

WHO's NEW GUIDELINE

WHO issues new guidelines on the management of chronic pain in children



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Chronic pain or pain that persists or recurs for longer than three months in children is a significant public health problem and a leading cause of morbidity in children globally. Without access to pain management, the quality of life for children and adolescents with chronic pain is severely impacted.

Compared to their peers, children with chronic pain report higher levels of physical disability, anxiety, depression, sleep problems and poor academic performance.

New ***WHO Guidelines on the management of chronic pain in children provide recommended physical, psychological and pharmacological interventions for pain relief in children aged 0-19 years***. The guideline supports Member States and their partners to develop and implement national and local policies, regulations, pain management protocols and best practices for pain relief.

Little is known about the global burden of chronic pain in children. Available studies suggest that about one-quarter to one-third of children experience it; and it is often a symptom of long-term conditions, such as cancer, sickle-cell disease, diabetes and arthritic conditions.

Children and adolescents have the right to the highest attainable standard of health, and the appropriate, high-quality treatments to manage their pain. Care for children with chronic pain must be child- and family-centred and included in all universal health coverage schemes.

Three areas of interventions

Based on the most current scientific evidence, the recommendations include three areas of interventions: physical therapy, psychological therapy, and pharmacological management, which may include the use of morphine for end-of-life-care or when chronic pain is associated with life-limiting conditions.

WHO defines the terms “end-of-life-care” as palliative care for people in the final weeks or months of life to die with dignity) and “life-limiting conditions” as illnesses for which there is no cure and an early death is expected, but with which a person may continue to live for several more years.

The guideline highlights the importance of opioid stewardship to address worldwide concerns about harms arising from misuse of these medicines. Opioid stewardship refers to a series of strategies and interventions involving the appropriate procurement, storage, prescribing and use of opioids, as well as the disposal of unused opioids when opioids are appropriately prescribed for the treatment and management of specific medical conditions.

The guideline includes 10 best practice statements which apply to all aspects of the clinical care of a child with chronic pain, including the planning, implementation and delivery of physical, psychological and pharmacological interventions. For example, children with chronic pain and their families and caregivers must be cared for from a biopsychosocial perspective, recognizing pain as a complex multidimensional experience resulting from biological, psychological and social factors instead of only treating pain as simply a biomedical problem.

This guideline replaces the discontinued “WHO guidelines on the pharmacological treatment of persisting pain in children with medical illnesses” (2012). – **WHO, February 1, 2021**
