This study was conducted to determine the effects of procedural restraint (PR) and cognitive-behavioral intervention package (CBIP) on venipuncture pain in children between 6-12 years of age.” Yilmaz Kurt et al (2019).

Abstract:

BACKGROUND: Invasive interventions can produce fear, anxiety, and pain in children. This may negatively affect the children’s treatment and care.

AIM: This study was conducted to determine the effects of procedural restraint (PR) and cognitive-behavioral intervention package (CBIP) on venipuncture pain in children between 6-12 years of age.

DESIGN: Quasi-experimental study.

SETTINGS: The study was conducted in the pediatric blood collection service of the hospital in Turkey between October 1, 2015, and April 1, 2016.

PARTICIPANTS/SUBJECTS:
The population of the study consisted of children admitted to the blood collection service during the study period who met the inclusion criteria.

METHODS: The children included in the study were divided into two groups. Group 1 (n = 31)
received PR in accordance with routine clinical practice. Group 2 (n = 30) received the CBIP. The data were collected by the researchers using a questionnaire, the visual analog scale (VAS), and the Wong-Baker FACES (WB-FACES) Pain Rating Scale.

RESULTS: The children in the PR group had a mean VAS score of 5.90 ± 3.22 and a mean WB-FACES score of 8.70 ± 2.22. The children in the CBIP group had a mean VAS score of 2.43 ± 2.02 and a mean WB-FACES score of 2.80 ± 2.49. A statistically significant difference was found between the mean VAS and WB-FACES pain scores of the groups (p < .05).

CONCLUSIONS: The results of this study showed that the children in the CBIP group had a lower pain level during venipuncture compared to those restrained for the procedure.

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Reference: