

Saskatchewan Bleeding Disorders Program

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click on "Your Health, Patient Services", and look for chronic disease management and then Saskatchewan Bleeding Disorders Program.

Program Hours:

Monday - Friday

8:00 a.m. - 4:30 p.m.

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Saskatchewan Bleeding Disorders Program (SBDP)

Age 0-4

Reducing Pain Associated with Needles

Needles can be a stressful part of care.

Our goal in developing this brochure is to provide supportive information and tools for parents and caregivers to use in helping improve needle care for kids.

Our philosophy is that needle care can be improved through specific interventions by helping children think (cognitive) and act (behavioural) in certain ways when they are getting a needle poke. There are also physical interventions like numbing cream, very mild electrical stimulation, spot pressure, and massage. If you and your child have already found helpful ways to deal with needle pokes we would be delighted to hear about them!

Children with bleeding disorders require needle pokes for blood draws, giving medications, factor products and providing immunizations. Medications may be given into a vein, through a Port-A-Cath, or beneath the skin. Blood is drawn from a vein and immunizations are administered into the muscle or just under the skin.

This booklet provides the basic tools to assist you through this experience, but there are many more ways to help if needed. Please talk to SBDP staff if you or your child have questions about how to use a technique, or if you need more assistance to manage needle pain or needle fear.

There are booklets to outline the most important things to know and do for four age groups. They are: 0-4 years, 5-8 years, 8-12 years, and 12- 18 years. These suggestions go together with the SBDP four pamphlet series about "Paving the Way to Independence."

Summary of Methods		0-4 years	5-8 years	8-12 years	12-18 years
Preparation for the parent	Preparation for the child	Preparation for the parent	Preparation for the parent	Preparation for the Child	Preparation for the Teen
Preparation for the child	Preparation for the child	Preparation for the child	Preparation for the child	Preparation for the Parent: getting ready to 'let go'	Preparation for the Parent Supporting independence
Positions for Comfort	Positions for Comfort	Positions for Comfort	Positions for Comfort	Positions for Comfort	
External Distraction interactive books, toys, stickers, singing	Distraction interactive books, toys, stickers, music player, imagination- 4 techniques	Distraction interactive books, toys, stickers, music player, imagination- 4 techniques	External distraction: Video games, music Draw a "strong" picture Cognitive distraction Non-procedural talk	External distraction: Video games, music Draw a "strong" picture Cognitive distraction Non-procedural talk	Modelling CHS video or in-person Canadian Hemophilia Society modelling of self-infusion
Breathing blowing pinwheels or bubbles	Breathing blowing bubbles relaxation breathing	Breathing blowing bubbles relaxation breathing	Breathing Coached relaxation breathing Progressive muscle relaxation	Breathing Coached relaxation breathing Progressive muscle relaxation	Breathing Independent relaxation
Touch Proximal massage Spot pressure Topical anesthesia "Buzzy"	Touch Proximal massage Spot pressure Topical anesthesia "Buzzy"	Touch Proximal massage Spot pressure Topical anesthesia "Buzzy"	Touch Proximal massage Spot pressure Topical anesthesia "Buzzy"	Touch Proximal massage Spot pressure Topical anesthesia "Buzzy"	Touch Self-massage Spot pressure
Warmth for venipuncture	Warmth for venipuncture	Warmth for venipuncture	Warmth for venipuncture	Warmth for venipuncture	Warmth for venipuncture
Positive reinforcement	Positive reinforcement	Positive reinforcement	Positive reinforcement	Positive reinforcement	Teach positive coping self-statements

Resources :

