# Improving the vaccination experience: Reducing pain and anxiety for children and adults



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AboutKidsHealth.ca





### Learning objectives

- 1. Identify the consequences of poorly managed needle pain
- 2. Describe evidence-based strategies to reduce needle pain
- 3. Apply evidence-based strategies to reduce needle pain

### 1. Vaccine hesitancy and pain



Delay in acceptance or refusal of vaccines despite the availability of vaccination services

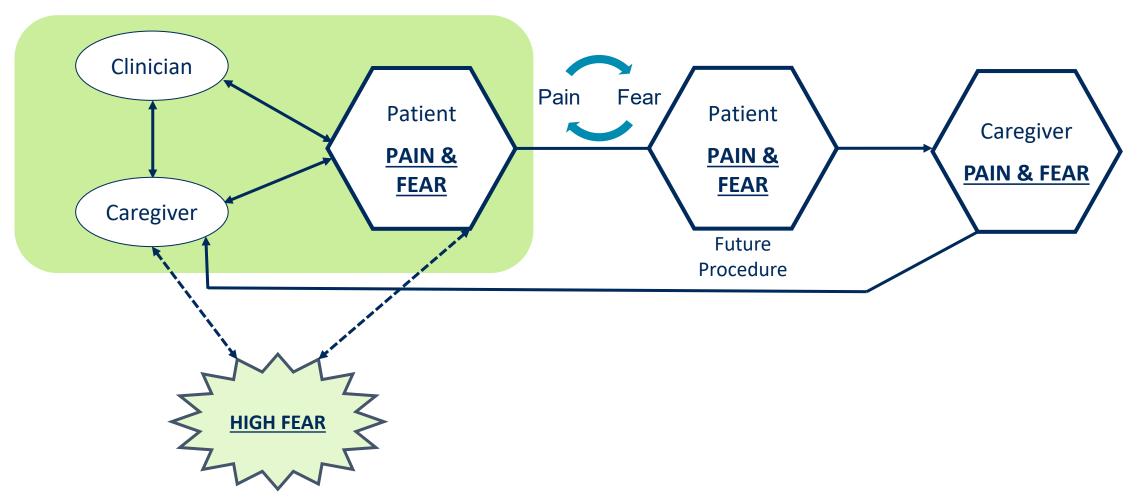
- complex and context specific, varying across time, place and vaccine
- influenced by such factors as confidence, convenience and complacency



- Vaccines are the most common reason why people receive needles.
- Pain is the most common adverse event associated with immunization.
- 2/3 children and 1/4 adults are afraid of needles.
- Fear can fuel pain and lead to immunization stress-related responses (dizziness, headache, nausea, fainting).
- Negative vaccination experiences contribute to negative attitudes about vaccination and vaccine hesitancy.
- Up to 1 person in every 10 refuse vaccinations because of fear/pain.

