Investigação Básica e Translaccional | Casuística / Investigação

CO-029 - (1JDP-9937) - POTENTIALLY UNRECOGNIZED PAIN IN CHILDREN – A STUDY IN A POPULATION-BASED BIRTH COHORT AT 7 YEARS OF AGE

Vanessa Gorito^{1,2,3}; Teresa Monjardino²; Inês Azevedo^{1,2,3}; Raquel Lucas^{2,4}

1 - Serviço Pediatria, Centro Materno-Pediátrico, Centro Hospitalar e Universitário de São João, Porto, Portugal; 2 - EPIUnit – Instituto de Saúde Pública, Universidade do Porto, Porto, Portugal; 3 - Departamento de Ginecologia e Obstetrícia, Faculdade de Medicina, Universidade do Porto, Porto, Portugal; 4 -Departamento de Ciências da Saúde Pública e Forenses e Educação Médica, Faculdade de Medicina, Universidade do Porto, Porto, Portugal

Introdução e Objectivos

Parental report has traditionally been interpreted as a key source of clinical history for pediatricians. However, given that pain has both sensory and emotional dimensions, children should be uniquely able to reveal their internal experiences.

We aim to estimate the point prevalence of pain according to parental and child report, and to assess the accuracy of parental report, considering children's self-report as the gold-standard.

Metodologia

We conducted a prospective study of 5639 children from a Portuguese birth cohort – Generation XXI, where parents and 7-year-old children answered the same questions at the same time. We estimated the point prevalence of any pain, high intensity pain and pain in two or more sites according to parental and child report. We assessed the accuracy of parental report, considering children's self-report as the gold standard.

Resultados

At 7 years of age, 499 children (8.8% [95% CI 0.081-0.096]) reported to have pain at the time of the interview. Of those, 44.1% had high intensity pain (3.9% [96% CI 0.034-0.044] of the whole sample) and 12.4% reported pain in two or more sites (1.1% [95% CI 0.008-0.014] of the whole sample). In this community setting, pain prevalence and intensity were lower when collected from parents. Parental report had sensitivity below 20% and specificity above 95% but its positive predictive value was at most 25%.

Conclusões

Our findings support that outside acute care parents have a specific but not sensitive report of children's pain. Their report seemed useful to exclude major complaints but limited to screen children's pain. This limitation was higher for more severe pain, i.e. two or more sites or high intensity pain. Children should be inquired directly to avoid misestimating pediatric pain.

Palavras-chave : pediatric pain, children report, parent report, accuracy, agreement, population-based study