



# Managing Persistent Pain in Children & Adolescents

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# Declaration

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- SMO Lady Cilento Children's Hospital, Brisbane
- Director Pain Management, St. Vincent's Hospital,
  - LEAP/ HOP program
- Co-founder and Medical Lead, SKIP, Support Kids in Pain



# Overview

What is Persistent Pain?

Pain in childhood and adolescence

Pelvic pain

Management approaches

Pain Management Services in QLD for young people





# Miss. SD 14yrs

Hx abdominal pain

Anxiety

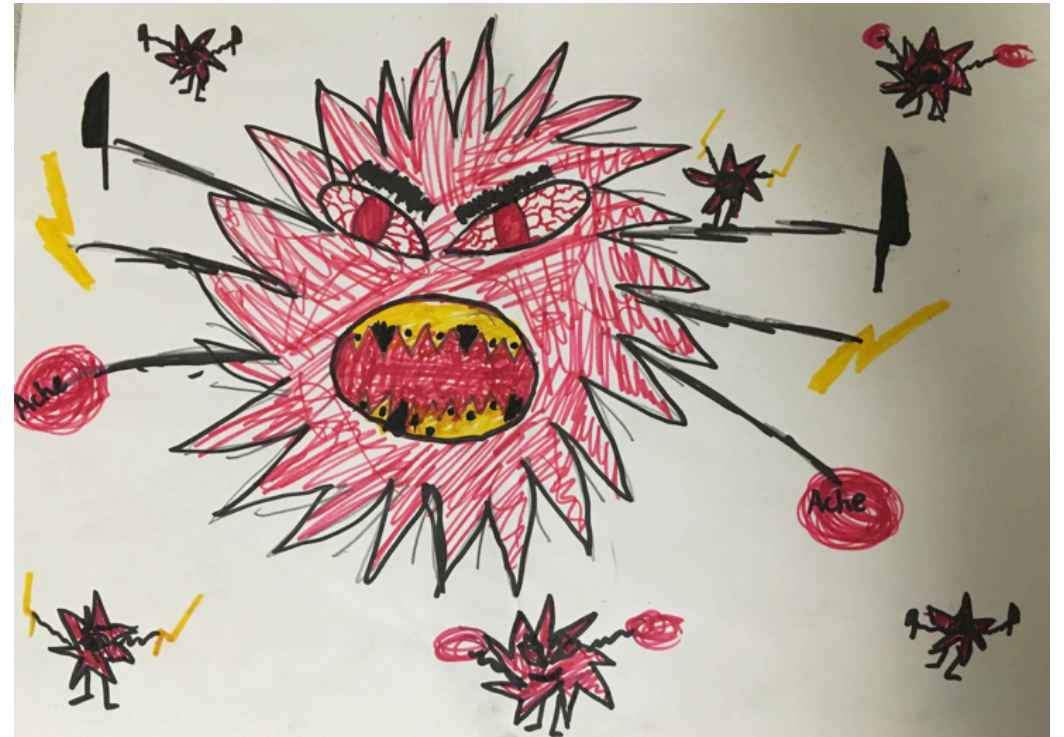
Menstruation 12.5yo irregular

Daily pain

Missing school

Laparoscopy (appendectomy), opioids

Nurofen plus







# Families common experiences

- Poor understanding of persistent pain
- Multiple health professional encounters, conflicting advice
- Told their child's problem is 'psychological'
- Frustration
- Not knowing what is the right approach to help their child



# ABC's of Pain

1. Pain is a natural response, regulated by our brain
2. Pain is physical (sensory) and psychological (emotional)
3. Memories can affect Pain
4. Feelings and thoughts can increase pain & decrease pain
5. Human bodies have natural pain control system
6. Different type of pain = different types of treatments
7. Pain can be controlled
8. Pain is changeable

Zelter & Schlank (2005). Conquering your child's chronic pain. William & Morrow. USA.



# What is Persistent Pain?

- Definition - pain longer than three months
- Differs from acute pain, not always related to pathology
- Sensitization of the nervous system, many contributing systems and factors.
- Treatment requires an active/management rather than passive/cure approach
- Important for a young person to understand hurt ≠ harm



# Explain Pain to Children

The nervous system is like a big ear

Pain is a volume dial

Things that turn UP & turn DOWN the volume.

