Analgesic Effects of EMLA Cream and Oral Sucrose During Venipuncture in Preterm Infants

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**KEY WORDS**

preterm, pain, PIPP, DAN, sucrose, EMLA, venipuncture

**ABBREVIATIONS**

DAN—Douleur Aiguë Nouveau-né
PIPP—Premature Infant Pain Profile

This trial has been registered at www.clinicaltrials.gov (identifier NCT00470080).

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**WHAT’S KNOWN ON THIS SUBJECT:** Venipunctures are painful in preterm neonates. Oral sucrose has a moderate effect on reducing venipuncture-induced pain in neonates. Sucrose should be combined with other analgesic methods to improve analgesia. Data on the analgesic efficacy of EMLA cream in neonates are conflicting.

**WHAT THIS STUDY ADDS:** The combination of sucrose plus EMLA cream was more effective than sucrose alone in reducing venipuncture-induced pain in preterm neonates. The use of this combination analgesic strategy will improve pain management of venipuncture in preterm neonates.

**abstract**

**OBJECTIVE:** The goal of this study was to compare the analgesic effect of sucrose with that of the combination of sucrose and the local anesthetic cream EMLA during venipuncture in preterm neonates.

**METHODS:** This randomized, double-blind prospective study included infants younger than 37 weeks’ gestational age during 1 routine venipuncture for blood sampling. Each child randomly received either sucrose plus application of a placebo cream (S group) or sucrose plus EMLA cream (S+E group) before venipuncture. Venipuncture-induced pain was assessed through videotapes of the procedures by using the Douleur Aiguë Nouveau-né (DAN) behavioral scale. Pain was assessed at 2 phases: during venipuncture (from needle introduction to its removal) and during the recovery period (30 seconds after needle removal). Pain scores over time and between treatments were compared by using repeated-measures analysis of variance.

**RESULTS:** The study included 76 children (37 in the S group, 39 in the S+E group). Mean (SD) DAN pain scores for the S group and the S+E group were 7.7 (2.1) and 6.4 (2.5), respectively, during venipuncture and 7.1 (2.8) and 5.7 (3.3) during the postinjection period. A significant time and treatment effect in favor of the S+E group was observed.

**CONCLUSION:** The combination of sucrose and EMLA cream revealed a higher analgesic effect than sucrose alone during venipuncture in these preterm infants. *Pediatrics* 2011;128:e63–e70