

Parenting: Preparing Children for an IV Needle Insertion

Needle insertions do hurt and children are fearful of them, but parents can help to ease their children's pain and fear.

By Mark T. Haggard

I REMEMBER THE days: taking a day off from work, driving the 50 miles to Children's Hospital of Central California, ushering my 4-year-old into the ambulatory infusion clinic, and then watching the nurse try to insert an IV needle for his intravenous immune globulin (IVIG) therapy. It was sheer terror for my son. Prior to the IV setup, my son would tense up and hide his arms. I tried to reassure him that everything was going to be fine and that the needle wouldn't hurt, but that didn't help. Instead, he continued to fight and hide his arms. He had a long history with blood draws and immunizations, so he knew the pain of a needle insertion.

Eventually, my only choice was to subdue him. The ensuing wrestling matches often lasted as long as 30 minutes. It's amazing how strong a 4-year-old can be when faced with a needle insertion. My plan to help the nursing staff didn't help them much; attempting to insert a needle in my son was like trying to hit a moving target. I often was told the absolute worst news a parent in this situation wants to hear: "I missed the vein; I gotta try again." Round two. When my son was finally accessed, and I could catch my breath and wipe the sweat off of my brow, I remember thinking: "There has to be a better way of doing this!"



When my daughter was prescribed IVIG for her immune deficiency at age 2, I was horrified at the thought

and shaking my head, I always thought to myself: "There has to be a better way of doing this!"

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of nurses trying to insert a needle into her. I handled her needle insertion the same way as my son's. When encouraging words did not calm her, I had to wrestle her into submission. Without good veins in her hands, nurses ultimately had to go into her feet. Wiping the sweat from my brow

And there is a better way of approaching a child's first, and even subsequent, IVIG therapy. My son is now 13. He has hundreds of infusions behind him and (much to the angst of our immunologists) a port that is easier for his home infusion nurse to access. Those first infusions have

been pushed from his memory, but they remain seared into my brain.

Helping the Needle Insertion: Honesty and Education

According to Nancy Chaney, a home infusion specialist for St. Luke's Home Health in Boise, Idaho, the most important approach to preparing young kids for the "poke" of their first infusion is to be honest with them. "Kids know when you're lying to them," she explains. "Don't tell them it won't hurt, because it does." Although the truth may cause some worry for children, lying causes mistrust between children and their parents. And, when children cannot trust their parents, a bad precedence is established. "Saying that shots don't hurt is not a good idea, because shots do hurt," says Howard Bennett, MD, a professor of pediatrics at George Washington University School of Medicine and the author of *Lions Aren't Scared of Shots*. "A better response is something like: 'It may hurt, but I'll be here with you, and if it does hurt, the pain will only last a little while.'"

Lindsay Uman, PhD, a clinical psychologist at IWK Health Centre in Halifax, Nova Scotia, and a pediatric needle pain researcher, makes an interesting observation: "Many studies show that parental reassurance (saying 'It's OK' or 'Don't worry') is likely to increase a child's distress, [possibly because] it tells the child there's something to worry about." She further notes that since young children take their cue from their parents, the attitude and appearance of a parent is more important than they realize. If kids see their parents grimace or tense up, they are likely to

become anxious as well. "Parental behavior ... has been shown repeatedly to be a key factor in determining the amount of pain and anxiety a child will experience."

It is not knowledge, but the unknown, that causes IV injection pain. Therefore, educating children, rather than leaving them in the dark, makes a needle insertion easier on them. "At home, parents can read books to their kids about visiting the doctor and encourage them to play doctor," suggests Dr. Bennett. "Sometimes kids who bring stuffed animals to appointments like giving them pretend shots before the doctor

applied early enough to take effect). Having children drink a lot of water can make accessing their veins less painful. And, giving children something that provides them psychological comfort during the procedure can help. For my son, it was his stuffed golden retriever named "Josh" (which he still has). For my daughter, it was her pink blanket (which she has in pieces).

Another strategy is distraction. Dr. Uman's research shows that distraction reduces pain and anxiety associated with needles. (Dentists have known this for a long time; watching ESPN Classic took the sting

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gives one to them." Playing doctor is a form of therapeutic play that prepares children to see what they are going to be receiving, such as starting a line on a doll or a stuffed animal. And, it's best to use the actual equipment: the tape, the bottle of IVIG and the needles. Chaney even suggests that children be placed in control, letting them call the shots and dictate the pace of the procedure.

Other Strategies: Comfort, Distraction and Rewards

The physical pain of an injection can be tempered by providing children some additional comfort. For instance, pain can be suppressed with a numbing cream like Emla (although it must be

out of my last root canal.) How you distract children depends on their age. According to Dr. Bennett, "Babies and toddlers can be distracted with singing, stories or playing with a small toy. Older children respond well to watching videos or listening to stories or music. Parents can also use cell phones to show movies or photographs to their kids during painful procedures."

Many pediatricians' offices reward patients with stickers or lollipops after a shot or an immunization. "It's a way that the doctor says, 'Thanks for being cooperative,' and, 'I'm sorry for doing something unpleasant,'" says Dr. Bennett. And you don't need to rely on the doctor for rewards; praising your children for being brave

is often sufficient. My son was rewarded with a hamburger on the way back from Children's Hospital.

Passing the Time

Once an IV has been placed and your child is infusing, how is it best to pass the hours? With my son, the combination of Tylenol and the wrestling match usually put him to sleep for an hour. When he woke up, I would pull him around Children's Hospital in a Radio Flyer wagon that the hospital provided. Upon our return to the infusion center, we would have lunch and settle in with a good movie. Chaney suggests that activities during an infusion ought to be age-appropriate. She taught one

of her middle school patients to play cards, adding, "He's quite the card shark now." And, she infuses one of her patients at school, which gives him ample time in the nurse's cubicle to catch up on homework.

Focus on doing those things that bring the greatest comfort for your child. But, keep in mind that your child still has a needle in his or her arm. Climbing the structures on the playground is certainly not recommended, but getting some fresh air can be.

Even Though It's for Their Own Good

Ultimately, it's the needle insertion that causes the most pain for children

getting their first IVIG infusion. It flies in the face of logic to try to gain the cooperation of our children when faced by a strange person with a needle. And, saying "It's for your own good" doesn't help. I suppose the saving grace is that those moments of terror are likely to be blotted out of the minds of our kids with time. Best of all for me, despite what my son and daughter have had to endure at the hands of their father, they still love me. ■

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