

GROWING PAINS

Your 8-year-old son wakes up crying in the night complaining that his legs are throbbing. You rub them, and soothe him as much as you can, but are uncertain about whether to give him any medication or take him to the doctor.

Sound familiar? Your child is probably experiencing **growing pains**, a normal occurrence in about 25% to 40% of children. Read below to find out more about this common problem.

Diagnosis

Growing pains generally strike during two periods: in early childhood among three to five-year-olds and later on in eight to twelve-year-olds. They are what doctors call a **diagnosis of exclusion**. This means that other conditions should be ruled out before a diagnosis of growing pains is made. A thorough history and physical examination by your child's doctor can usually accomplish this. In rare instances, blood and X-ray studies may be required before a final diagnosis of growing pains is made.

Causes

No firm evidence exists to show that growth of bones causes pain. The most likely causes are the aches and discomforts resulting from the jumping, climbing, and running that active children do during the day. The pains can occur after a child has had a particularly athletic day.

Signs and Symptoms

Growing pains always concentrate in the muscles, rather than the joints. Most children report pains in the front of their thighs, in the calves, or behind the knees. Whereas joints affected by more serious diseases are swollen, red, tender, or warm, the joints of children experiencing growing pains appear normal.

Although growing pains often strike in late afternoon or early evening before bed, there are occasions when pain can wake a slumbering child. The intensity of the pain varies from child to child, and most kids don't experience the pains every day.

One symptom that doctors find most helpful in making a diagnosis of growing pains is how the child responds to touch while in pain. Children who have pain for a serious medical disease do not like to be handled, since movement tends to increase the pain. Children with growing pains respond differently; they feel better when they are held, massaged, and cuddled.

Treatment

Massage, stretching, heat, acetaminophen (Tylenol) or ibuprofen (never give aspirin to a child under 12 due to its association with Reye syndrome, a rare but potentially fatal disease) may help to relieve the pain. Although the pains point to no serious illness, they can be upsetting to a child (or a parent!). Because a child seems completely cured of her aches in the morning, parents sometimes suspect that the child faked the pains. However, this usually is not the case. Support and reassurance that growing pains will pass as children grow up can help them relax.

When to Call Your Child's Doctor

Alert your child's doctor if any of the following symptoms occur with your child's pain:

- persistent pain, pain in the morning, or swelling or redness in one particular area or joint
- pain associated with a particular injury
- fever
- limping
- unusual rashes
- loss of appetite
- weakness
- tiredness
- uncharacteristic behavior

These signs are **not** due to growing pains and should be evaluated by a child's doctor.

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The information provided in this handout is a free service to the patients of Family Medicine Associates. Please consult with your Primary Care Physician for further explanation and questions.