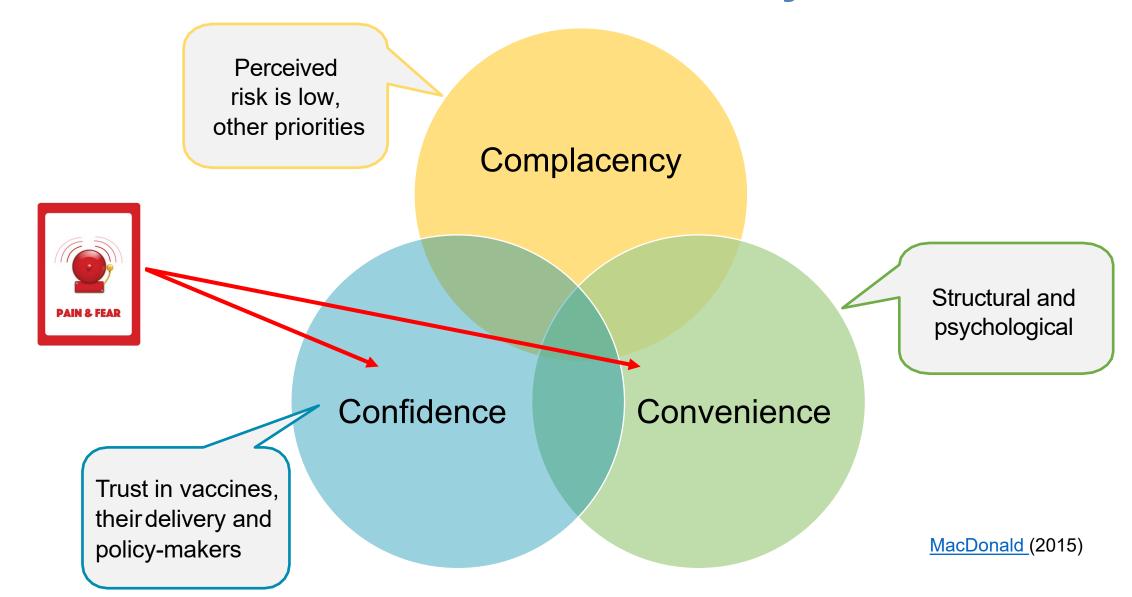


#### Pain and fear exacerbate each other in an escalating relationship



Development over time

### WHO 3C Model of Vaccine Hesitancy



# Mitigating pain is part of good immunization practices and should be embedded in national immunization policies and practices

**2015**, **90**, 505-516



Weekly epidemiological record Relevé épidémiologique hebdomadair

Organisation mondiale de la Santé

25 SEPTEMBER 2015, 90th YEAR / 25 SEPTEMBRE 2015, 90\* ANNÉE No. 39, 2015, 90, 505–516 http://www.who.int/wer

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#### Reducing pain at the time of vaccination: WHO position paper – September 2015

#### Introduction

In accordance with its mandate to provide guidance to Member States on health policy matters, WHO issues a series of regularly updated position papers on vaccines and combinations of vaccines against diseases that have an international public health impact, and on vaccination-related policy questions particularly concerning the use of vaccines in large-scale immunization programmes. They

#### Réduction de la douleur au moment de la vaccination. Note de synthèse: position de l'OMS – septembre 2015

#### Introduction

Conformément à son mandat, qui est conseiller les États Membres en matière politiques sanitaires, l'OMS publie une sér de notes de synthèse, régulièrement mises jour, sur les vaccins et les associations vac nales utilisés contre des maladies ayant d'répercussions sur la santé publique à l'éche internationale. Ces notes portent aussi sur d questions de politique vaccinale, et notaiment sur l'utilisation des vaccins dans le cad

#### 4. Advice for national programmes

Many immunization programmes have sustained high vaccine coverage levels without addressing pain during the vaccination procedure; <a href="https://example.com/however, mitigating pain at vaccination should be considered as part of good immunization practice globally.">https://example.com/however, mitigating pain at vaccination should be considered as part of good immunization practice globally.</a>

National programmes should ensure that the recommendations listed above are implemented. At health system level, related health policy should be strengthened by provision of training on the recommended policies and practices. Programmes should recommend the preferred order of injection for country-specific vaccination schedules where possible.

Education of health-care workers on pain mitigation strategies, e.g. by inclusion in training curricula, needs to be ensured in order to facilitate their implementation. Additionally, it should be ensured that caregivers and, if appropriate, vaccine recipients, are educated on vaccination pain mitigation strategies. Information could be provided during prenatal visits, breastfeeding education, or at time of vaccination. Context-specific educational methods to be utilized should include teaching of individuals or groups, or provision of written information.

#### **Fact or Fiction?**

People's experiences of pain from a needle injection are the same because the pain stimulus is the same.

**Fiction:** Pain is an inherently subjective experience which is influenced by biological, psychological, and social factors and does **not** simply reflect the amount of tissue damage.



#### **Fact or Fiction?**

Client anxiety is the only factor that causes negative cycles of pain and fear related to needles.

**Fiction:** Biopsychosocial factors all contribute to influence a client's experience of needles over time. Social factors include behaviours by clinicians and parents.

#### 2. The Evidence



In 2015, we created a Canadian clinical practice guideline (CPG) – it has been incorporated into the Canadian Immunization Guide and adopted by the World Health Organization.

