Author(s): KH/MS/KAB/KEB/CMM/AT

Date: 2015-03-21

Question: Should music distraction vs no treatment be used for reducing vaccine injection pain in adolescents >12 -17 years?<sup>1</sup>

Settings: school

Bibliography: Kristjansdottir 2011 (1,2)

Quality assessment							No of patients		Effect		Quality	/ Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Music/auditory distraction	No treatment	Relative (95% CI)	Absolute	quanty	Importance
Pain² (me	easured with:	validated	tools (Visual Ana	log Scale 0-3, 0	  -10); Better i	ndicated by lower	r values)					
1	randomised trials	serious <sup>3</sup>	no serious inconsistency	no serious indirectness	serious <sup>4</sup>	none	79	39	-	SMD 0.04 lower (0.42 lower to 0.34 higher) <sup>2</sup>	⊕⊕OO LOW	CRITICAL
Fear (ass	essed with: n	o data we	re identified for t	his critically im	portant outco	ome)						
0	No evidence available					none	-	-	-	-		CRITICAL
	Procedure Out outcomes)	itcomes,	Use of Intervention	on, Parent Fear,	Vaccine Co	mpliance, Memory	, Preference, Satis	sfaction (as	sessed v	vith: no data were	identifie	ed for these
0	No evidence available					none	-	-	-	-		IMPORTANT

In study by Krisjansdottir (2011), analysis (1) compared music with headphones with no treatment and analysis (2) compared music without headphones with no treatment

<sup>&</sup>lt;sup>2</sup> In study by Krisjansdottir (2011), the sample size in the control group was divided by 2

<sup>&</sup>lt;sup>3</sup> Participants not blinded; immunizers blinded to hypothesis

<sup>&</sup>lt;sup>4</sup> Confidence interval crosses the line of nonsignificance and sample size was below the recommended optimum information size (OIS) of 400 for an effect size of 0.2