Growing pains

What are growing pains?

'Growing pains' is the term used to describe vague aches and pains in the legs of children. These pains cannot be explained by an obvious reason such as a preceding injury. It is really an inaccurate term; the proper medical terms are 'benign nocturnal limb pains' or 'nocturnal musculoskeletal pains'.

Who gets growing pains?

They typically occur in children of both sexes between the ages of 3 to 7 years but may commence at 2 years of age. It can also occur in 8 to 12 year olds. There is usually a family history of the condition.

How common is the problem?

It is a common condition that affects up to 25% of children.

What are the features of growing pains?

- Pain wakes the child, who is usually quite distressed.
- The pains can occur in the late evening before bedtime.
- Pain is felt diffusely in the legs—usually around the knee, front of the thighs, calf and shin (in particular).
- It may affect the arms but this is uncommon.
- Pain lasts about 20 to 30 minutes regardless of any treatment.
- Pain may recur during the night.
- There is no pain or disability the following morning. The child wakes up as normal and can run around without any discomfort.

There are no other symptoms including fever, headache, joint stiffness or skin discoloration.

The child is normal upon examination (including touching the area) by a doctor or other person. We refer to it as a diagnosis by exclusion—that is, ruling out other conditions such as arthritis. The pains vary in intensity and most children don't experience them every day.

What is the cause of growing pains?

The cause is uncertain. There is no firm evidence that the growth of bones or muscles cause the pain. The most likely explanation is the muscular tiredness, aches and discomforts resulting from the running, jumping, climbing and similar activities during the day. However, in some children they are not related to exercise.

Can preceding activity lead to a 'bad' night?

Yes; it has been observed that children who have very active days, particularly an athletic day, can have a night of suffering from growing pains. Parents may be able to predict troublesome evenings and give analgesics such as paracetamol (not aspirin).

What is the outlook?

The pains resolve in time, usually after months or a few years but clear by late childhood. If there are any real concerns your doctor will organise a blood test and X-ray but these are generally normal.

What is the treatment?

Reassurance

Parents require a lot of reassurance that the disorder is a normal event and not serious, and that their child will gradually recover without any ill affect.

Improvised treatments

Parents attempt many different treatments but there is no proven special effective treatment.

Analgesics

Pain-killing tablets can be given but the pains have usually disappeared before the analgesics take effect. They can be given as a preventive measure if the pains occur at predictable times.

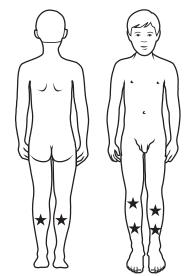
Heat packs

Some parents apply heat packs such as a hot washer or mini-towel but this treatment does not cause the pain to go away in a short time.

Massage

Of all the treatments given over the years gentle massage of the aching area of the legs with an analgesic cream or oil seems to be best and is usually recommended. It is really the soothing attention that probably works.

In summary, the best treatment is tender loving care by reassuring and cuddling your child and massaging the painful areas.



Typical sites of growing pains