

# Patient Controlled Analgesia (Parent/Carer)

Parent Information Leaflet

February 2018

## **What Is Patient Controlled Analgesia (PCA)?**

PCA stands for 'Patient Controlled Analgesia'. A PCA machines is a pump which has a syringe of pain relieving medicine and is connected to your child's infusion drip. The pump is programmed and the child uses a hand held button to control the amount of pain relieving medicine that they receive and the time that they receive it. **Only** your child can press the button, please do not press it for them. Only children aged 8 years and over will be allowed to use a PCA pump and their understanding will have to be assessed prior to them using it.

## **What Are The Benefits Of Patient Controlled Analgesia?**

- ◆ Your child is in control of their pain relief.
- ◆ There may be fewer side effects such as sickness and vomiting.
- ◆ There is no delay in your child receiving pain relief.
- ◆ It begins to work within 5 minutes of the button being pressed by your child.
- ◆ Increased safety as the pump will only give one pre-set dose in any 5 minutes so your child cannot overdose.

## **How Does A Patient Controlled Analgesia Pump Work?**

Your child will be connected to the PCA pump via an infusion line. Your child will have a button in their hand, which they must press and release when they are in pain. This tells the pump to give them a small amount of the pain relieving medicine into a vein, usually in their arm. Your child can do this whenever they feel discomfort, they do not need to tell the nurse first.

It is important that your child doesn't wait for the pain to become too bad, they may find it useful to press the button 5-10 minutes before moving out of or around the bed.

It usually takes about 5 minutes to start working. If their pain is still the same after this, your child can press the button again, and continue to press the button every 5 minutes until their pain has eased. When your child's pain has settled they do not need to press the button again until the pain starts to return.

The PCA pump will be prescribed by an anaesthetist. An anaesthetic or pain nurse will then programme the pump and set it up. The dose of pain relieving medication to be given via the pump will be prescribed according to your child's weight and individual needs.

Whilst on the PCA your child may not be able to breathe as deeply as normal as the analgesia may make them sleepy, therefore oxygen is prescribed to ensure that enough oxygen enters their body.

## **Can MY Child Give Themselves Too Much Pain Relieving Medicine?**

**NO** there is a safety lockout period built into the pump, which is normally 5 minutes. Your child will not receive any further doses no matter how many times they press the button within the set time period.

## **How Often Should My Child Press The Button?**

Your child may press the button as often as they feel they need to. Every child is an individual therefore everyone's pain level is different, so your child is the best person to decide how much pain medication they need.

**N.B. Your child is the only person allowed to press the button. They MUST NOT allow any hospital staff, friends or relatives to do so.**

## **How Will My Child Feel Whilst They Are Using The Patient Controlled Analgesia?**

Your child may feel sleepy and light headed when they first start using the PCA, however this should settle.

## **Nursing Observations**

Throughout the time that your child uses the PCA, nurses will regularly assess how effective it is in controlling their pain. This involves the recording of your child's pain scores, breathing rate, blood pressure, heart rate and the amount of oxygen in the blood, and enables them to identify any problems which may occur. Your child may be reviewed by the Acute Pain Nurse or an anaesthetist, to assess how well the PCA is controlling their pain and if necessary the PCA programme can be changed to suit your child's needs.

## **What If The Patient Controlled Analgesia Does Not Work?**

If your child is pressing the button frequently, and they are still uncomfortable, they must tell their nurse. She will firstly check that the pump is working properly and should be able to give your child some other type of pain relief with the PCA, to make them more comfortable.

If their pain continues, the Acute Pain Team or on-call anaesthetist will be contacted to review your child.

## **What Medication Can MY Child Have Whilst On Patient Controlled Analgesia?**

Your child may also be prescribed other pain relieving medicines such as Paracetamol and Ibuprofen to take, as well as using the PCA. By giving different types of medicines your child's pain will be better controlled, as each of the medicines work in different areas of their body, making them feel more comfortable. Once these medicines have been taken regularly for at least 24 hours, they should start to control your child's pain and they may find that they do not need to press the PCA button as often.

## **When Will The Patient Controlled Analgesia Be Stopped?**

The Acute Pain Team, doctor or ward nurse will discuss this with you and your child. It is usually stopped when the amount of drug your child uses each day reduces. This is a sign that the other pain relieving medicine they are being given is helping to control their pain.

## **What Are The Side Effects Of The Drugs Used In Patient Controlled Analgesia?**

Some children may experience nausea and vomiting, occasionally they may experience itching, and some children may have difficulty in passing urine, but all of these problems can be easily managed.

## **Alternatives to Patient Controlled Analgesia**

**Oral Tablets and Medicines:** These are used for all types of pain. They take at least 20-30 minutes to have some effect, but are not as effective as a PCA.

**Injections:** These are occasionally given to children to treat moderate to severe pain. They can be given directly into your child's vein for an immediate effect, or into their leg or buttock muscle (rarely given to children). If given into a muscle it takes approximately 20 minutes to start working.

**Suppositories:** For pain relief are inserted into your child's bottom by a nurse. The drug then dissolves and eventually enters the bloodstream. Suppositories work over a longer period and may be given if your child is vomiting or are unable to take anything by mouth. They will not make your child open their bowels.

## **Other Useful Contacts Or Information**

NHS 111  
Patient Information Centre

## **Source Of Good Practice**

In compiling this information leaflet a number of articles and leaflets have been used including:

[www.ncbi.nlm.nih.gov/pubmed/12175355](http://www.ncbi.nlm.nih.gov/pubmed/12175355)

[www.sheffieldchildrens.nhs.uk/.../Pain\\_PatientControlledAnalgesia.pdf](http://www.sheffieldchildrens.nhs.uk/.../Pain_PatientControlledAnalgesia.pdf)

If you have any questions you want to ask, you can use this space below to remind you

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

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