The CPG includes evidence-based recommendations for reducing pain, fear and fainting. There are 5 domains of recommendations (5Ps):



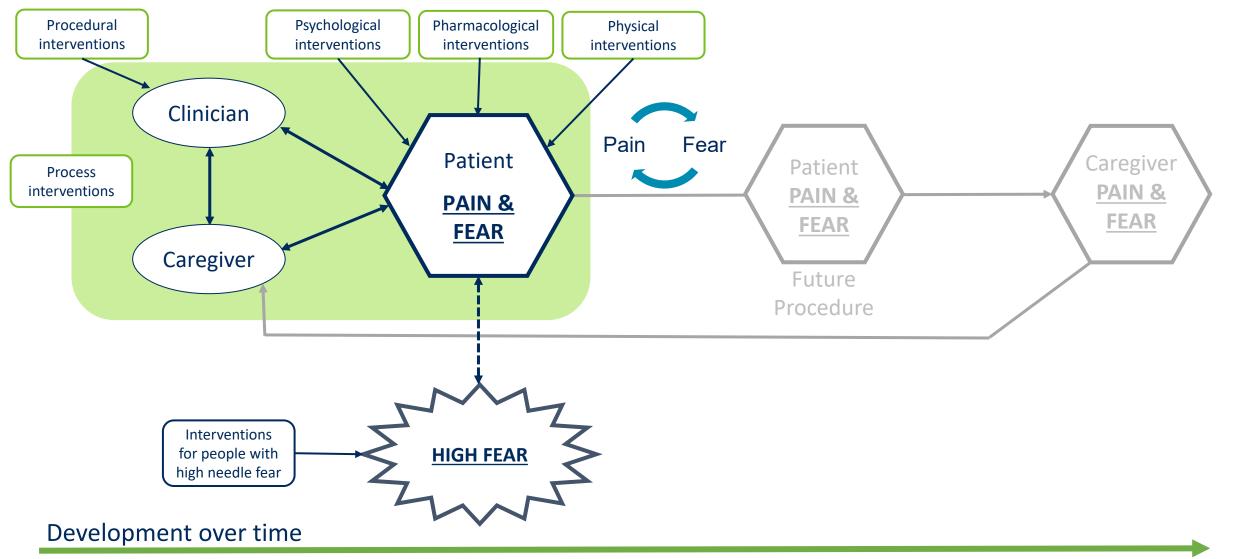








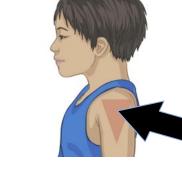
# The 5 P's include interventions that are designed to break the cycle of pain and fear



### **Procedural**

#### 1. Injection method

no aspiration, fast injection



#### 2. Order of injection

most painful last

#### 3. Formulation

physiologic pH



Taddio, McMurtry et al. (2015)

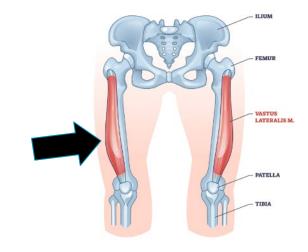
Taddio et al. (2016)

Taddio et al (2010)

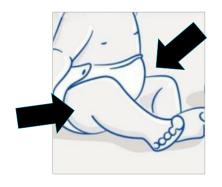
### **Procedural**

# 4. Vastus lateralis injection (infants)

 In the middle of the space between the greater trochanter of the femur and the top of the knee



# 5. Simultaneous injections if multiple vaccines given (infants)



Taddio, McMurtry et al. (2015)

### **Physical**

#### 1. Breastfeeding

 Between 0-2 years, if not breastfeeding, sweet-tasting solution & non-nutritive sucking



#### 2. Positioning

- Skin-to-skin contact in neonates
- Holding in children up to 3 years
- Sitting upright in children >3 years and adults



3. Tactile stimulation with cold (children and adolescents)



### **Pharmacological**

#### 1. Topical anesthetics

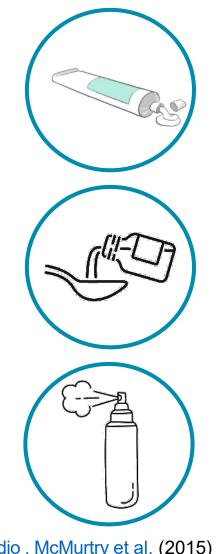
• Lidocaine-prilocaine, amethocaine, liposomal lidocaine

