

UK guidelines aim to improve pain management in children

Zosia Kmietowicz, *London*



Pain can be assessed even in babies

Nurses and pain specialists in the United Kingdom have developed guidelines to improve the management of acute pain in children. The clinical guidelines are the result of a collaboration between the Royal College of Nursing and the charity Action for Sick Children and have taken on board the views of parents, anaesthetists, nurses, and children.

The guidelines emphasise the

New guidelines for pain management in children

- Nursing staff should be vigilant for pain—assessing and recording it regularly, especially watching for unexpected intense pain
- Children's behaviour, appearance, activity, and vital signs are a good indication of severity of pain
- Children react to and report pain in different ways
- Children should be given ample opportunity to talk about their pain
- Pain can be assessed in premature infants
- Children aged over 4 years can usually use self report tools such as graphs to describe their pain provided they have enough time
- Older children and adolescents should select the pain assessment tool that they feel most comfortable with
- Parents should be encouraged to contribute to the pain assessment, but their opinions should not override what the children say
- Health professionals should be trained to recognise and assess pain

need to assess children's pain regularly by asking them how they feel and using pain assessment tools appropriate for their age. The authors argue that pain can be assessed even in premature infants, based on factors such as the way babies cry.

Interviews with 162 children aged between 2 and 18 years who were undergoing medical care in hospitals formed the basis for the guidelines. The children were asked about their own experiences of pain and how they would like it to be managed. Most children and young people interviewed said that the anxiety they felt before undergoing a medical procedure was the most distressing aspect of their illness.

The project coordinator from the Royal College of Nursing Institute, Lesley Duff, said: "The guidelines should help nurses recognise and assess pain in children better so that they can negotiate effective management with doctors." An implementation guide is now being produced to accompany the guidelines. The impact of the guidelines on pain management in children will be assessed in two years' time. □

The guidelines and implementation guide can be obtained from RCN Publishing, PO Box 1, Portishead, Bristol BS20 9EG.

Report calls for GP research in Scotland

Bryan Christie, *Edinburgh*

The lack of an effective research capacity in primary care in Scotland has been criticised in a report that sets out a long term strategy for tackling the problem.

The report, produced by the Scottish Forum for Academic General Practice, highlighted the "serious mismatch" between the importance to the NHS of decisions taken in primary care and the ability to produce the evidence to underpin those decisions. The authors pointed out that university departments of general practice have only one member of staff for every 234 family doctors in Scotland. It also argued that, although almost 90% of patients are seen in primary care, less than 10% of the total research and development budget is spent there.

The importance of developing a research culture in primary care was emphasised last year in the annual report of the Scottish chief scientist, Graeme Catto, who has promised to double spending in primary care research and development over the next five years from £1.1m (£1.8m) to £2.2m.

The forum's report builds on that commitment and recommends that progress can be made by establishing a Scottish School of Primary Care that would stimulate and coordinate a cohesive programme of multidisciplinary research. It also recommends developing a comprehensive system of research training and creating a network of designated research practices.

The report's authors acknowledged that there are barriers to participation in research in primary care and that extra investment is needed. Barriers to greater involvement included staff having no protected time to carry out research and the lack of library and information services and other facilities. □

Shaping the Future: a Primary Care Research and Development Strategy for Scotland is available from the Royal College of General Practitioners, 12 Queen Street, Edinburgh EH2 1JE.

First national paediatric formulary is launched in the UK

Carmen Basu, *BMJ*

This week the first national paediatric formulary, *Medicines for Children*, was launched in the United Kingdom. A joint standing committee of the Royal College of Paediatrics and Child Health and the Neonatal and Paediatric Pharmacists Group took more than three years to compile this comprehensive, research based guide, which specifically recommends drug dosages and treatment regimens for children.

The formulary has been published in response to criticisms by doctors, who have lacked an informative guide to the drug management of children. It is estimated that over 40% of drugs prescribed for children in hospital do not have the government's licensing status, and up to 80% of

drugs on the market are contraindicated for children, even if they could be potentially beneficial. David Hull, the former chairman of the joint standing committee, said: "Some doctors have been overly cautious when prescribing medicines for children. ... Many children have either been given medicines in ineffective doses or denied effective medicines." He hoped that the new formulary would provide "a sufficient body of evidence to provide legal protection" for doctors prescribing drugs to children in an unlicensed form. This would come as a relief to many doctors who fear that administering a drug off licence renders them more vulnerable to litigation if an adverse drug reaction occurs. Malcolm

Partridge, chairman of the Neonatal and Paediatric Pharmacists Group, warned that doctors faced a "confidence issue and a risk issue" and that it was merely their "duty to care" philosophy that sometimes overruled the withholding of drugs.

The formulary will be widely accessible, and there are plans to develop an electronic version. However, Professor David Baum, president of the Royal College of Paediatrics and Child Health, emphasised that this was very much a beginning and that the joint standing committee hoped to improve on the initiative and institute similar strategies to the United States, where special units have been set up to conduct more research into paediatric medicines. □

Medicines for Children is available from the RCPCH Bookclub, Direct Books, Freepost (BH1979), Ringwood, Hampshire BH24 3BR (price £42.95, college members; £48.95, non-members).