



Non-Pharmacological Methods for Pain Management



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Opinion

Pain or Nociception is felt, sensed, appreciated and perceived by everybody. The degree of appreciation correlates with severity of pain. Sensing and perceiving pain however depends on many factors. These are age of individual, his previous experience about pains, anticipation of pain and so his tolerance to pain. Thus, while 'receiving signals about pain from receptors by brain' is the same among all human beings, the perceptions and control of pain vary from society to society. Though pain is a ubiquitous condition of human beings, the definitions, descriptions, and perceptions of pain and pain control are culturally specific. But the absolute bottom line is that pain and pain control are inner and subjective experiences of the person who is in pain [1]. Appreciation of pain and the subsequent response may be different in acute vs. chronic pain. Many different modalities are tried to treat or alleviate pain. Modifying the response is the key in all modalities of management.

Apart from drug therapy/pharmacological methods; non-pharmacological approaches like physical or psychological modulation [106], though more widely used are less investigated. This area needs to be explored further. Here good Nursing Care plays a pivotal or central role. The approach to pain modulation is tailor-made and differs depending upon the age group of patients. Modifying the response or modulation may be pharmacological modulation or non-pharmacological like physical or psychological modulation [2]. All these different Non-Pharmacological modalities are already in vogue; with variable outcomes. Results depend on age group, type of pain [acute or chronic], willingness of patient for treatment and the attitude, knowledge of healthcare provider about patient's condition and the therapy [2].

In older children and adults for musculoskeletal pains; hot fomentation and gentle massage would help. Same may hold true for growing pains in children. The data about using acupuncture in neonates and older children showed variable results [3,4]. In psychological modulation, different patterns of interventions are available like-Taking to Comfort zone [2]. In neonates and very young infants, non pharmacological interventions like

Cuddling, soothing patting and holding baby very close to the body by caretaker or mother imparts sense of security and calms and pacifies baby. This is taking the baby to comfort zone. For the baby; swaddling (tightly wrapping a baby in a blanket almost like a burrito), side/stomach position, shushing sounds, swinging and sucking have calming effects. Not just parents, but even doctors and nurses- the ones sticking the needles into the little babies- are all concerned about the pain babies feel when they get vaccine shots. Other means are 'Suggestions & Modifying Emotions'. In general, emotion is a mental and physiological state, often associated with a wide variety of feelings, thoughts, and behaviour, along with mood, temperament, personality, and disposition. Suggestions help increase and improve 'Determination' of patients. Determination is a willed act, which is focused on endurance and bearing to tolerate pain, such as during child birth in labour pain. This may work as well for adults with chronic pains.

Distraction- Distraction can be said as the most primitive form in pain regulation, possibly from the dawn of human race. It is based on the act of distraction of attention from painful source or event. In experimental studies distraction attenuated the field activity particularly at the parasympathetic cortex during pain processing. Infants and children form an important targeted group for this modality. Offering a toy, or a candy/ biscuit etc. is a good way of distraction. Palatable or Delicious food intake in some way modulates pain perception by activation of endogenous opioid system. Preference to a sweet solution involves brain rewarding system, based on available evidence from animal studies and human studies. This explains sucrose induced analgesia [5]. But Oral Sucrose is not recommended as analgesic in babies [6,7].

All those in pains obviously need a compassionate and caring support for symptomatic relief; and neonates and children are topping the list. General public and the patients look upon the nursing staff with a sense of praise, gratitude and respect. This places the NURSE at a higher rank and position. Sympathetic and caring attitude and good nursing care would make tremendous difference in the lives of all those with pains.

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