The results indicated that distraction type did not have a significantly different influence on child pain-related outcome variables” Newell et al (2018).

Abstract:

OBJECTIVES: The aim of the current research was to compare the relative efficacy of interactive and passive distraction, with or without parental psychoeducation, on child pain and distress during a venepuncture. We also compared the effect of parental psychoeducation on parental distress, knowledge of distraction strategies and engagement in distraction.

METHODS: This cross-sectional study included 213 children scheduled for a venepuncture, and one of their parents, who were randomly allocated to one of four conditions; interactive distraction, passive distraction, interactive distraction with parent psychoeducation and passive distraction with parent psychoeducation. ANCOVA’s were used to investigate the impact of distraction type and the use of parent psychoeducation on child and parent pain related outcome variables.

RESULTS: Statistical analyses revealed no significant differences between groups for child-reported pain and distress. The parents of children who received interactive distraction reported significantly higher levels of distress than the parents of children who received passive distraction. Parents who received parent psychoeducation had a significantly higher
level of knowledge than parents who did not receive psychoeducation, but did not engage in more effective pain management behaviour.

CONCLUSIONS: The results indicated that distraction type did not have a significantly different influence on child pain-related outcome variables. In addition, while psychoeducation was demonstrated to be effective in increasing parental knowledge, it was not sufficient to change parental behaviour.

Reference:


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