



To describe venipuncture frequency, its pain intensity, and the analgesic approach in ICU newborns; to determine the factors associated with the lack of preprocedural analgesia and with a high pain score during venipuncture” Courtois et al (2016).

Abstract:

BACKGROUND: Newborns in intensive care units (ICUs) undergo numerous painful procedures including venipunctures. Skin-breaking procedures have been associated with adverse neurodevelopment long-term effects in very preterm neonates. The venipuncture frequency and its real bedside pain management treatment are not well known in this setting.

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OBJECTIVES: To describe venipuncture frequency, its pain intensity, and the analgesic approach in ICU newborns; to determine the factors associated with the lack of preprocedural analgesia and with a high pain score during venipuncture.

DESIGN: Further analysis of EIPPAIN 2 (Epidemiology of Procedural Pain In Neonates), which is a descriptive prospective epidemiologic study.

SETTING: All 16 neonatal and pediatric ICUs in the Paris region in France.

PARTICIPANTS: All newborns in the ICU with a maximum corrected age under 45 weeks of gestation on admission who had at least one venipuncture during the study period.

METHODS: Data on all venipunctures, their pain score assessed with the DAN scale and their corresponding analgesic therapies were prospectively collected. The inclusion period lasted six weeks, from June 2, 2011, to July 12, 2011. Newborns were followed from their admission to the 14th day of their ICU stay or discharge, whichever occurred first.

RESULTS: 495 newborns who underwent venipunctures were included. The mean (SD) gestational age was 33.0 (4.4) weeks and duration of participation was 8.0 (4.5) days. A total of 257 (51.9%) neonates were very preterm (

CONCLUSIONS: Venipuncture is very frequent in preterm and term neonates in the ICUs. 76% were performed with preprocedural analgesia. Strategies to reduce the number of attempts and to promote parental presence seem necessary.

Reference:

Courtois, E., Cimerman, P., Dubuche, V., Goiset, M.F., Orfèvre, C., Lagarde, A., Sgaggero, B., Guiot, C., Goussot, M., Huraux, E., Nanquette, M.C., Butel, C., Ferreira, A.M., Lacoste, S., Séjourné, S., Jolly, V., Lajoie, G., Maillard, V., Guedj, R., Chappuy, H. and Carbajal, R. (2016) The burden of venipuncture pain in neonatal intensive care units: EIPPAIN 2, a prospective observational study. *International Journal of Nursing Studies*. 57, p.48-59.

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