

GLACLP Article Review: “Enhancing Pain Management in the PICU by Teaching Guided Mental Imagery: A Quality-Improvement Project.”

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Child life specialists work in the inpatient and outpatient settings providing psychosocial support to pediatric patients. For inpatient child life specialists, their work includes providing support for procedures and also more long term coping during the child’s hospital stay which includes non-pharmacological pain management. Play is often one of the ways that child life specialists support a child’s coping and help them find relief from pain through distraction techniques. Deep breathing and other relaxation techniques are also used by child life specialists to help patient’s manage big emotions and painful experiences. Guided imagery is one of these non-pharmacological pain management techniques that can be used by child life specialist and other healthcare professionals to support a child’s pain experience.

“Enhancing Pain Management in the PICU by Teaching Guided Mental Imagery: A Quality-Improvement Project” by Kline, Turnbull, Labruna, Haufler, DeVivio and Ciminera (2009) explored the role that guided imagery played in the pain management of patients in the PICU. Physicians often minimize a child’s pain but research shows there are many negative effects of inadequate pain management in children. Kline et al (2009) cite the following as some of those negative effects; long-term behavioral changes, impaired pain perception, reduced pain tolerance, physical disability and even emotional disability. This research study was a part of a larger PICU pain management quality improvement initiative that looked at pain management techniques, this study focused on the role of guided imagery. Researchers hypothesized that there would be a significant reduction in pain rating among patients who were taught to use mental imagery to manage their pain when compared with patients who participated in the standard of care (detailed inquiry about their pain experiences).

Researchers performed this experimental study on 44 children in the PICU between the ages of 6 and 18 years old. 20 were placed in the detailed inquiry group and 24 were in the mental imagery group. The participants’ injuries were rated using a *Pediatric Trauma Score* and the child’s pain level was scored using a *pain rating scale*. The Likert pain rating scale was used for children 8 and up and the Wong-Baker Faces Pain Rating Scale was used for children under 7. Children in the mental imagery group were taught to use pleasant imagery to distract them from their pain. These participants were led through exercises which encouraged patients to begin to relax and then imagine a light shining on the painful part of their bodies and removing that pain. The children were then instructed to imagine their favorite object and favorite experience as a positive imagery to focus on. The control group received detailed inquiry which is like a stress debriefing. The patient discussed their pain-related experiences followed by a chance to express their thoughts or feelings while the researcher/provider reflected the child’s

verbalizations and provided information and comfort. As a result of these interventions, the mean pain rating decreased for both boys and girls in the mental imagery group and only for girls in the detailed inquiry group. For boys in the detailed inquiry group, the pain rating increased.

In this study, pain ratings decreased only for the boys who received the guided imagery intervention but girls benefited from both interventions (although there were many girls in the detailed inquiry group whose pain worsened). As practitioners, child life specialists can assist their patients in relaxing and using their imagination to feel the pain release and leave their bodies. This study supports that distraction such as focusing on pleasant experiences can support a child's coping and decrease their pain and discomfort. Child life specialists should study guided imagery and explore how they can incorporate it in their practice. Child life specialists can also use this study to support their role as essential members of a child's pain management care.

Kline, W., Turnbull, A., Labruna, V., Haufler, L., DeVivio, S., & Ciminera, P. (2010). Enhancing Pain Management in the PICU by Teaching Guided Mental Imagery: A Quality-Improvement Project. *Journal of Pediatric Psychology*, 35(1), 25-31.