

Xanuunka Daran

Kaga hortag oo kaga yaree xanuunka qalliin ama habraac caafimaad

Waxaan iska kaashanaynnaa adiga iyo ilmahaagaba sidii aan uga hortagi lahayn oo nafis looga heli lahaa xanuunka sida dhammaystirka ah ee suuragalka ah.

Xanuunka daran ayaa ah mid waqt gaaban qaata oo badiyaa laga roonaado waqt ka dib. Macluumaadkan soo socda ayaa sifaynaya sida looga roonaado xanuunka laga yaabo in ilmahaagu dareemo ka dib qalliin, dhaawac, habraac caafimaad, ama saamaynta soo raacda daawaynta. Waxay yeelan kartaa cawaaqib muddo-gaabaa iyo mid muddo-dheerba marka xanuunka aan la daawayn gabi ahaanba, ama aan loo daaweyn si ku filan. Xakamaynta xanuunka ee wax ku oolka leh ayaa waxtar ugu yeelan kara ilmahaaga inuu si dhakhso leh u ladnaado.

Sidee ayuu ilmahaygu u muujin doonaa xanuunka?

Ilmo kasta ayaa si ka duwan uga falceliya xanuunka. Carruurta ayaa noqon kara kuwo aammusan oo firfircooni yar leh, ama ah kuwo aan degganayn oo si fudud u xanaaqa. Waxaa laga yaabaa in ayna nafsaad u yeelan inay wax cunaan ama beddelaan hababkooda seexashada.

Waxaan si joogto ah u cabbirnnaa badnida xanuunka anagga oo adeegsana cabbirka xanuunka ee u dhigma heerka kobcitaaneed ee ilmahaaga. Wixii macluumaad dheeraad ah eeg qoraalkayaga "Qiimaynta Xanuunka Carruurta" seattlechildrens.org/pdf/PE952SO.pdf.

Waxa ugu fiican inay carruurtu sheegtaan xanuunkooda. Waxaan waydiinnaa inay sifeeyaan halka xanunaysa, inta ay damqanayso, waxa lagaga roonaado ama uga sii dara, iyo siday iyagu u dareemaan.

Maxaa la samayn karaa si looga hortago oo looga reysto xanuunka?

Yoolkayagu waa inaan ka hortagno xanuunka marka ay suurtagal tahay. Weyddii haddii xanun la filan doono iyo wixa la samayn doono si looga hortago. Marka aan xanuunka laga hortagin, waa in hore looga falceliyaa ka hor inta aanu Aad uga sii darin. Dhimitaanka xanuunka ee goor hore waxay siin doontaa ilmahaaga deggenaansho ka sii badan, oo ay kordhinaysa dhaqdhaqaqa iyo tamarta, oo ay soo dedejinaysa bogsashada. Intaa wixa u dheer, daawaynta xanuunka ee goorta hore ayaa u horseedaysa in la yareeyo guud ahaanba isticmaalka daawooyinka xanuunka.

Waxaan u isticmaalnaa dawo iyo xeelado kaleba si aan u daweynno xanuunka. Maadaama u xanuunku wax isku murgisan yahay oo qof walba falcelintiisu u ka duwan yahay, inta badan wixa fiican in la isticmaalo in ka badan hal hab isku waqtii ahaan.

Daawooyinka

Marka sida habboon loo isticmaalo, dawooyinka xanuunku waa badbaado oo waa wax ku ool. Qaddarka dawada xanuunku waxay ku xiran tahay miisaanka, nooca xanuunka iyo caafimaadka ilmahaaga. Dawada xanuunka fudud waxaa badanaa laga siiyaa afka. Acetaminophen (Tylenol) ama ibuprofen (Advil ama Motrin) ayaa badiyaa loo isticmaalaa xanuunka noocaan ah. Si fiican ayay wax uga qabtaan inay xakameeyaan xanuunka, xitaa xanuunka qaliinka ka dib ah.

Si Aad u Ogaato Wax intaa Ka Badan

- Isniinta illaa Jimcaha 8 subaxnimo illaa 5 galabnimo, fadlan la xiriir xafiiska dhakhtarkaaga qalliinka.
- Wixii ka dambeeya 5 galabnimo iyo Sabtida iyo Axadda, fadlan wac 206-987-2000 oo weyddiiso adeeg bixiyaha heeganka ah ee dhakhtarkaaga qalliinka.