You can retrain the brain to take charge

Self management is about you being in the driver's seat





# Chronic Pain in Childhood & Adolescents

- 1 in 5
- 3:1 girls
- Average age 12

Types:

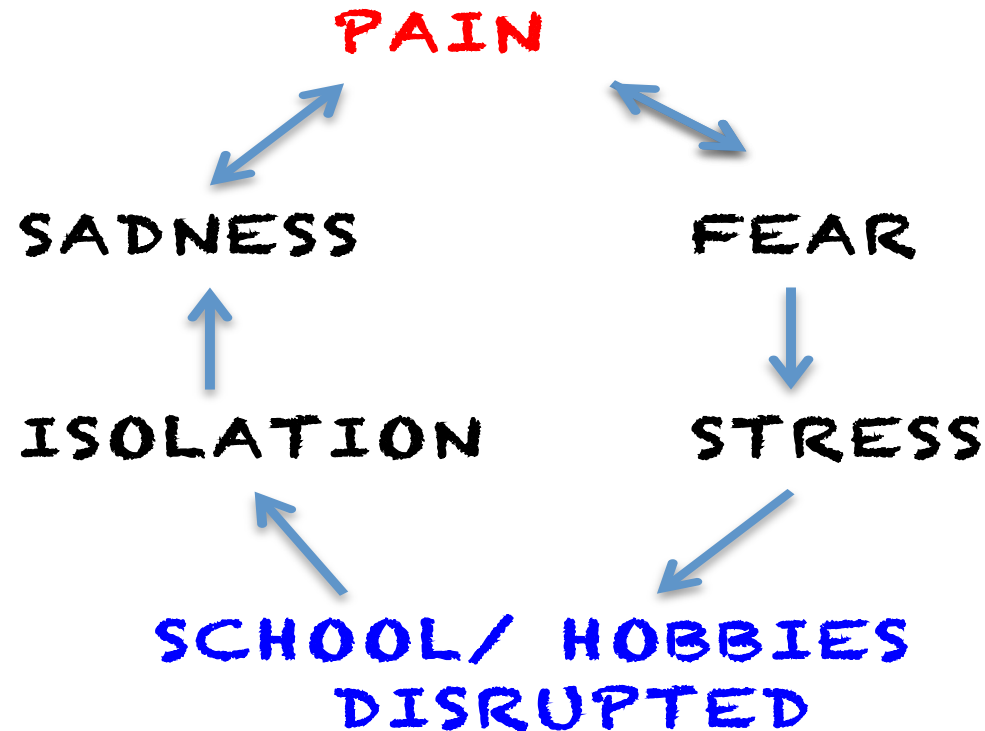
- Headaches
- Abdominal pain/ pelvic
- Musculoskeletal
- Other

# Paediatric Pain

## Drug misuse, family breakdown, lost potential

Characteristics of highly impaired children with severe chronic pain: a 5-year retrospective study on 2249 pediatric pain patients

Boris Zernikow\*, Julia Wager, Tanja Hechler, Carola Hasan, Uta Rohr, Michael Dobe, Adrian Meyer, Bettina Hübner-Möhler, Christine Wamsler and Markus Blankenburg BMC Paediatrics 2012, 12:54







# Clinic Outcomes

## Quality of life and academic functioning 6 years after paediatric referral for chronic pain

Lidewij ME Knook (lidewijknook@online.nl)<sup>1,2</sup>, Jeroen G Lijmer<sup>3</sup>, Antoinette Y Konijnenberg<sup>4</sup>, Patricia M Hordijk<sup>1</sup>, Herman van Engeland<sup>2</sup> Acta Paediatrica June 2012

- Dutch 8-17 years of age, N 99
- Female 76%, F/U 6 yrs, 75% still had chronic pain
- Health related- QoL comparable with peers (adaptation)
- Pain related absence in daily school or work reduced
- Children reporting many somatic symptoms and poor general health at referral were at risk of poor HR-QoL 6yrs