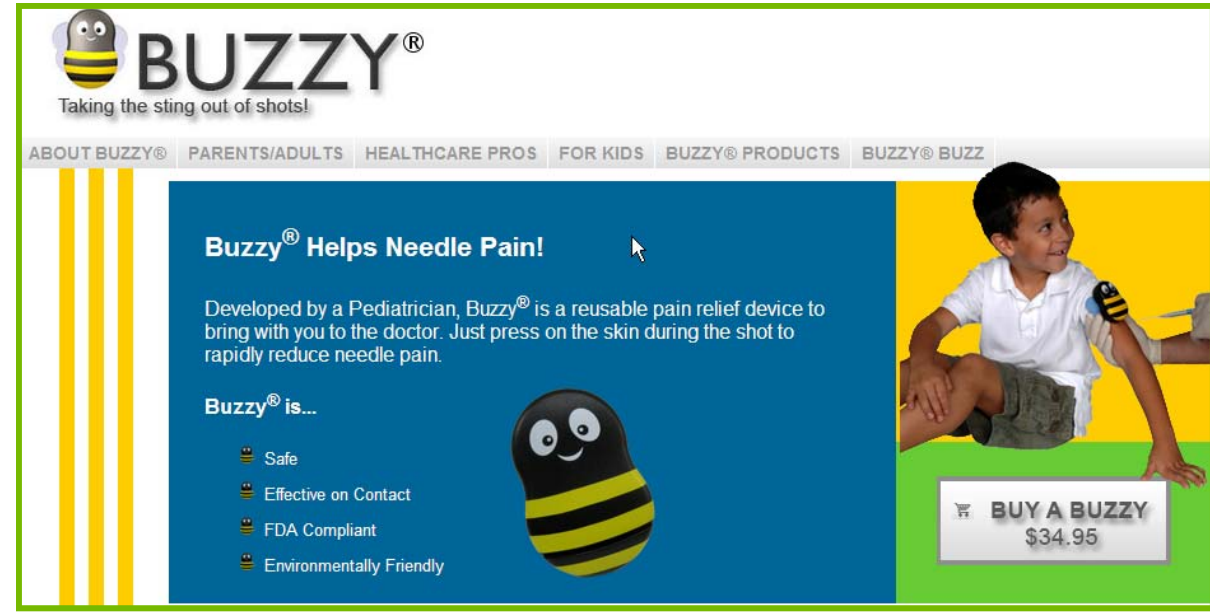
Want to know more?: If you have questions, please talk to the SBDP staff. We can teach you more methods to help, or help plan other services to deal with specific concerns.

See also "Pain in infants, children and adolescents: Resources for Parents" www.medicine.usask.ca/pediatrics/services/pain/for-parents

Sources:

Nina Power, Christina Lioffi, Linda Franck. Helping Parents to Help Their Child with Procedural and Everyday Pain: Practical, Evidence-Based Advice. *Journal for Specialists in Pediatric Nursing*, July 2007, 12,(3), 203-209.

The KIDS Manual, 2000, Baxter Hyland Immuno



buzzy4shots.com A website about needle pain management by Dr. Amy Baxter and MMJ Labs

Using Topical Anaesthesia: You can buy a non-prescription topical anaesthetic at the drug store. If you have a drug cost coverage plan, a prescription may help you pay for it. Ensure adequate time is allowed for putting on the cream or gel. Remember to bring some extra with you for lab work. (Handouts available)

Heat: This is easy to use and is very comforting. It works by increasing the circulation to the local area which makes the veins easier to access. You can use heat by a warm shower, a hot bath, or small portable hot packs (instant hot packs for warming your hands in the winter will work).

If you want to use any of these techniques please talk to the SBDP team and they will see that you receive training in any one of these specific techniques.

Positive Reinforcement:

Praise your child for getting through the experience. Although your child may cry it is very important to encourage your child to stay still. Examples of things you can say are:

- “ I like the way you helped by giving me a hug while we read the book”
- “ You should feel proud of the way you only cried for a second” ...
- “ You stayed as still as a statue.”
- “When you stay still like that, it helped us get finished faster.”