### 2. Sweet-tasting solution (0-2 years)

- Sucrose, glucose
- Alternatively, oral rotavirus vaccine first (2 to 4 months)

#### 3. Vapocoolants (adults)

PainEase, Ethyl Chloride



### **Psychological**

#### 1. Interactions

- Words and actions can promote coping <u>or</u> increase distress
- Use coping-promoting behaviours

#### 2. Distraction

Take attention away from needle



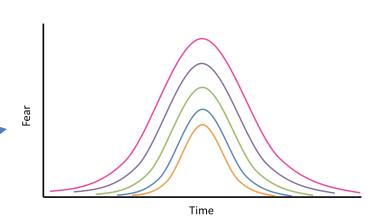
Taddio, McMurtry et al. (2015)

### High levels of needle fear

#### **Exposure therapy**

 Facing fears gradually over time to overcome needle fear

Typically requires assistance by a trained provider



Step	Situation	Fear Rating (0-10)
10.	Getting a shot in the upper arm or fleshy part of leg	10
9.	Slightly pricking one's skin with a needle	9
8.	Watching someone else get a needle	8
7.	Resting needle against vein	7
6.	Resting the needle against one's skin	7
5.	Rubbing an alcohol swab against one's skin	6
4.	Holding a needle	5
3.	Watching an apple being injected	4
2.	Watching video clips of someone getting a needle	3
1.	Looking at a picture of a needle	2

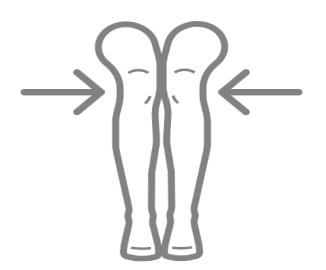
Taddio, McMurtry et al. (2015) McMurtry, Taddio et al. (2016)

### Fainting or syncope during injection

# Use muscle tension to raise blood pressure and help prevent fainting

If a patient feels dizzy during injection, they can do the following before, during, and after the injection:

- Squeeze or tense their leg and stomach muscles
   10 to 15 seconds or until feeling flushed or warm in their face
- Release tension for 20 to 30 seconds
- Repeat in cycles until the symptoms disappear



### **Good practice recommendations**



Minimize fear-inducing stimuli



Minimize waiting time

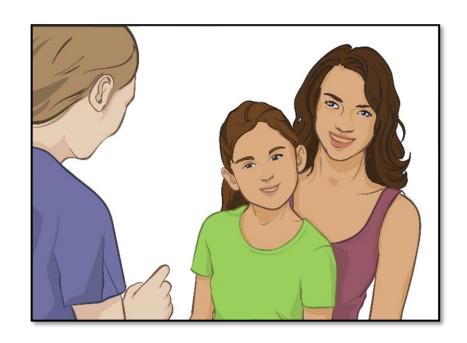


Provide privacy and comfort



Be observant and responsive

### **Process**



- Provider education
- Caregiver/parent education
- Individual education

### 'Uptake' of Clinical Practice Guideline (CPG)



#### **Courtesy of Immunize Canada, 2021**

#### **BCCDC**:

http://www.bccdc.ca/resource-

gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%202%20-%20Imms/Appendix D RIIP.pdf

#### **AHS:**

https://www.albertahealthservices.ca/assets/info/hp/cdc/if-hp-cdc-ipsm-standard-administration-immunization-06-100.pdf

#### **Manitoba, Winnipeg Regional Health Authority:**

https://professionals.wrha.mb.ca/old/professionals/immunization/contents.php

#### **Ontario:**

https://www.health.gov.on.ca/en/common/ministry/publications/reports/immunization 2020/immunization 2020 report.pdf

#### Quebec:

https://www.msss.gouv.qc.ca/professionnels/vaccination/protocole-d-immunisation-du-quebec-pig/

#### **Nova Scotia:**

https://novascotia.ca/dhw/cdpc/documents/Immunization-Manual.pdf

#### **New Brunswick:**

https://www2.gnb.ca/content/gnb/en/departments/ocmoh/for healthprofessionals/cdc/NBImmunizationGuide.html