# Menstrual Pain in Adolescents

## Dysmenorrhea

- Recurrent and disabling in up to 90% of girls
- Missed school
- Reduced QoL, decreased physical and social function
- Increased acute pain responses
- Linked to chronic pain (migraine headaches, IBS)
- Increased risk anxiety and depression

Pain Medicine 2016; 17: 16–24

**Pain Catastrophizing Predicts Menstrual Pain Ratings in Adolescent Girls with Chronic Pain**

Laura A. Payne, PhD,\* Andrea J. Rapkin, MD,† Kirsten C. Lung, BS,\* Laura C. Seidman, BS,\* Lonnie K. Zeltzer, MD,\* and Jennie C.I. Tsao, PhD\*

# Menstrual Pain in Adolescents

## **With Chronic Pain:**

- **Increased Pain catastrophizing**
- **Higher pain ratings**
- **More interference in ADL**
- **Increased anxiety sensitivity**

Pain Medicine 2016; 17: 16–24

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# Medical Management

- Rule out red flags
- Look at psychological contributors
- Assess function/ sleep/ mood

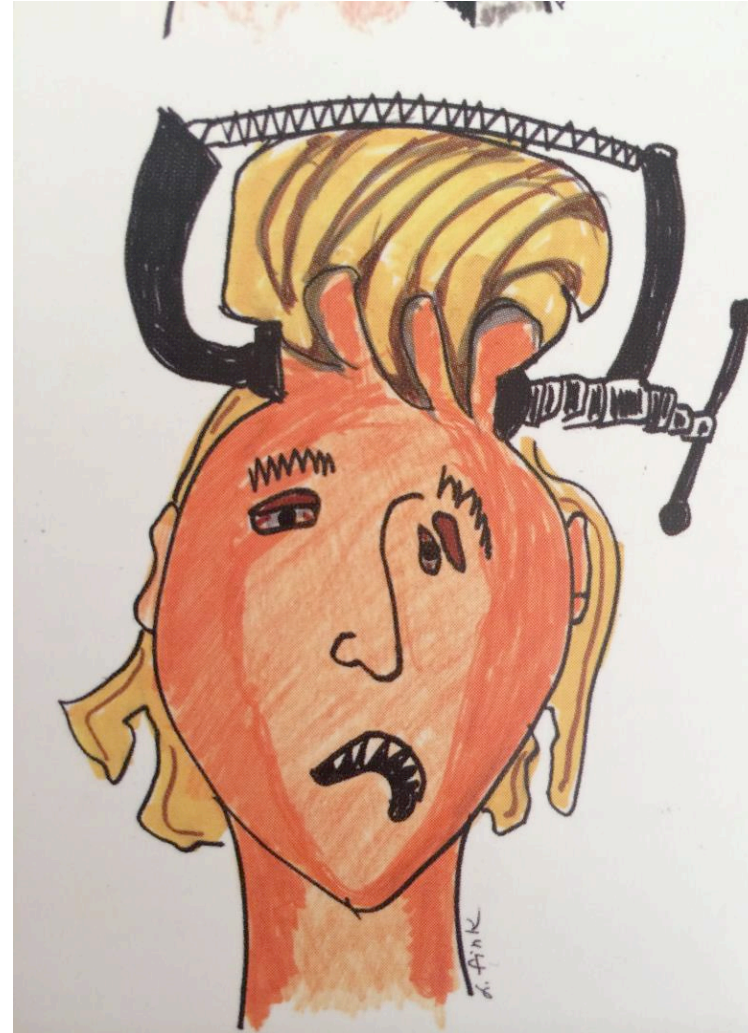
## Medications:

