

An assessment of early post-injury Child Life Therapy in pain and anxiety management for paediatric burns: a prospective randomised controlled trial

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Introduction

Burn injuries remain extremely painful and distressing, especially for young children. The consequences of poorly managed pain and anxiety can be life-long. Whilst Child Life Therapy (CLT) and individual distraction techniques have been shown to be effective in many situations, few studies have looked at the effectiveness of the presence of a Child Life Therapist in reducing pain and anxiety in burn injured children undergoing dressing changes.

Methods

A prospective, randomised controlled trial was conducted, comparing CLT versus standard care in relation to pain and anxiety scores of children undergoing their initial burn dressing change. Pain and anxiety were assessed by an independent observer and questionnaires completed by the child, parent/caregiver and nursing staff.

Results

50 patients were recruited in each treatment group; median age 2.3 years (CLT) and 2.2 years (standard care). The median total body surface area (TBSA) burnt was 0.8% (CLT) and 0.5% (standard care). The majority were partial thickness dermal burns (88% CLT, 94% standard care). Rates of parent anxiety and pre-procedural child pain and anxiety were similar. Combined and scaled pain and anxiety scores in the CLT group were significantly less than in the standard treatment group ($p=0.03$). Whilst pain was significantly better in the CLT group ($p=0.02$), fear scores, wound outcomes and the need for skin grafting were not statistically different in either group.

Conclusions

The presence of a Child Life Therapist, with their ability to adapt to the environment, the child and their family, significantly reduced the experience of pain during paediatric burn dressings.

Key Words

Paediatric, Child Life Therapy, Burns, Pain, Anxiety

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