#### **Newfoundland:**

https://www.gov.nl.ca/hcs/files/publichealth-cdc-im-section4.pdf

#### **Nunavut:**

https://www.gov.nu.ca/sites/default/files/immunization manual.pdf

**Yukon** (part of immunization competencies):

https://yukon.ca/sites/yukon.ca/files/section 1 -

yukon immunization competencies 2021 final july 2021.pdf



### **Practice review** → Clinical Care Gaps



#### **NATIONAL PERSPECTIVE, 2017**

Fear is worst part of vaccination 59% Pain is worst part of vaccination 35% **Know how to reduce pain/fear** 50% Prepared ahead of time **17%** 



#### **ONTARIO PUBLIC HEALTH UNITS, 2021**

Policies on pain/fear	58%
Formal training on program delivery	<b>74</b> %
Formal training on pain/fear	50%
Incorporate coping preferences	30%
Document stress-related responses*	0%

<sup>\*</sup> Pain/fear/dizziness; Fainting monitored in 83%

### 3. Getting evidence into 'action' with CARD

- 'Systems level' approach to address the identified clinical care gap
- Targets all stakeholders involved
- Turns the evidence into 'action' and uses a user-friendly and intuitive tool
- Each stakeholder 'plays their CARDs' to improve the experience for all
- Interventions implemented 'ahead of time' and 'on needle procedure day'



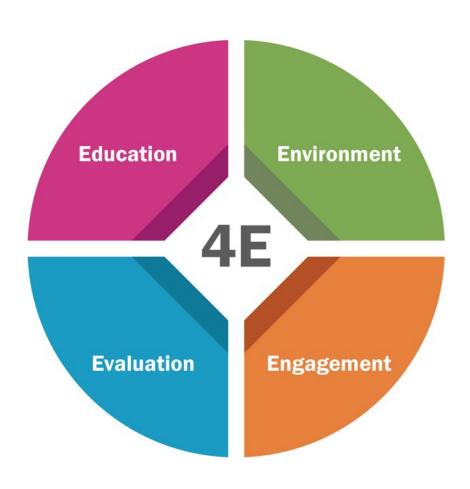
<u>Taddio et al.</u> (2019)

### **Studies with CARD**

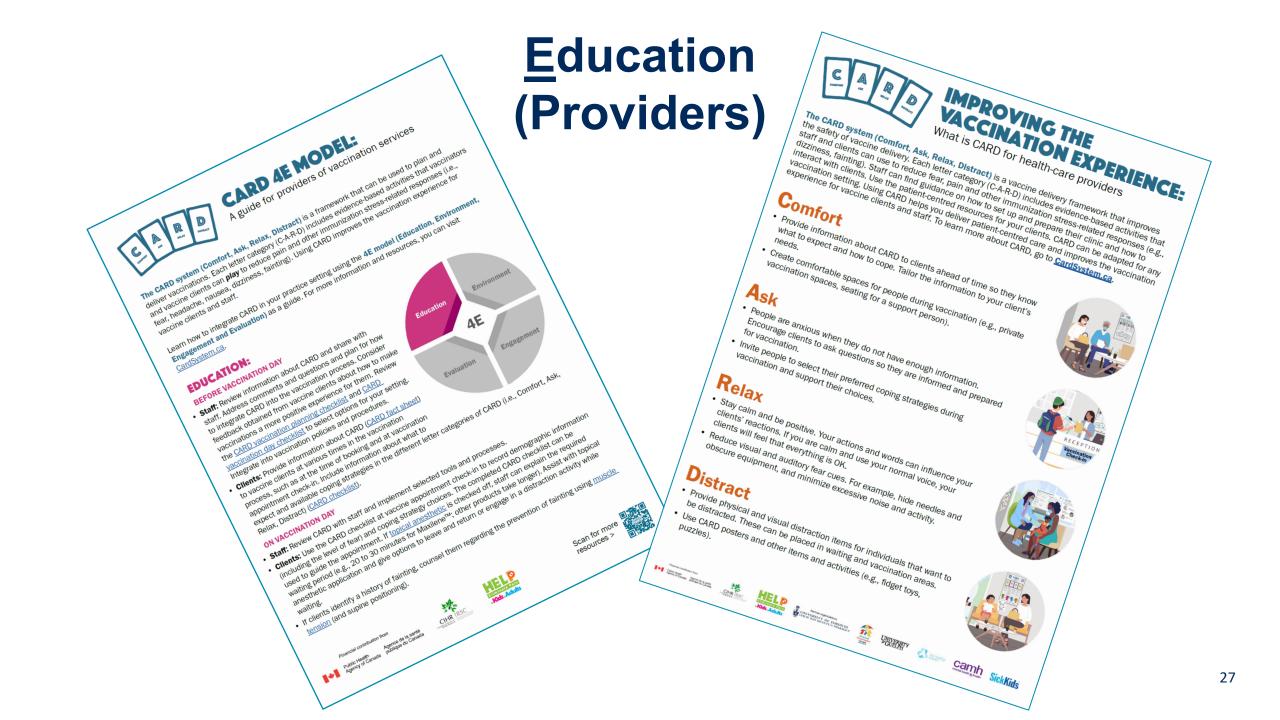
Study	Target	Setting	Design	Sample size	Impact
Freedman et al. (2019)	Providers, children 12 years, parents, educators	Schools	Controlled Clinical Trial	323	↓ fear, dizziness
Taddio et al. (2022)	Providers, children 12 years, parents, educators	Schools	Randomized Controlled Trial	1919	↓ fear, pain, fainting
Tetui et al. (2022)	Providers, patients <u>&gt;</u> 12 years	Mass vaccination clinics	Before and After Trial	2488	↓ fear, pain, dizziness
Taddio et al. (2022)	Providers, parents, children 5-11 years	Pharmacies	Before and After Trial	153	↓ fear, pain
Taddio et al. (in prep'n)	Providers, adults <u>&gt;</u> 18 years	University vaccination pop-up clinics	Before and After Trial	476	↓ fear