- Avoid opioids
- Trial amitriptyline low dose
- Non-pharmacological

# Parent Dependent

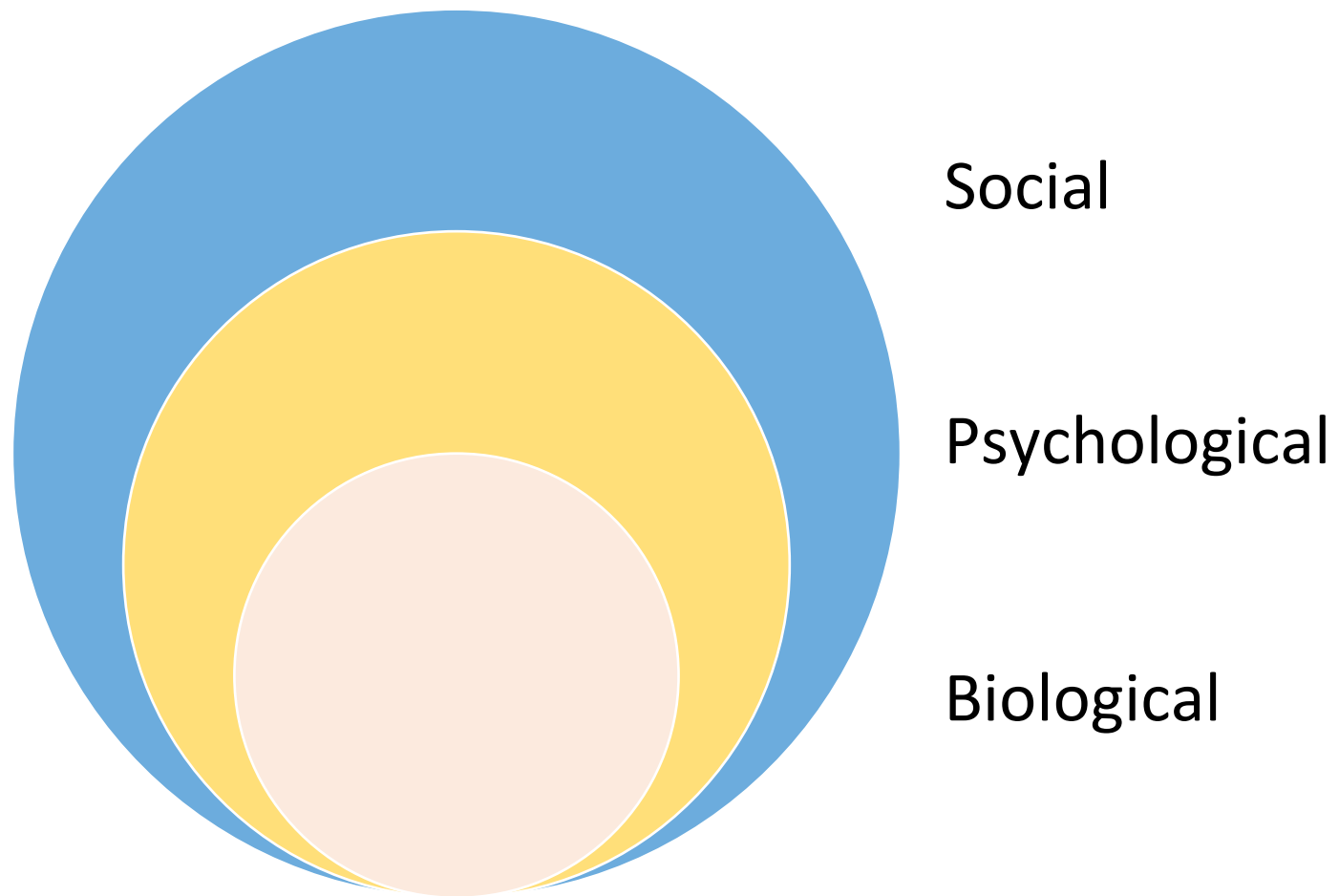
Styles:

- 1) Encourage and monitor
  - 2) Protect
  - 3) Minimise
- Counselling & family therapy





# Management







# Multidisciplinary Approach

## What Does It Take? Comparing Intensive Rehabilitation to Outpatient Treatment for Children With Significant Pain-Related Disability