Adeegyo Turjumaan Lacag La'aan ah

- Markaad joogto isbitaalka, weyddii kalkaalisa(ha) caafimaadka.
- Markaad joogto inta ka baxsan isbitaalka, u soo wac Khadka Afcelinta Qoyska ee lacag la'aanta ah, ee 1-866-583-1527. U sheeg afceliyaha magaca iyo lambarka gaarka ah ee aad rabto.



Xanuunka dhexdhexaadka ah ama ka daran ah, waxa laga yaabaa inaan u qorno nooc ka sii xoog badan dawada xanuunka sida moorfinta (morphine) ama okskoodhiinta (oxycodone) ah. Waxa laga yaabaa inaan daawada ku siino dhuumaha IV ama si toos ahaan ugu dhow neerfayaasha qaada farriimaha xanuunka.

Si aad u hesho maclummaad dheeraad ah oo ku saabsan sida daawooyinka loogu qaato dhuunta IV, akhriso qoraalkayaga "PCA: Daawada Xanuunka ee Bukaanku Xakameeyo" ee ku yaalla

seattlechildrens.org/pdf/PE371.pdf

Si aad u hesho maclummaad dheeraad ah oo ku saabsan sida daawooyinka loogu qaato si toos ahaan ugu dhow neerfayaasha qaada farriimaha xanuunka, akhriso qoraalladayada hoose.

- "Daawada Xanuunka Waaxda"
seattlechildrens.org/pdf/PE1133.pdf
- "Kateetarrada Neerfo Cidhifeedka ah"
seattlechildrens.org/pdf/PE781.pdf
- "Kateetarrada Duridda Dhabarka"
seattlechildrens.org/pdf/PE337.pdf

Dawooyin wada jira ayaa badanaa loo isticmaalaa ka hortagga iyo daweynta xanuunka.

Waa muhiim inaad u hoggaansanto kooxdaada daryeelka si aad ugala hadasho dawooyinka xanuunka ee sida ugu wanaagsan ugu shaqeyn doona ilmahaaga. Waa in laga taxaddaro, maadaama xitaa dawooyinka aan dhakhtarku qorin ee dukaanka laga iibsado, sida acetaminophen ama ibuprofen, ay la falgeli karaan dawooyinka qaarkood ee u dhakhtarku qoro ama xaaladaha caafimaad. Ka hubi bixiyaha daryeelka caafimaadkaaga ka hor inta aanad siin nooc kasta oo dawo ah ilmahaaga.

Tusaalooyinka hababka lagaga hortaggo iyo loo daweeyo xanuunka:

- Xanuunka jira markaa, waxa fiican inaad si joogto ah u siiso dawada xanuunka. Qalitaanka ka dib, dawada xanuunka ayaa badiyaa loo qoraa dhowrkii saacadoodba mar. Jadwalkan ayaa laga yaabaa in loogu sii wado 3 ama 4 maalmood ka dib marka ilmahaagu tago guriga, iyada oo ku xiran habraaca iyo wuxuu kala soo kulmay ilmahaagu.
- Markay tahay bilowga in dawada xididka laga siiyo (IV),baarista dhiigga, mararka la durayo, iyo qalabka marin u helka xididka, kareemka kabuubyada (LMX-4) ayaa horraanta la marin karaa maqaarka si uu uga caawiyo yaraynta xanuunka irbadda. Kabuubinta kale ee maqaarka ayaa ah J-tip, kaas oo ah nidaam si degdeg ah loogu bixiyo dawada kabuubyada maqaarka iyada oo aan la isticmaalin irbado.
- Suuxinta, oo ay weheliso xanuun joojinta, ayaa laga yaabaa in loogu taliyo habraacyada qaarkood. Kala hadal kooxda daryeelka ilmahaaga.

Ilmahaygu ma caadaysan doonaa dawada xanuunka?

Marka loo siiyo sida habboon, carruurtu ma caadaystaan dawada xanuunka. Yoolkayagu waa in aan si ku filnaan leh u daweyno xanuunka ilmahaaga iyadoo loo isticmaalayo sida ugu yar ee surragalka ah xanuun bi'yeysaasha culus. Marmarka qaarkood ee dhifta ah ee ay carruurtu u baahan yihin xakameynta xanuunka ee muddada dheer, waxa laga yaabaa in jirkooda uu la qabsado dawada (oo ay noqdaan kuwo aan shaqayn) oo ay u baahdaan qiyaas dawo xanuun intii hore ka badan si ay u helaan xanuun ka reysi la mid ah. La qabsigu ma aha wax la mid ah caadysiga, ama ku-tiirsanaanta nafsiyeed. Maadaama u jirku la qabsaday qaadashada dawooyinkan, marka xanuunku soo roonaado, qiyaasta dawada ayaa si tartiib-tartiib ah loo yareeyaa si looga hortago si xun dareenka ka joojinta.

