

In this study, the advantages of subcutaneous analgesic therapy in terms of comfort in neonatal palliative care situations were investigated” Pouvreau et al (2017).

Abstract:

INTRODUCTION: Subcutaneous hydration (hypodermoclysis) and drug administration is a widely used method of analgesic therapy in adult palliative care medicine. Very little is known about its use in neonatal medicine. Evidence-based guidelines do not exist due to a lack of data. In this study, the advantages of subcutaneous analgesic therapy in terms of comfort in neonatal palliative care situations were investigated.

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METHODS: This report details the results of a systematic review associated with a survey in neonatal intensive care units (NICUs) and pediatric palliative care departments (PPCTs) in France.

RESULTS: No article was available in the Medline database. In Google®, we found six guidelines that described the use of the subcutaneous route in the pediatric palliative population. The participation rate in the survey was approximately 83 % for French NICUs and 74 % for PPCTs. Eleven percent of NICUs and 27 % of PPCTs had already used subcutaneous drug administration for palliative care, mainly for analgesia and terminal sedation. Limiting factors of its use were mainly alternative options and the lack of data. Nevertheless, 76 % of NICUs and 73 % of PPCTs expressed an interest in the use of the subcutaneous route in NICUs. Ninety-one percent of French NICUs and 80 % of PPCTs were interested in elaborating a protocol using the subcutaneous route for analgesia, anxiolysis, or terminal sedation.

CONCLUSION: The subcutaneous route can be advantageous for comfort care in the neonatal palliative population. Studies are needed to define the modalities, pharmacodynamics, and pharmacokinetics of therapeutics in this population.

Reference:



Pouvreau, N., Tandonnet, J., Tandonnet, O. and Renesme, L. (2017) Use of subcutaneous route for comfort care in neonatal palliative population: Systematic review and survey of practices in France. Archives de Pédiatrie. August 11th. . .

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