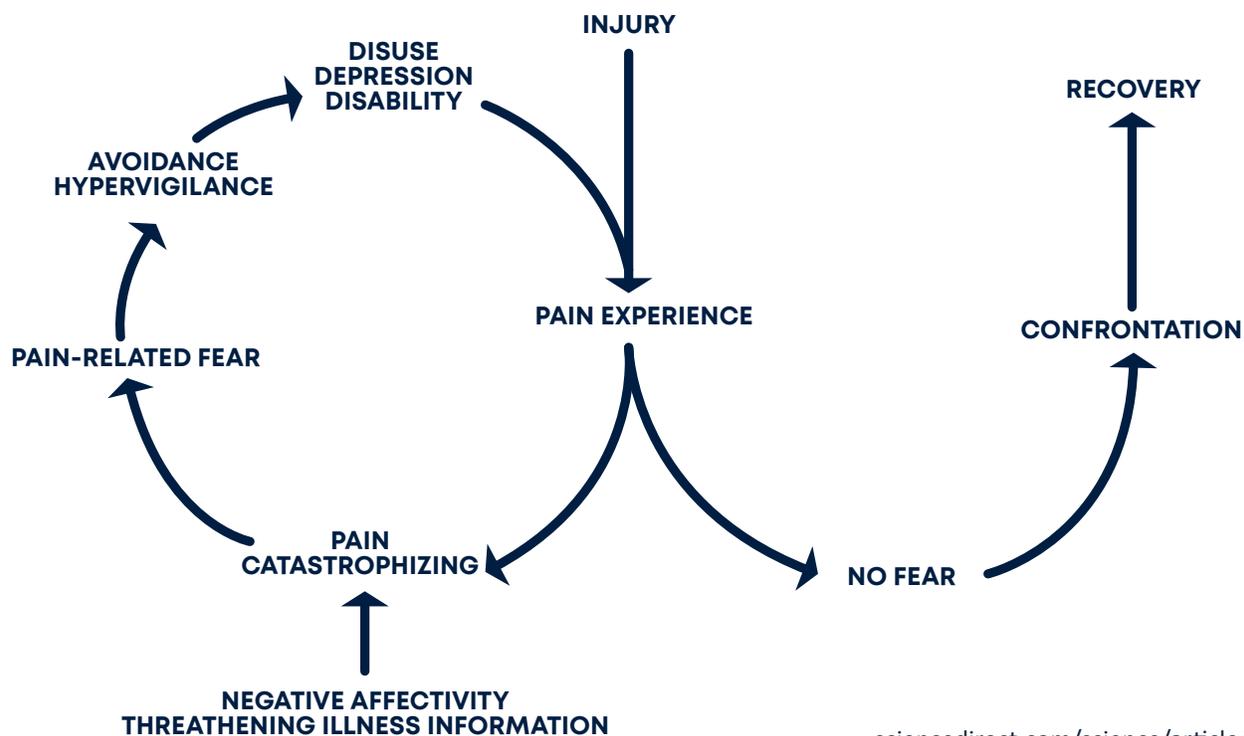
## Fear-avoidance cycle

### Fear-Avoidance

- Fear-avoidance is abstaining from movements or activities based on the fear of increased pain or re-injury.
- Initially following an injury, avoidance is natural and could even be helpful. For example, if you just recently sprained your ankle, it is not the best idea to spend an afternoon at the trampoline park.

### How avoidance affects chronic pain

- While avoidance might be helpful in the early stages of an injury, continued non-use/avoidance may negatively impact pain.
- Long-term withdrawal from activity can not only lead to further increased sensitivity of the injured area, but can also lead to physical deconditioning, increased fear, social isolation and increased anxiety/depression. These factors can feed into the pain cycle.
- Your chronic pain team will help identify strategies to help break the cycle, or better yet, prevent the negative pain cycle from happening in the first place.



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## Pain-focused physical therapy

### What is pain-focused physical therapy treatment?

Individualized care focused on improving chronic pain is provided by physical therapists with specialized training and experience who work with the pain management team (anesthesiologists, pain psychologists, nurse practitioners and nurses). Treatment is focused on understanding pain while working to improve self-management of pain to increase function and quality of life.

The goal of this therapy is to decrease fear of movement and pain to improve the ability to participate in age-appropriate activities. This is accomplished through education, strengthening exercises, manual therapy and functional movement.

### What to expect?

All physical therapy referrals begin with a comprehensive evaluation to determine how to best accomplish the family and patient's goals. Each treatment plan is tailored to the individual needs of the patient. The patient will be expected to complete a home exercise program in addition to attending sessions in the clinic to achieve the best outcomes.