Keelado kale

Daawada waxa intaa u dheer, waxaa jira dariiqyo kale oo muhiim ah oo xanuunka lagaga nafiso.

Qaabka la qabsiga: Baro qaabka uu ula qabsado ilmahaagu oo u soo saar qorshe. Carruurta qaarkood waxay doorbidaan inay daawadaan oo ay qayb ka noqdaan habsocodka si ay woxoogaa ku xakameeyaan xaaladaha xanuunka badan leh. Carruur kale ayaa si ka fiican dareema marka laga jeediyo ama la ilowsiyo xaaladda. Hubi in fiiro gaar ah la siiyo qaabka ilmahaagu uu ula qabsanayo way ka duwanaan kartaa taada.

Ka jeedinta: Kaga jeedi xanuunka adiga oo u jeediya male-awaalka ilmahaaga adiga oo u mara sheeko aad uga sheekayso ama aad daawataan telefishinka ama aflaan, xunbo wada afuuftaan, iyo/ama adiga oo akhriya buugga uu ugu jecel yahay.

Taabashada nasteeexada leh: Nasteeexo ugu yeel ilmahaaga siyaabaha iyaga ugu fiican. Qabo, koolkooli, lul, u duug, ama aayar u rux ilmahaaga.

Baraf ama kulayl: Iyada oo la isticmaalo baraf ku duuban maro ayaa laga yaabaa inuu naaquso xanuunka cudurka iyo habraaca caafimaad. Kulaylku wuxuu faa'iido u leeyahay xanuunka murqaha iyo nasashada guud.

Isticmaal kiish ay digiriqalalani ku jirto (beanbag) oo diirran oo lagu kuleyliyay maykarweef , dhalo biyo kulul ama qubeyska dhacdiidka oo diirran.

Farsamooyinka isdejinta: Isticmaal neefsasho gudaha hawada la geeyo oo aan kala joogsan ama weyddii Khabiirka Nolosha Ilmaha, kalkalisada ama xirfadlaha kale ee caafimaad in uu baro ilmahaaga farsamooyinka isdejinta si ay uga yareeyaan welwelka, lallabada, iyo xanuunka.

Naasnuujinta ama biyo sonkoreed (sukrose): Si loo dhimo xanuunka inta lagu jiro habraac caafimaadka, ilmaha dhasha ah ee ka yar 1 sano ayaa la naasnuujin karaa ama la siin karaa biyo sonkoreed ka hor iyo inta lagu jiro dhacdada.

Si u dhigid: Waligaa ha ku xajin ilmo iyaga oo u dhacadiid u jiifa inta lagu jiro habraac dhibaato ama xanuun leh, laakiin waxaad samayn kartaa:

- Ilmahaaga bogga ku qabo oo naasnuuji, haddii ay suurtagal tahay
- Ku fadhiisii ilmahaaga socod baradka ah dhabtaada
- U oggolow ilmahaaga ka sii weyni inuu doorto sida uu isku dhigayo

Diyaarinta: Isticmaal hadal daacad ah oo ha u sheegin ilmahaaga "Ku xanuunin meyso." Ciyaarta dabibinta leh iyo dabibinnada farshaxanka ayaan ku tiirsantooda hadalku badnayn oo waxaa laga heli karaa ka jeedin oo waliba la qabsiga kordhiya.

Sideen uga caawin karaa ilmahayga xanuunka?

Taageer ilmahaaga: noqo tabbabare, u fidi nasteeexo oo gacan ka geysa in la helo waxa waxtarka u leh inuu ilmahaagu helo ka reysasho.

- Kala hadal kooxdaada daryeelka caafimaadka sida ilmahaagu u muujiyo xanuunka iyo waxa aad u maleynaso inay caawiyaan.
- Rumayso in ilmahaaga xanuun hayo oo isla markaaba ka falceli.
- Xoogga saar siyaabaha qumman ee ilmahaaga isdejintiisu uga sii badanayso. Taageer dadaalka ilmahaaga si uu ula qabsado habraacyada iyo xanuunka rafaadka leh; u sheeg waxa ay dadka kale samaynayaan si ay xanuunka uga reystaan.
- Ogsoonow inuu ilmahaagu dareemi karo welwelkaaga.
- Waa caadi in laga baxo qolka inta lagu jiro habraaca xanuunka badan. Haddii aad doorato inaad joogto, waxaad wayddiisan kartaa siyaabo aad uga qaybqaadato taageeritaanka ilmahaaga.

