Pain Experience Profile in Children with Cancer: Prospective Analysis of 2216 Treatment Days in a Developing Country

Montaser A. Mohamed, Ahmed Mohammed Morsy, Khaled F Riad

Abstract:

Background Cancer in children is a potentially curable disease, particularly in developed countries. Conventional chemotherapy is essentially an integral part of treatment, either alone, or as a part of multimodality therapy including surgery & radiotherapy. How to deal with pain is an integral part of symptom management in pediatric cancer patients in general, with especially great importance in the context of palliative care in developing countries, in which curability lags behind that of developed countries. Proper recognition of underlying pathophysiology and various causes of pain are so essential for pain management, and for ameliorating suffering in the realm of holistic care for children with cancer. The aim of this study is to address and meticulously analyze the spectrum of pain characteristics in children with cancer at an institutional university cancer center to unravel pain profile in these patients as an experience for a developing country. Patients & Methods A hospital based, prospective study was conducted, involving pediatric cancer patients, who presented with pain due to cancer itself or its treatment in the period from 2013 Jul to 2015 Jan. Evaluation of patients' documented pain cycles for pain cause, type, and location & also for pain treatment characteristics was done. Results A total of 286 pain cycles was documented comprising 2216 treatment days (range 3-56 days). Disease-related pain was the most frequent cause of pain in our study. Oral mucosa was the most frequent site for treatment-related pain & strongly correlated with NHL diagnosis. Leukemia was strongly correlated with "the extremities" as a location of bone pain. Visceral pain was most often associated with lymphomas. Neuropathic pain was the least frequent type of pain, however, associated with higher initial pain intensity scores & longer pain cycle duration. Conclusions Children with cancer in the developing countries still have more disease-related pain than their counterparts in the developed countries. Pain experience in pediatric oncology may indirectly reflect presentations of childhood cancer, and could be a surrogate profile for tumor location, metastatic sites, the degree of treatment intensity, likewise the context of the disease state either at diagnosis, during treatment, or at progression.

Keywords:

Pain; Pediatric Oncology; Childhood Cancer; Pain Assessment; Pain Characteristics, Neuropathic Pain; Pediatric Cancer Pain; Analgesia; Palliative Care; Pain Management; Opioid Drugs: Tramadol; Morphine

Published In:

Journal of Cancer Prevention & Current Research, 4(6), NULL