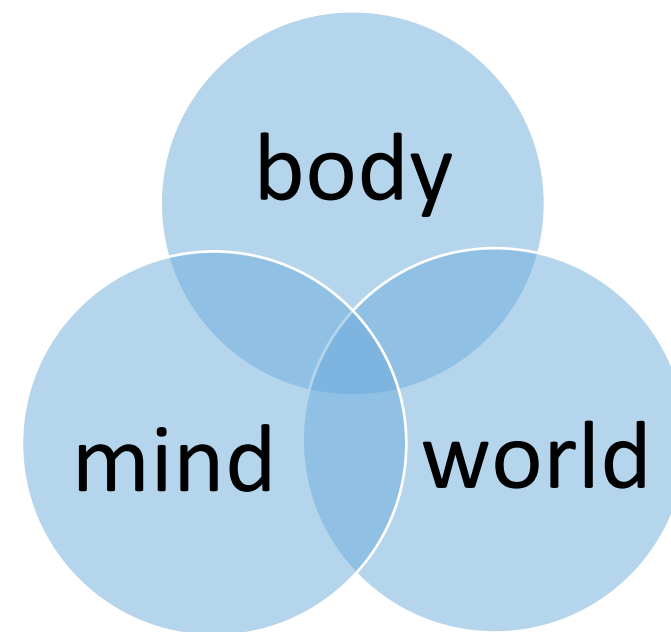
Laura E. Simons,<sup>1,2</sup> PHD, Christine B. Sieberg,<sup>1,2</sup> PHD, Melissa Pielech,<sup>1,2</sup> MA, Caitlin Conroy,<sup>1,2</sup> PSYD, and Deirdre E. Logan,<sup>1,2</sup> PHD *Journal of Pediatric Psychology* 38 (2) 213-223, 2013

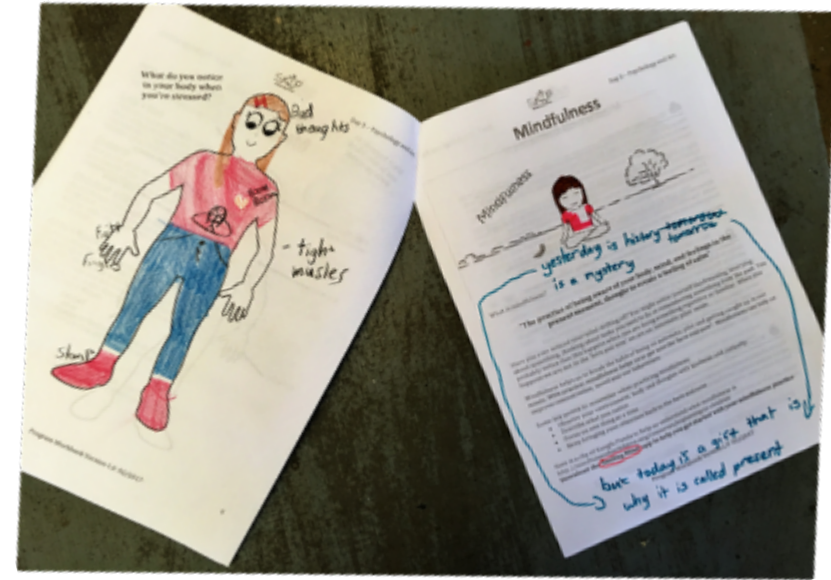
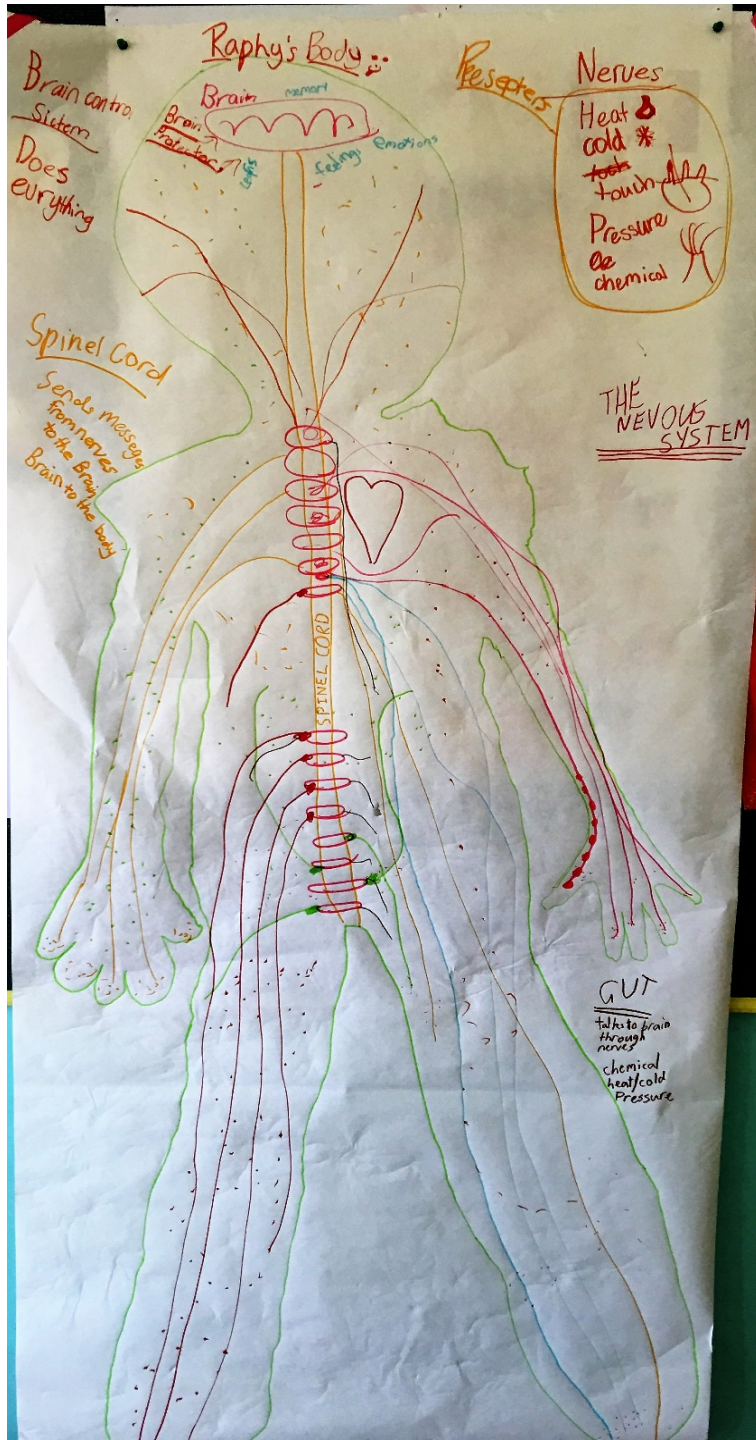
- N 100
- 50 Intensive day hospital v 50 outpt multidisciplinary tx
- Both improved, larger in inpatient intensive, pain related fear; functional disability; willingness to adopt a self management approach
- Intensive rehab rapid, dramatic improvements in functioning