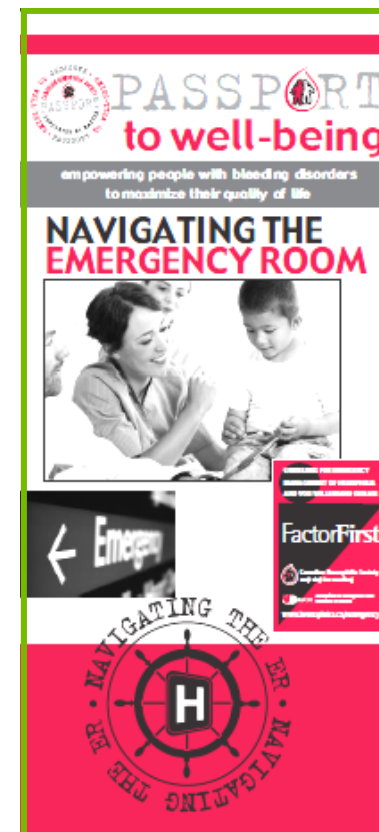
Small children enjoy simple rewards like stickers. Don't give rewards in advance, and be consistent in providing any reward promised. As an example, you may have seen that dentists often provide a choice of a small item at the end of a visit, and this helps children to look forward to their visit. Remember though, needle pokes are part of life, and you don't want this to be the focus.

Needle Care Interventions for Children ages 0-4 years Preparation for Parents

As the most important people in your child's life, your level of comfort with needle care procedures sets the tone for your child's experience. Think carefully about your own feelings about needle experiences and how this might affect your communication. Remember that your words are important, but your child is also paying close attention to your body language, facial expressions and your vocal tone. Remain calm and work to control your own anxiety when you are talking to your children about needles. If you know your child will be having a needle poke, plan for the time you need to use a numbing cream. More information about this on page 10.

Health care visits can also involve waiting times, so plan for what your child will need to be kept occupied during the wait. Hospitals have very limited toy options due to Infection Control concerns. The anticipation of a needle poke is often stressful for children, so giving them something else to be occupied with can help lessen their worries while they wait. The library or friends may be able to lend you something new to the child – a book, toy, music or video – which you can bring out when it's needed.

You will need to be able to advocate respectfully for your child's needs. If you find it difficult to speak up, talk to SBDP staff. The Canadian Hemophilia Society booklet on Navigating The ER has helpful tips about how to respectfully let the staff know what your child needs.



Preparation for the Child:

Telling children about what will happen helps build trust in medical care experiences. You want to talk about what the procedure is, the reason for it, and what the child may experience. When and what you say are determined by the age and nature of the child; use non-emotional language.

Take time to explain the procedure in a way your child can understand, including the use of toys to demonstrate giving and getting a needle. There are also some useful children's books such as "Bob the Puppet has His 6 Month Check-up", which is about going to a Bleeding Disorders Treatment Centre. Tell them about the whole experience and not just the painful part! Ask if they have any questions.

Be honest if they ask if it will hurt; a useful statement like "Some kids feel a pinch, but some kids don't feel anything" normalizes whatever their experience is. Emphasize that you will stay with them and that you and the staff will help them. Ask them if they want to bring a cuddly toy or other distractions.



Have a toy medical kit at home for your child to act out their experiences. A toy syringe, or clean empty plastic syringe (no needle), some band aids, a squeeze ball, a cool pack, toy stethoscope are some common items used. Children gain comfort and confidence by playing at giving their toys medical care.

Other Options for use of Physical Methods:

This section gives you other options to try to help enhance the needle experience. They will not suit everyone but can be used on a trial basis. This is general information

Please call or talk to SBDP staff at clinic to get more specific teaching about any of the methods below.

Relaxation: Many methods exist, for this age group. Positions of comfort, breathing and warmth are the most important. The child relaxes most with their parent holding them.

Gently rub, stroke or scratch your child's back, or usual place that you use to calm them. This helps to enhance relaxation, which may improve circulation.

Proximal massage: Is a simple technique used as a method to decrease muscle tension and increase circulation to the limbs. It can be taught to the parent and become a useful addition for improving venous access.

Spot Pressure/massage, vibration: Simple spot pressure to the area bombards the nerves so that the pain of the poke is experienced with less intensity. SBDP has a "Buzzy", which is an electrical battery operated device that gently vibrates and is held on the skin just above the needle poke area. It works to decrease the pain receptors from acknowledging the poke as pain. Let us know if you would like to try it. (Handout Available).

Desensitization: Gently rub the area to be used for the needle poke with a variety of different textures- soft cloth such as t-shirt material or satin to more coarse textures such as a new washcloth or loofa bath mitten for example.



Breathing Techniques:

Deep breathing encourages calmness in the body.

