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**Question:** Should skin to skin contact vs lying supine be used for reducing vaccine injection pain in neonates?

**Settings:** hospital

**Bibliography:** Chermont 2009 (1,2), Kostandy 2013 (2008 thesis), Saeidi 2011

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Skin to skin contact	Lying supine	Relative (95% CI)	Absolute		
Distress Acute <sup>1</sup> (measured with: validated tools (Neonatal Infant Pain Scale 0-7, Neonatal Facial Coding System 0-8, Premature Infant Pain Profile 0-18, cry duration) by researcher; Better indicated by lower values)												
3	randomised trials <sup>2</sup>	serious <sup>3</sup>	no serious inconsistency <sup>4</sup>	no serious indirectness	no serious imprecision	none	367	369	-	SMD 0.65 lower (1.05 to 0.25 lower) <sup>1</sup>	⊕⊕⊕○ MODERATE	CRITICAL
Distress Recovery (measured with: validated tools (Neonatal Infant Pain Scale 0-7, Neonatal Facial Coding System 0-8, cry duration) by researcher; Better indicated by lower values)												
3	randomised trials <sup>2</sup>	serious <sup>3</sup>	no serious inconsistency <sup>4</sup>	no serious indirectness	no serious imprecision	none	367	369	-	SMD 0.89 lower (1.26 to 0.52 lower)	⊕⊕⊕○ MODERATE	CRITICAL
Procedure Outcomes, Parent Fear, Use of Intervention, Vaccine Compliance, Preference, Satisfaction (assessed with: no data were identified for these important outcomes)												
0	No evidence available					none	-	-	-	-		IMPORTANT
								0%		-		

<sup>1</sup> Additional information and data provided by 1 author (Chermont 2009)

<sup>2</sup> In study by Chermont (2009), skin to skin contact was applied for 2 minutes prior, during and 2 minutes after the procedure; in study by Kostandy (2013), it was applied for 15-20 minutes prior, during and 6 minutes after; in study by Saeidi (2011), timing prior to injection is unclear (applied for either 2 or 30 minutes) and continued during and 3 minutes after

<sup>3</sup> Immunizer, parent, researcher not blinded; outcome assessor not consistently blinded

<sup>4</sup> In Chermont 2009 (1), skin to skin contact was compared to lying supine. In Chermont 2009 (2), skin to skin contact and dextrose was compared to dextrose and lying supine.