### Need an appointment?

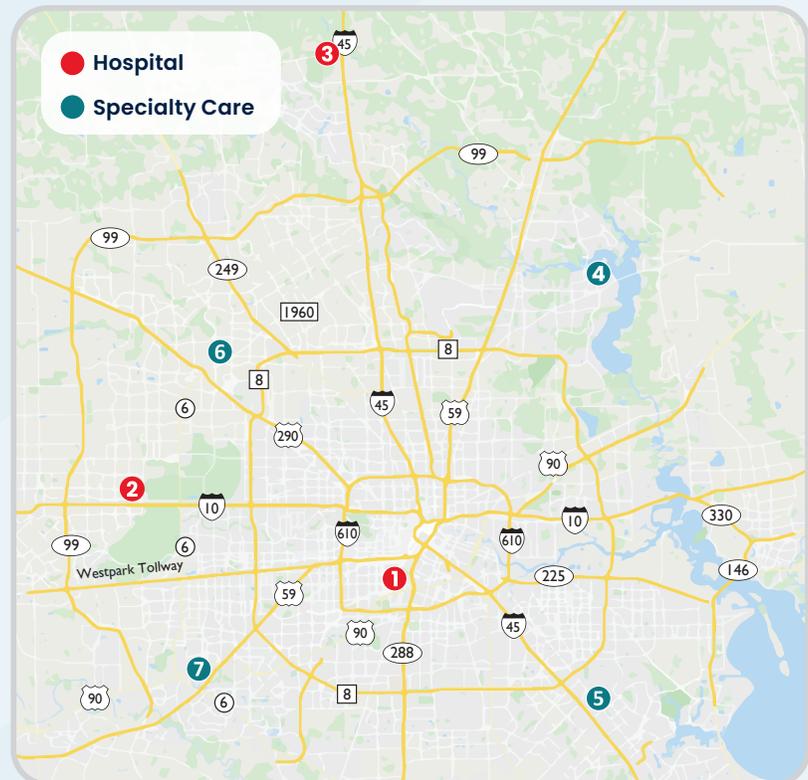
To check the status of your child's referral, please call the appropriate location at the number listed below (Monday – Friday, 8 a.m - 5 p.m.)

#### Texas Children's Hospital

- 1** Medical Center 832-826-2121
- 2** West Campus 832-227-1900
- 3** The Woodlands 936-267-7388

#### Texas Children's Specialty Care

- 4** Kingwood Glen 832-828-4900
- 5** Clear Lake 281-282-1900
- 6** Cy-Fair 281-469-4688
- 7** Sugar Land 281-494-7010



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## Sleep hygiene

### Develop good sleep hygiene personal habits

- Establish a regular bedtime and awakening time.**  
Having a regular routine will help the body know when to fall asleep and wake up at certain times during the day.
- Make sure your child gets enough natural light during the day.**  
Being out in the sun in the daytime helps the body's internal clock maintain a healthy sleep-wake cycle.
- Avoid letting your child nap during the day.**  
Naps disrupt the ability to sleep at night. If your child must nap, limit it to 20-30 minutes so he or she can sleep well at night.
- Avoid giving your child caffeine 4-6 hours before bedtime.**  
Caffeine is a stimulant and is present in coffee, soda, tea and various over-the-counter medications. Beginning at least 4-6 hours before bedtime, make sure your child stops eating foods or drinking liquids with caffeine to help the body become more rested.
- Ensure your child exercises regularly, but not right before bed.**  
Regular exercise, particularly in the afternoon, can help deepen sleep. Intensive exercise within the 2 hours before bedtime, however, can decrease the ability to fall asleep.

### Sleeping environment:

- Find a comfortable temperature setting for sleeping and keep the room well-ventilated.**  
A cool (not cold) bedroom is often the best for sleep. Try to keep the bedroom at a comfortable temperature - not too hot (above 75°) or too cold (below 54°).
- Block all distracting noise and eliminate as much light as possible.**  
You may want to try earplugs, a white noise machine or a relaxation phone app.
- Reserve the bed for sleep.**  
Don't allow your child to use the bed as a work or recreation area. It's not a good idea to watch TV or use a laptop. Television is a very engaging medium that tends to keep people awake.



