

## Preface

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Since the 1970s, when the classic study by Eland (*1*) illustrated the significant discrepancy in how pain in children was managed as compared with adults, issues related to the delivery of pain care to children have been at the forefront of research and practice. It is now clear that treatment is possible in most cases of pediatric pain. Although much remains to be done to improve the science of pain relief, the bigger challenge is using science to bring pain relief to all children who are in need.

Some aspects of delivering pain relief to children have received scant attention. Although the location of most studies on pain relief can be found or inferred in the literature, there has generally been little attention to place in pediatric pain research. The setting in which pain is detected and managed is of major importance. For example, pain that is encountered in a tertiary, palliative care setting is both quantitatively and qualitatively different from the pain encountered in the primary care physician's office. Moreover, the skills of the health care providers, the resources, and the therapeutic opportunities differ markedly across different settings. Consider for a moment the resources available in a regional clinic in a developing country and the resources available at one of the quaternary care facilities in North America or Europe. Although it is unlikely that the pharmacokinetics of morphine would differ by place, most other aspects of pain management are likely to be impacted. Understanding the role of place in pain assessment and management is imperative; *Bringing Pain Relief to Children: Treatment Approaches* puts pediatric pain in its place.

Historically, pain management was delivered in medical settings by the physician and medical team assigned to the child. Over the last decade, however, specialized teams and other treatment resources for pain care have emerged. Chapters 1 through 3 (by Drs. McClain, Schechter, and Collins and Frager) of *Bringing Pain Relief to Children: Treatment Approaches* explore the modern-day versions of more traditional hospital-based pain management, including inpatient, outpatient, and palliative care.

In addition, as the impact of children's pain on all facets and quality of life has been better understood, the importance of extending the provision of pain services to children to other environments has been recognized. Chapters 4 and 5 (by Drs. Eccleston et al. and Brown) discuss school and residential settings and the opportunities they provide for the delivery of pain care.

Increasingly, we need to challenge our more traditional approaches to pain management by considering alternate approaches and removing barriers to care. New approaches to treatment have arisen outside of the medical setting.

Chapter 6 (by Dr. Tsao et al.) describes how complementary and alternative medicine approaches can be used to improve pain care. In Chapter 7, McGrath and colleagues detail the as-yet-unfulfilled promise of technology in bringing pain relief to children and youth.

Research on pediatric pain care has almost exclusively focused on children and adolescents in the developed world. However, most children live in the developing world, and it is likely that the risk and prevalence of pain is greater there. Moreover, the current opportunities for treatment are few. Chapter 8 (Finley and Forgeron) tackles this nascent area of research and practice.

In Chapter 9, Drs. Scott-Findlay and Estabrooks bring a much-needed focus on the theory and explicit practice of knowledge dissemination. This understanding is critical regardless of the setting in which pain management is being delivered.

These chapters were derived from the keynote talks given at the Fifth International Forum on Pediatric Pain at White Point Beach in Nova Scotia, Canada, in fall 2004. We were delighted with the vigorous interplay of ideas that occurred during this meeting. The chapters reflect this knowledge exchange.

The children of the world deserve better pain treatment than they currently receive. We hope *Bringing Pain Relief to Children: Treatment Approaches* will help you bring pain relief to all children.

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## REFERENCE

1. Eland JM, Anderson JE. The experience of pain in children. In: Jacox AK, ed., *Pain: A Source Book for Nurses and Other Health Professionals*. Boston: Little, Brown, 1977, pp. 453–473.

Bringing Pain Relief to Children

Treatment Approaches

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