#### **CARD Model**

- Health care providers
- Vaccine clients
- Parents/caregivers
- Ahead of time
- Vaccination day
- Health care providers
- Vaccine clients
- Parents/caregivers



- Seating available (everyone)
- Space for support person
- Privacy
- Distractions
- Minimize fear cues (visual and auditory)
- Be calm, positive, promote coping
- Assess symptoms (fear, pain, fainting)
- Invite participation, answer questions
- Support CARD (coping) choices
- Minimize injection pain



### **Education (Clients)**



### IMPROVING THE VACCINATION EXPERIENCE:

Learn how to play your CARDs

### **COMFORT**Find ways to get



#### ASK

Ask questions to be prepared.

#### RELAX

Keep yourself calm.



#### DISTRACT

Shift your attention to something else.



**The CARD system (Comfort, Ask, Relax, Distract)** provides groups of strategies that can be used to make your vaccination experience a more positive one. Choose what CARDs you want to play to reduce the stress and pain associated with vaccinations. There's no wrong move. **Look on the back for ideas.** 

To learn more about CARD, go to **CardSystem.ca**.

Financial contribution from



Public Health Agency of Canada Agence de la santé





Scan for more resources



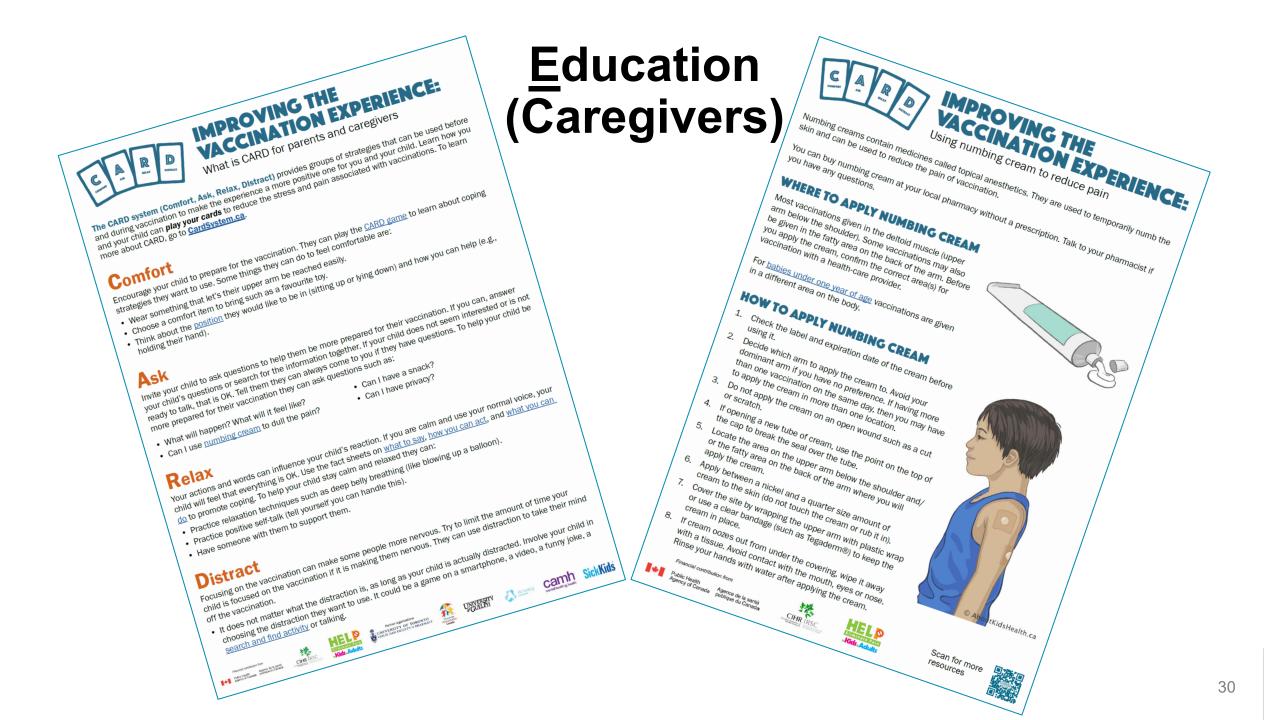
### **Education (Clients)**





**CARD** posters and activities

**CARD** game:



#### **CARD** checklist

The difference of having this piece of paper in front of me prior to giving the vaccination - it gives me perspective already as to what this child would prefer.



We use the CARD (Comfort Ask Relax Distract) system to help make you more comfortable during your vaccination. Fill in the CARD survey below to tell us how we can make your vaccination a more positive experience. If you would like to use a strategy that is not listed, let us know and we will try to do it. To learn more about CARD, visit CardSystem.ca.

