## Revman Plots: Topical anesthetics child >12 years and adult

## Pain

	Topical anesthetic			Control/Placebo				Std. Mean Difference	Std. Mean Difference				
Study or Subgroup	Mean	SD	Total	Mean	SD	Total	Weight	IV, Random, 95% CI	IV, Random, 95% CI				
Taddio 1992	0.71	0.82	29	1.68	1.36	31	100.0%	-0.85 [-1.38, -0.32]	_				
Total (95% CI)			29			31	100.0%	-0.85 [-1.38, -0.32]					
Heterogeneity: Not ap Test for overall effect:		P = 0.00	02)						-2 -1 0 1 2 Favours Topical anestheti Favours Control/placebo				

## **Distress Acute**

	Topical anesthetic			Control/Placebo				Std. Mean Difference	Std. Mean Difference					
Study or Subgroup	Mean	SD	Total	Mean	SD	Total	Weight	IV, Random, 95% CI	IV, Random, 95% CI					
Hansen 1993	7.93	2.7	58	7.8	2.37	59	100.0%	0.05 [-0.31, 0.41]	-					
Total (95% CI)			58			59	100.0%	0.05 [-0.31, 0.41]	<b>+</b>					
Heterogeneity: Not ap Test for overall effect:		P = 0.78	3)						-4 -2 0 2 4 Favours Topical anestheti Favours Control/Placebo					

## Safety

(data from study by Taddio 1992 included in analysis for child 0-12 years)

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Question: Should topical anaesthetics vs placebo/control be used for reducing vaccine injection pain in adolescents >12 years and adults? Settings: clinic, hospital Bibliography: Hansen 1993, Taddio 1992

			Quality asse	essment	No of	patients	Effect		Quality	Importance				
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Topical anaesthetic	Placebo/control	Relative (95% CI)	Absolute				
Pain (me	Pain (measured with: validated tool (Visual Analog Scale 0-10); Better indicated by lower values)													
	randomised trials	_	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	29	31	-	SMD 0.85 lower (1.38 to 0.32 lower)	⊕⊕⊕O MODERATE	CRITICAL		
Distress	Distress Acute (measured with: validated tool (Likert scale 0-3) by researcher; Better indicated by lower values)													
	randomised trials		no serious inconsistency	no serious indirectness	serious <sup>3</sup>	none	58	59	-	SMD 0.05 higher (0.31 lower to 0.41 higher)	⊕⊕⊕O MODERATE	IMPORTANT		
Safety (s	kin reactions	) <sup>4</sup> (assesso	ed with: observa	tion of site for	pallor, eryth	ema (yes/no) by	researcher)							
	randomised trials	serious	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	-	-	-	-	⊕⊕⊕O MODERATE	IMPORTANT		
		risk of bias						0%		-				
Preferen	ce <sup>5,6</sup> (assesse	ed with: qu	estionnaire )											
	randomised trials	serious	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	-	-	-	-	⊕⊕⊕O MODERATE	IMPORTANT		
		risk of bias						0%		-				

Distress, Fear, Procedure outcome, Safety (immunogenicity), Use of intervention, Vaccine Compliance, Memory, Satisfaction (assessed with: no data were identified for these important outcomes)												
-	No evidence					none	=	-	-	=		IMPORTANT
	available											
								0%		-		

In study by Taddio (1992), vaccine was administered intramuscularly; in study by Hansen (1993), vaccine was administered subcutaneously.

<sup>&</sup>lt;sup>2</sup> Sample size was below the recommended optimum information size (OIS) of 400 for an effect size of 0.2

<sup>&</sup>lt;sup>3</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

<sup>&</sup>lt;sup>4</sup> Information for safety included in GRADE profile for child 0-12 years

<sup>&</sup>lt;sup>5</sup> In study by Taddio (1992), 52/60 (87%) of participants reported that they could fit the application of the cream in their schedules. All (100%) of participants reported that the cream was not difficult to apply.

<sup>&</sup>lt;sup>6</sup> In study by Hansen (1993), children were asked about whether they would like topical anaesthetics to be used in the future and 65/111 (59%) reported that they would.