Adiga ayaa ilmahaaga sida ugu fiican u yaqaan. Wuxaan kugu dhiirrigelinaynaa inaad kaalin firfircoona ka qaadato bogsashada ilmahaaga. Kala hadal kooxdaada daryeelka siduu ilmahaagu u muujiyo xanuunka iyo waxa u shaqeyya si loogu nasteexo ilmahaaga.

Waa maxay ilaha kale qaarkood?

Haddii ilmahaagu qabo xanuun aan laga yarayn ama uu sii socdo in ka badan intii la filayay, la xiriir dhakhtarka ilmahaaga. Intaa waxaa dheer, kala hadal kooxda daryeelka ilmahaaga si aad uga hesho macluumaadka ku saabsan ilaha kale. Kuwan waxa ka mid noqon kara:

- Rugta Caafimaadka Daawaynta Xanuunka
206-987-1520
 - Khabiirada Nolosha Ilmaha
206-987-2037
-

Ilaha waxbarashada bukaanka

- Fiidiyowga Waalidiintow, Ka hadla Xanuunka
youtu.be/ICWLDEatTDg
 - Wuxaad ka Filan karto Xarunta Qallinka ee isbitaalka Seattle Children's Maalinta Qallinkaaga
seattlechildrens.org/patients-families/surgery/preparing-your-child/
 - Yaraynta Xanuunka iyo Welwelka Irbadaha
seattlechildrens.org/pdf/PE1166.pdf
-

Su'aalo?

Dhammaan xubnaha kooxda ayaa u heellan inay adiga kaala shaqeyyaan sidii loo dhimi lahaa xanuunka. U sheeg xubnaha kooxdaada haddii aad qabto su'aalo ama rayi-celin waqtii kasta ha noqtee.

Acute Pain

Prevent and relieve pain from a surgery or medical procedure

We partner with you and your child to prevent and relieve pain as completely as possible.

Acute pain is short-lasting and usually gets better over time. The following information describes how to improve the pain your child may feel after a surgery, injury, procedure, or side effects of treatment. There can be short- and long-term consequences when pain is not treated at all, or not treated enough. Effective pain control will help your child get better faster.

How will my child show pain?

Every child reacts to pain differently. Children may be quiet and less active, or restless and easily upset. They may lose their appetite or change sleep patterns.

We regularly measure the intensity of pain by using a pain scale that matches the developmental level of your child. For more information read our handout "Assessing Children's Pain" at seattlechildrens.org/pdf/PE952.pdf.

It is best for children to report their own pain. We ask them to describe where it hurts, how much it hurts. Seattle Children's offers free interpreter services for patients, family members and legal representatives who are deaf or hard of hearing or speak a language other than English. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201. This handout has been reviewed by clinical staff at Seattle Children's. However, your needs are unique. Before you act or rely upon this information, please talk with your healthcare provider about what makes it better or worse, and what it feels like to them.

What can be done to prevent and relieve pain?

Our goal is to prevent pain when possible. Ask if pain is to be expected and what will be done to prevent it. When pain is not prevented, it should be responded to early before it becomes more severe. Relieving pain early will make your child more comfortable, increase activity and strength, and promote healing. In addition, treating pain early leads to less use of pain medicines overall.

We use medicine and other strategies to treat pain. Because pain is complex and each person's response is different, it is often best to use more than one method at the same time.

Medicines

When used appropriately, pain medicines are safe and effective. The amount of pain medicine depends on your child's weight, type of pain and health.

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To Learn More

- Monday through Friday, 8 a.m. to 5 p.m., please contact your surgeon's office.
- After 5 p.m. and on Saturday and Sunday, please call 206-987-2000 and ask for your surgeon's on-call provider.

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



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Medicine for mild pain is most often given by mouth. Acetaminophen (Tylenol) or ibuprofen (Advil or Motrin) are often used for this type of pain. They work very well to control pain, even pain after surgery.

For moderate or severe pain, we may prescribe a stronger type of pain medicine such as morphine or oxycodone. We may give medicines through an IV or directly near the nerves that carry the pain messages.

For more information about getting medicines through an IV, read our handout “PCA: Patient Controlled Analgesia” at seattlechildrens.org/pdf/PE371.pdf.

For more information about getting medicines directly near the nerves that carry the pain messages, read our handouts below.

