Pain & Palliative Care Clinical Studies Group (CRN: Children / Louis Dundas Development Fund collaboration)

Top 10 Priorities for Paediatric Pain & Palliative Care Research

1. Is gabapentin safe to use and effective for reducing pain with neuropathic characteristics in children (6-18yrs) with chronic pain?

2. Are intravenous NSAIDS safe to use and effective for reducing pain after surgery in preschool children (0-5yrs)?

3. Are opioids safe to use and effective for reducing acute pain at home in children (0-18yrs)?

4. In children (6-18yrs) with chronic pain, do multicomponent CBT interventions safely and effectively improve function and quality of life immediately after treatment and during long-term follow up?

5. Is amitriptyline safe to use and effective for reducing pain with neuropathic characteristics in children (6-18yrs) with chronic pain?

6. Is ketamine safe to use and effective for reducing poorly controlled pain in children (0-18yrs) receiving palliative care?

7. Is fentanyl buccal safe to use and effective for reducing breakthrough pain in children (0-18yrs) receiving palliative care?

8. Is intravenous paracetamol safe to use and effective for reducing pain in pre-term (<37 weeks gestation age) and low birthweight infants?

9. Is massage using the "M" technique safe to use and effective for reducing pain in children (6-18yrs) with cancer?

10. Is methadone (as adjuvant) safe to use and effective for reducing poorly controlled pain in children (0-18yrs) receiving palliative care?

The effectiveness of these treatments is not adequately answered by systematic reviews of existing research.

Future research needs to address urgently these important questions, which are relevant to both clinicians and patients.

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