# Self Management

- Highest evidence base
- Focus on function, rather than pain reduction, elimination, avoidance
- De-threaten pain
- Routine, sleep, lifestyle, activity patterns





**DIM's** Volume Up ↑  
Danger In Me!

**SIM's** Volume Down ↓  
Safety In Me!

Things You:

- DO
- Think
- Say
- See

www.skip.org.au

Group Rules  
Don't talk when others are talking  
Your hand up to







# Pain Management Plan for School

- Plans for school re-entry
- School adjustments & accommodation
- Communication skills at school – traffic light system, flashcards, clear protocols for contacting parents
- Coping skills at school – classroom toolkit
- Peer and social issues – buddy, mentor, counsellor
- Ensure school routine maintained at home

# LEAP

## Linking Emerging Adolescents in Pain



- Hospital based, St. Vincent's, Brisbane
- inpatient or outpatient, private some public
  
- 2 week intensive program with four weeks F/U
- >14yo
- Since June 2012 School holidays



# HOP

## Help after school hours

- 2016
- 4-6pm Tuesday evening for six weeks
- During term
- Includes family therapy





# Resources / Tools

- Statewide Persistent Pain Management Clinical Network (SPPMCN)  
[PersistentPainManagementNetwork@health.qld.gov.au](mailto:PersistentPainManagementNetwork@health.qld.gov.au)
- Professional bodies – e.g. APA Persistent Pain Special Interest group
- Youtube – Brainman chooses, Understanding Pain Management in 5 minutes
- ACI Pain Network Website -  
<https://www.aci.health.nsw.gov.au/chronic-pain>