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## Sleep hygiene

### Getting ready for bed

- Try giving your child a light snack before bed.**  
Warm milk and foods high in the amino acid tryptophan (e.g., bananas) may help with sleep, but stay away from large meals and spicy or sugary foods close to bedtime.
- Practice relaxation techniques.**  
Relaxation techniques such as belly breathing may help relieve anxiety and reduce muscle tension to help your child's body become rested. You can also try meditation or relaxing music to help.
- Encourage your child not to take worries to bed.**  
Try to avoid emotionally upsetting conversations and activities before going to sleep.
- Establish a bedtime routine.**  
Pre-sleep rituals, such as a warm bath or a few minutes of reading can help with sleep.
- Remove pets from the bed.**  
Pets may cause your child to wake up from allergies or the pet's movements in bed.
- No clock watching.**  
Remove clocks and cell phones during the night. This can wake your child up and reinforce negative thoughts such as "Oh no, look how late it is; I'll never get to sleep," or "It's so early; I have only slept for 5 hours. This is terrible!"

### Getting back to sleep

- Engage your child in a quiet activity.**  
If you find that your child gets up in the middle of night and cannot get back to sleep within 15-20 minutes, do not allow him or her to remain in bed. Instead, encourage them to get up and do a quiet activity. You will generally find that they can get back to sleep about 20 minutes later. Do not allow them to perform challenging or engaging activities such as schoolwork, housework or watching television.
- Avoid bright lights.**  
Do not expose your child to bright light if they need to get up at night. Use a small night light instead.

**Speak to your health care provider if your child has difficulty falling asleep, snores or is excessively sleepy during the day.**



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## Movement and exercise

### Pain and Function

- The approach taken by the pain team does not offer a “quick fix”; focus of treatment is on long-term outcomes.
- Therapy focuses on improving function, which is your ability to do daily tasks and participate in activities.
- Research shows that once your function starts to improve, pain will improve as well.

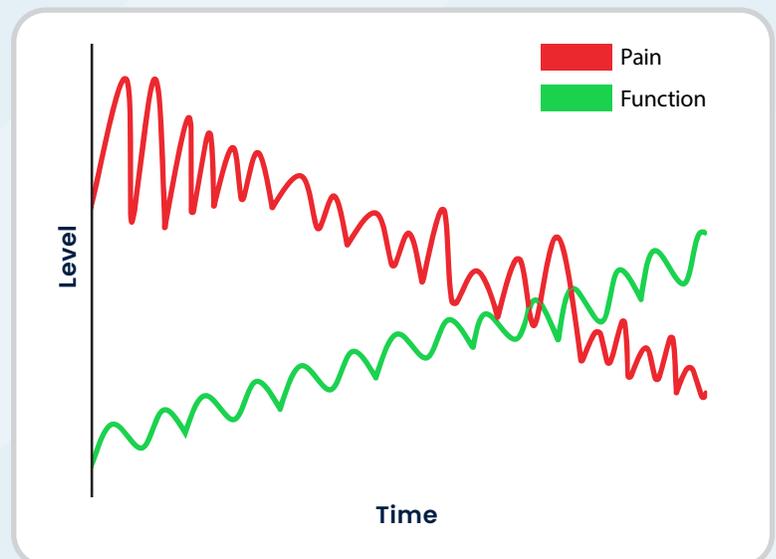
### Cardiovascular exercise

- There are various forms of cardiovascular exercise (it doesn't always require running).
- Other forms include: walking, swimming, dancing, cycling (legs or arms).
- A restorator bike can be a good tool for cardiovascular exercise.



### Progression with Chronic Pain Intervention

- The approach the pain team takes doesn't offer a quick fix; it focuses on long term results.
- This approach focuses on improving function, which is your ability to do your daily tasks and participate in activities.
- While the overall trend will be improving function, it is expected and natural to have ups and downs through the process.
- We have found that once your function starts to improve, pain will improve as well.



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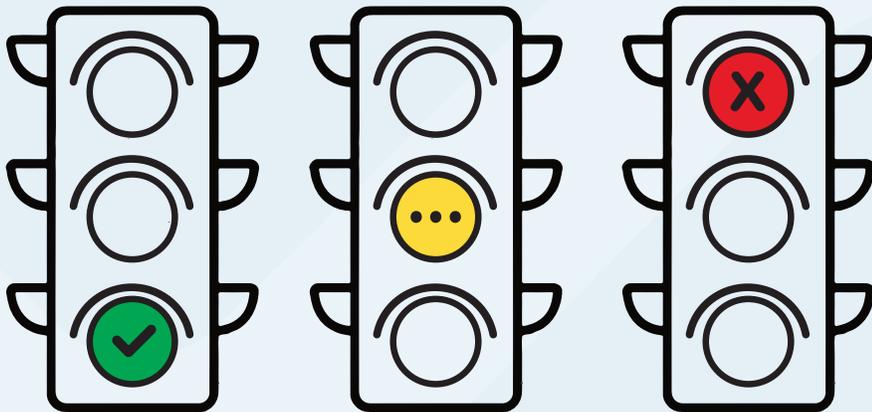
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## Pacing

### Pacing

- Encourage your child to pace him or herself.
- Break difficult movements into parts.  
Example: Start with sit-to-stands from a chair before advancing to squats.
- Follow the traffic light analogy for pacing activity

### Traffic light



#### Green:

Baseline symptoms. No increase in symptoms during activity. Keep going.