With very young children, you can engage your child in blowing a pinwheel, or blowing bubbles.

Bubbles are especially good because you can do a variety of things. For example, you can count the bubbles, try to make a really large bubble, see if you can get a bubble to land in a certain spot, count how long it takes for a bubble to pop, or how many bubbles your child can make with one big breath! (You can buy Bubble solution, or you can make your own by combining 2 parts liquid hand soap, 18 parts water and 1 part glycerine or corn syrup)



You can demonstrate deep breathing for some children over 3 years. Do this at another time before the needle poke event by saying "Watch how my stomach gets bigger when I breathe in, and watch how it gets smaller when I breathe out." When you breathe in slowly, say "ooh" and when you breathe out slowly, say "haa". Have the child do deep breathing. Have the child sit up straight and place one or both hands on his stomach and say "Pretend you're blowing up a balloon in your belly, and then let the air slowly out of the balloon".

During a needle poke, encourage them to focus on their breathing and to use their imagination to blow the pain away.

Singing:

Singing involves the whole person, through breathing, remembering the words, and using facial expressions. Music is a powerful way to change a mood, and to share an experience.

Practice some simple short songs with your baby or toddler, but remember



When to tell children is a more complex question. For minor procedures (bloodwork alone for example), telling them earlier on the same day is usually fine. You want them to have a good sleep.

For more major procedures, like surgery, you need to tell them a few days ahead. Please ask SBDP staff for resources for parents to help prepare a child for surgery.

It is easiest to find veins if your child is warm and well hydrated. If fasting is not required, give your child a drink (at least 200 mls) about 45 minutes before the blood work. This makes the veins easier to find. Ask for the smallest needle possible and if they have a special children's room for the blood draw.

Delay the blood work if possible if your child is hungry or tired.

For families having blood work in Saskatoon, Royal University Hospital has a Children's room in the Test Center. You can ask to see it, and about having your child's blood work drawn there if you wish. There is also a free brochure for parents available in their waiting room. ("Supporting Your Child for a Blood Test")

If you have a negative lab experience, you can phone the manager and discuss your concerns in a respectful way. You might have the option of choosing another lab if you live in a larger centre.

Distraction:

The rationale for distraction is that it is difficult for our brains to do more than one thing at a time. Distraction helps lessen discomfort or pain because we aren't focusing on the painful event.

With very young children, the parent's job is to keep the child distracted. In the medical setting, you may need to be gentle and persistent in refocusing the child's attention. Use body language, by looking and pointing at the toy/object yourself, or turning the child's head.

If your child is nursing (breastfeeding) this is often extremely comforting. If you wish to nurse your child in this setting, tell staff that this is your plan so that they can help position you comfortably.

An alternative to this is a soother dipped in a sucrose (table sugar) solution, that you pop into the baby's mouth 2 minutes before the needle poke. You can buy a product called "Sweetums" or "Tootsweet" at the drugstore—corn syrup and honey are not safe for babies.

A homemade recipe is 5 gms (1 Tablespoon) sugar in 15 ml (1 Tablespoon) **fresh** water. If your child doesn't use a soother, 2 ml of the solution can be put into the child's mouth with a syringe.

For children over 12 months, good distractors are small new (surprise!) toys. For children over 2 years, storybooks, sticker books, silly songs, games and conversation can be effective. Let your knowledge of your child guide you about what will engage your little one.

Some good ways to redirect a child's attention are to ask questions, or make comments about it: use the toy in telling a story.

The important part of distraction is directing the brain's attention away from the painful or stressful event. Reassurance is not usually helpful because it tends to focus attention on the painful event.



Positions for Comfort

Restraining children by laying them down can be very stressful for everyone. If possible, try to have the child seated on, or beside the parent, and positioned so that their focus of attention is directed away from the

needle poke. Children under 4 can be seated on the parent's lap koala style (or bear hug) or joey style (facing away) depending on the access that is needed. The parent, or another person, can provide distraction at the same time as

Positions For Comfort: Sitting Positions for IV



shown in the following pictures, or a DVD/ video can be used.

(Photo Credit: CHEO- Children's Hospital of Eastern Ontario)

Positions For Comfort: Bear Hug for Injections