To learn more about critis, visit ea	Tab you terminate
<b>CARD System</b>	Choose all options you want for your vaccination
Comfort What would you like to do to make yourself more comfortable?	<ul> <li>□ Privacy (separate room with closed door)</li> <li>□ Sit upright on a chair</li> <li>□ Sit on a parent's or caregiver's lap</li> <li>□ Lay down</li> <li>□ Eat a snack or treat</li> <li>□ Arm the needle goes in (left or right):</li> <li>□ Other:</li> </ul>
Ask What questions do you have about the vaccine or your appointment?	☐ I have questions about the vaccine ☐ I have questions about what will happen during my appointment ☐ I have questions about using a medicine on the skin (topical anesthetic) to make the pain from the needle hurt less ☐ Other:
<b>Relax</b> How do you want to keep yourself calm?	<ul> <li>□ No or low levels of noise</li> <li>□ People I want to be with me (nobody or give names):</li> <li>□ No extra people around that can see me</li> <li>□ Take deep belly breaths (like blowing up a balloon)</li> <li>□ No alcohol wipe beforehand</li> <li>□ Other:</li> </ul>
<b>Distract</b> Do you want to be distracted during vaccination?	☐ Tell me when it will happen ☐ Do not tell me when it will happen ☐ No conversation with me while I am distracting myself ☐ Keep my eyes closed or look away ☐ Play with a toy or comfort item from home ☐ Use my cell phone to listen to music or watch a video ☐ Use a distraction toy or activity provided by the clinic ☐ Other:
□ Yes. Please explain:     → For children: Did you play the CAF How old are you?     □ Some people are afraid of needles. Do you ever feel dizzy or faint during.	RD online game?
Financial contribution from	Purtner organizations  BUSINESSITY APPOSITY Camba About Kirls Health Ca