- “Regional Analgesia”
seattlechildrens.org/pdf/PE1133.pdf
- “Peripheral Nerve Catheters”
seattlechildrens.org/pdf/PE781.pdf
- “Epidural Catheters”
seattlechildrens.org/pdf/PE337.pdf

A combination of medicines is often used to prevent and treat pain.

It is important to work with your care team to discuss pain medicines that will work best for your child. Care must be taken, as even common over-the-counter medicines, such as acetaminophen or ibuprofen, can interact with certain prescriptions or medical conditions. Check with your healthcare provider first before giving any type of medicine to your child.

Examples of methods for preventing and treating pain:

- For pain that is ongoing, it is best to give pain medicine regularly. After surgery, pain medicine often is ordered every few hours. This schedule may continue for 3 or 4 days after your child goes home, depending on the procedure and your child’s experience.
- For IV starts, blood tests, injections, and port access, numbing cream (LMX-4) can be put on the skin ahead of time to help reduce needle pain. Another topical anesthetic is J-tip, which is a system for quickly delivering numbing medicine through the skin without the use of needles.
- Sedation, along with pain relief, may be recommended for some procedures. Talk with your child’s care team.

Will my child become addicted to pain medicine?

When given appropriately, children do not become addicted to pain medicine. Our goal is to adequately treat your child’s pain using as little opioid as possible. On the rare occasion when children need long-term pain control, their bodies may get used to the medicine (become tolerant) and need a higher dose of pain medicine to get the same pain relief. Tolerance is not the same thing as addiction, or psychological dependence. Because the body becomes used to having these medicines, when the pain improves, the dose is slowly reduced to prevent discomfort from withdrawal.

Other strategies

In addition to medicine, there are other important ways to relieve pain.

Coping style: Learn your child's coping style and develop a plan. Some children prefer to watch and be a part of the process in order to have some control over painful situations. Other children do better with being distracted away from the situation. Make sure you focus on your child's style of coping it may differ from yours.

Distraction: Take attention away from the pain by guiding your child's imagination through storytelling or by watching TV or movies, blowing bubbles, and/or reading a favorite book.

Comforting touch: Comfort your child in ways that work best for them. Hold, cuddle, swaddle, massage, or rock your child.

Ice or heat: Using ice wrapped in cloth may ease some disease and procedure pain. Heat is useful for muscle pain and general relaxation.

Use a warm heated microwave beanbag, hot water bottle or warm bath.

Relaxation techniques: Use deep and steady breathing or ask a Child Life Specialist, nurse, or other health professional to teach your child relaxation techniques to help reduce anxiety, nausea, and pain.

Breastfeeding or sugar water (sucrose): To reduce pain during a procedure, infants less than 1 year can breastfeed or be given sugar water before and during the event.

Positioning: Never hold a child flat on their back during an uncomfortable or painful procedure, instead:

- Cradle your baby and breastfeed, if possible
- Sit your toddler on your lap
- Let your older child choose the position

Preparation: Use honest language and do not tell your child "It won't hurt." Therapeutic play and art therapies rely less on language and can provide distraction as well as promote coping.

How can I help my child with pain?

Support your child; be a coach, provide comfort and help discover what works best to give your child relief.

- Talk your healthcare team about how your child shows pain and what seems to help.
- Believe that your child is hurting and respond right away.
- Emphasize the positive ways your child can become more relaxed. Support your child's efforts to cope with distressing procedures and pain; tell what others are doing to relieve their pain.
- Keep in mind that your child may sense your anxiety.
- It is OK to leave the room during a painful procedure. If you choose to stay, you may ask for ways to participate in supporting your child.

You know your child best. We encourage you to take an active part in your child's recovery. Talk with your care team about how your child shows pain and what works to comfort your child.

What are some other resources?

If your child has unrelieved pain or pain continues longer than expected, contact your child's doctor. In addition, talk to your child's care team for information about other resources. These may include:

- Pain Medicine Clinic
206-987-1520
 - Child Life Specialists
206-987-2037
-

Patient education resources

- "Parents, Speak Up about Pain" video
youtu.be/lCWLD EatTDg
 - "What to Expect on Your Surgery Day at Seattle Children's Surgery Center"
seattlechildrens.org/patients-families/surgery/preparing-your-child
 - "Reducing the Pain and Anxiety of Needles"
seattlechildrens.org/pdf/PE1166.pdf
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Questions?

All team members are committed to partner with you and your child to improve pain. Let your care team know if you have questions or feedback at any time.