

# Calming Parents Might Help Kids Cope With Anesthesia

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The start of anesthesia can be distressing for children. Although antianxiety drugs can help keep kids calm, side effects exist. Non-drug methods offer alternatives, but a new review of studies finds that no single method shows a clear advantage in keeping the child calm and cooperative. The most commonly used tactic -- having the parent present while the child receives anesthesia medications -- does not appear to have any benefit.

Clinicians frequently ask parents to stay with their children during the start of anesthesia to make the experience go smoothly as possible. "We were a little surprised that the presence of parents was not shown to be helpful," said review co-author Dr. Allan Cyna.

"We did find some evidence suggesting that anxious parents may be associated with a more anxious or less cooperative [child](#) during the administration of the anesthetic," said Cyna, a senior consultant anesthetist at the Women's and Children's Hospital, in Adelaide, South Australia. He said that although there might not be a clear benefit to having the parent present during anesthesia induction, there are no studies showing there are any serious risks.

The new review appears in the latest issue of *The Cochrane Library*, a publication of The Cochrane Collaboration, an international organization that evaluates medical research. Systematic reviews like this one draw evidence-based conclusions about medical practice after considering both the content and quality of existing medical trials on a topic.

Anesthesia in children often begins with inhaled drugs because some consider a facemask and gas to be less upsetting than needles and injections. However, a child might become agitated and fight having the mask put on. The review article notes that preoperative anxiety might lead to agitation after surgery. Antianxiety drugs or [sedatives](#) can

increase anxiety in some children, which is why the review evaluated non-drug methods.

Cyna and his colleagues reviewed 17 studies of different ways to help reduce children's stress as they started anesthesia. The methods ranged from having the parent present, which eight studies evaluated, to having the child play with video games or having a clown entertain the child.

Several studies evaluated methods that focused on keeping the parent calm, including acupuncture for the parent or providing the parent with information about the surgery and anesthesia. One study found that the presence of a parent was significantly less effective in reducing children's anxiety at induction than using an antianxiety drug on the child. Individual studies found that clowns, a quiet environment or game playing showed some benefits, such as improved cooperation in children.

However, saying that there is no evidence of benefit for a given method does not mean it is never beneficial, said David Polaner, M.D., an associate professor of anesthesiology and pediatrics with Children's Hospital, in Denver. "When dealing with behavioral issues, we use the findings of aggregate studies as a guide, but we may find it difficult — or even misleading — to take those generalized findings and apply them to a very specific situation," he said. "I think that it is overreaching to say that there is never a benefit to having parents present at induction of anesthesia."

Polaner said that he generally finds the presence of a parent helpful, although in the truly anxious child, it cannot substitute for premedication, which he notes studies show to be the most effective intervention. A parent is present 80 percent to 90 percent of the time for children over the age of one year at Children's Hospital, he added. "Nevertheless, parents must be cautioned that many will find the experience upsetting, and if they are not able to conceal or suppress their tears it

may be upsetting to the child, and they may be better off not coming in.”

In many regions, having a parent present as anesthesia starts is so routine that [parents](#) expect it, Polaner said. “That’s OK, as long as it is very clear that the judgment of the anesthesiologist, based on the best interest of the child, is final.”

Curiously, the study that evaluated acupuncture for the parent before the induction of [anesthesia](#) in the child found that it seemed to help keep the child calmer and more cooperative. Using acupuncture on the parent “is fascinating and underutilized,” Polaner said. Most pediatric anesthesiologists are aware of this work, but acupuncture is not being widely used, primarily because of lack of training, he said.

More information: Yip P, et al. Non-pharmacological interventions for assisting the induction of anaesthesia in children. Cochrane Database of Systematic Reviews 2009, Issue 3.

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