

MEETING ABSTRACT

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A hospital stay - the children's view

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Background

Regular pain assessment and documentation of side effect are important factors for successful pain management [1]. Therefore pain assessment is very common in hospitals. Other factors also important for patients and also influencing pain intensity are assessed seldomly. These factors, like perioperative anxiety [2] or sleep [3] may also influence pain perception.

Material and methods

In a prospective, exploratory pilot study structured interviews were conducted with 48 children and adolescents (mean age: 13.1, range: 11 - 17; female: 35%) to evaluate their view of the hospital stay. To identify potential areas for improvement the main focus of these interviews was to record patient's complaints. Therefore patients were encouraged to tell how they experienced their hospital stay, how they felt and to tell how they slept in the hospital. In order to get an unbiased view, patients were not asked specific questions regarding their wellbeing, sleep or other topics.

Results

Forty out of 48 (83%) children and adolescents reported some kind of reduced well-being. The most frequent complaints were boredom (46%), followed by fear (40%) and nervousness (31%). A similar number of children and adolescents (85%) reported sleep related problems. The most frequent sleep related complaints were tiredness during the day (48%) and disturbance of sleep caused by pain (38%) or medical care (33%). While only 20 out of 48 (42%) children and adolescent reported nausea or vomiting additional eleven patients (23%) reported dizziness.

Conclusions

Beside the common aspects like PONV, other complaints like tiredness, sleep disturbance and fear are experienced in many patients. These aspects may affect pain perception and should be therefore evaluated. Furthermore, usage of age specific phrases like dizziness additional to nausea should be considered.

Competing interests

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References

1. Messerer B, Gutmann A, Weinberg A, Sandner-Kiesling A: **Implementation of a standardized pain management in a pediatric surgery unit.** *Pediatr Surg Int* 2010, **26**:879-889.
2. Chieng YJS, Chan ACS, Klainin-Yobas P, He H-G: **Perioperative anxiety and postoperative pain in children and adolescents undergoing elective surgical procedures: a quantitative systematic review.** *J Adv Nurs* 2014, **70**:243-255.
3. Lewin DS, Dahl RE: **Importance of sleep in the management of pediatric pain.** *J Dev Behav Pediatr* 1999, **20**:244-252.

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