# Online

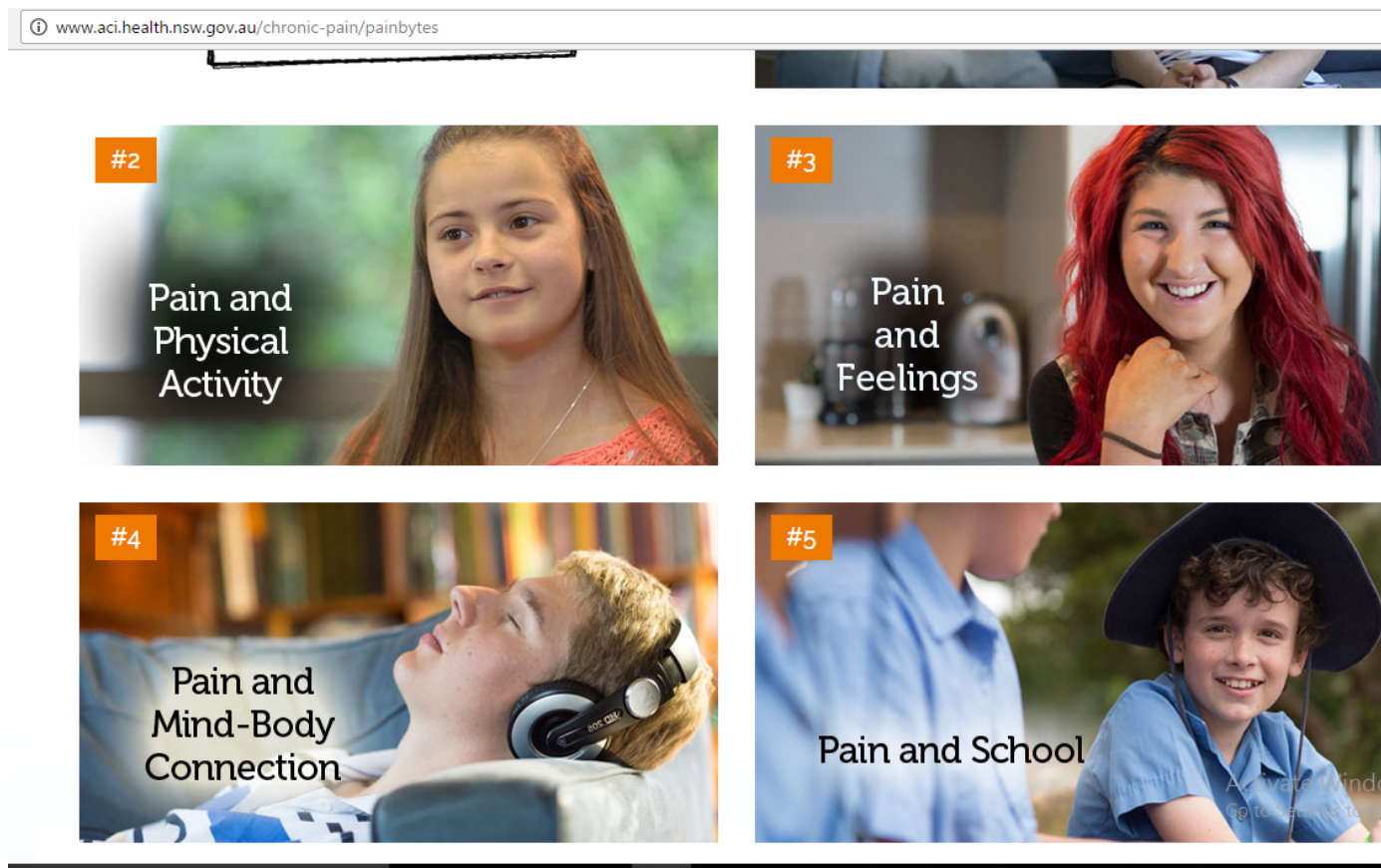
“Internet based self management interventions improve health outcomes in children and adolescents with chronic health conditions including pain”

Stinson et al

“Internet driven CBT beneficial”  
Palermo et al

NSW Pain Management Network  
<http://www.aci.health.nsw.gov.au/chronic-pain>

**Pelvic Pain Foundation**





# Comments

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Team:

Pain Medicine Specialists

Psychologists

Physiotherapists

Occupational Therapists

Art Practitioners

Admin Officer