#### Yellow:

Increase in symptoms from baseline. Slow down or take a break.

#### Red:

Continued increase in symptoms after stopping activity. Stop activity.

- IT'S OKAY if your child cannot get to 20 minutes initially.
  - Start slow. Stay within **green/yellow** with all activities.
  - AVOID getting to **red!**



### An alternative to the traffic light

If your child has difficulty pacing using the traffic light:

- An increase in symptoms after the activity or the next day indicates that your child may have overdone it.
- The next time he or she attempts the activity, cut the time in half and slowly increase it.



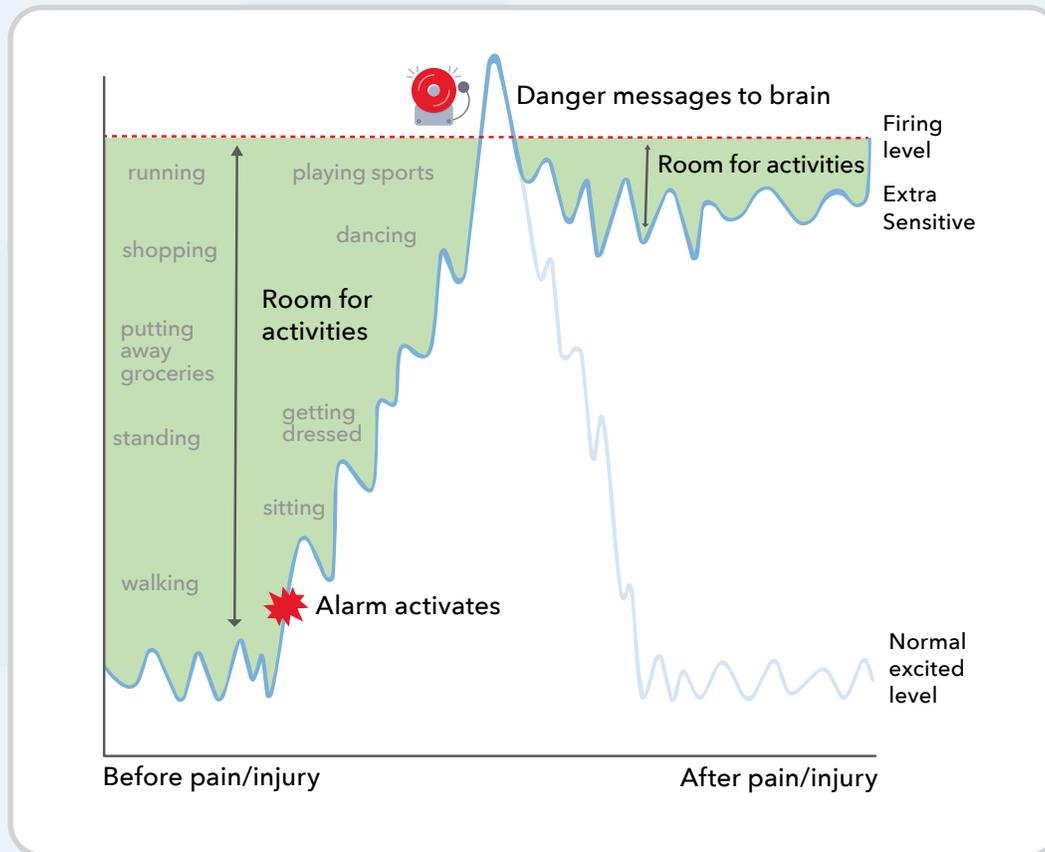
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## Pain amplification: sensitive nerves



- Our nerves are like an alarm system, constantly monitoring what is happening in our bodies and in the environment around us. This information is sent to the nervous system, and we can do many activities without setting off any alarms.
- When something threatening happens this excites our nerves and sends a “danger” message to the brain. The brain responds by producing pain so that we seek the help we need. This is normal. Our nerves do this to protect and alert us.
- Once the threat is gone, our nerves typically calm down and return to their resting level of activity. In some people, their nerves do not calm down and instead stay extra sensitive. When nerves are extra sensitive it takes less activity to produce a “danger message” to the brain; things that were previously not threatening can start to produce pain.



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