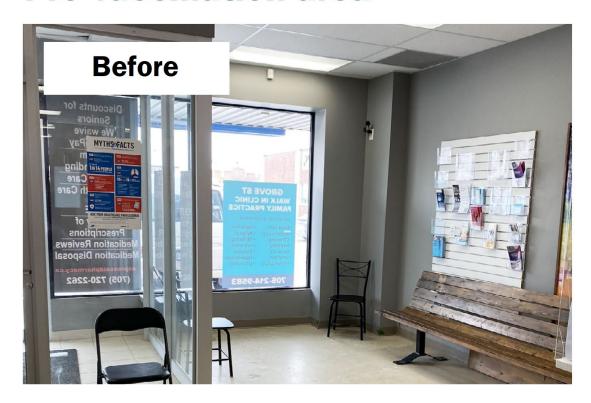


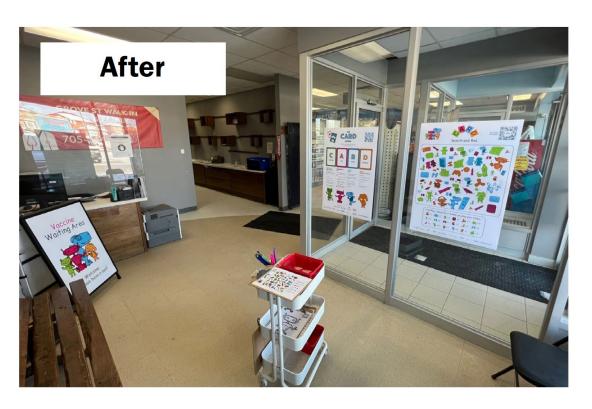




# **Environment** (Providers)

#### **Pre-vaccination area**

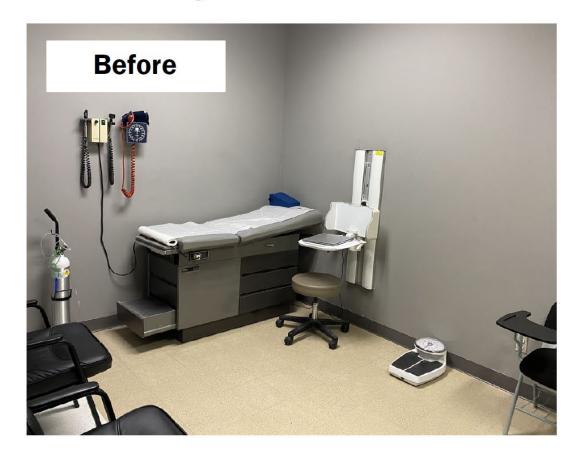


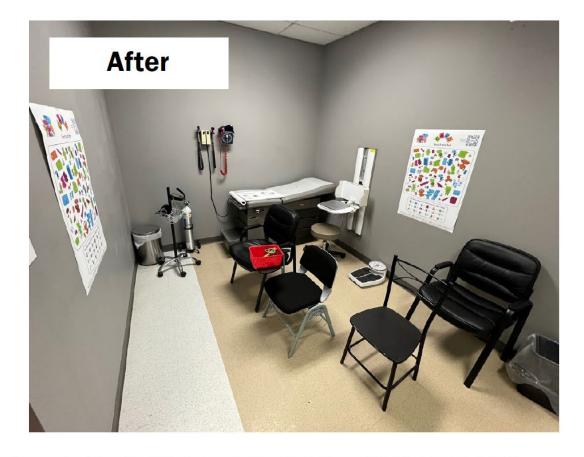


**Waiting area 1:** The waiting area has been made more inviting and comfortable for vaccine clients. This was done by including signage, education about CARD (via poster), and distraction items (posters and activities) that are easily accessible via a moveable cart, that can be used while waiting.

# **Environment** (Providers)

#### **Vaccine injection area**





**Injection area 1:** In this example, furniture has been re-arranged to facilitate seating of the client, a support person and the vaccinator. Clients are facing a visually engaging poster and distraction items are available for use beside them (on the desk attached to the client chair). The client does not face equipment.

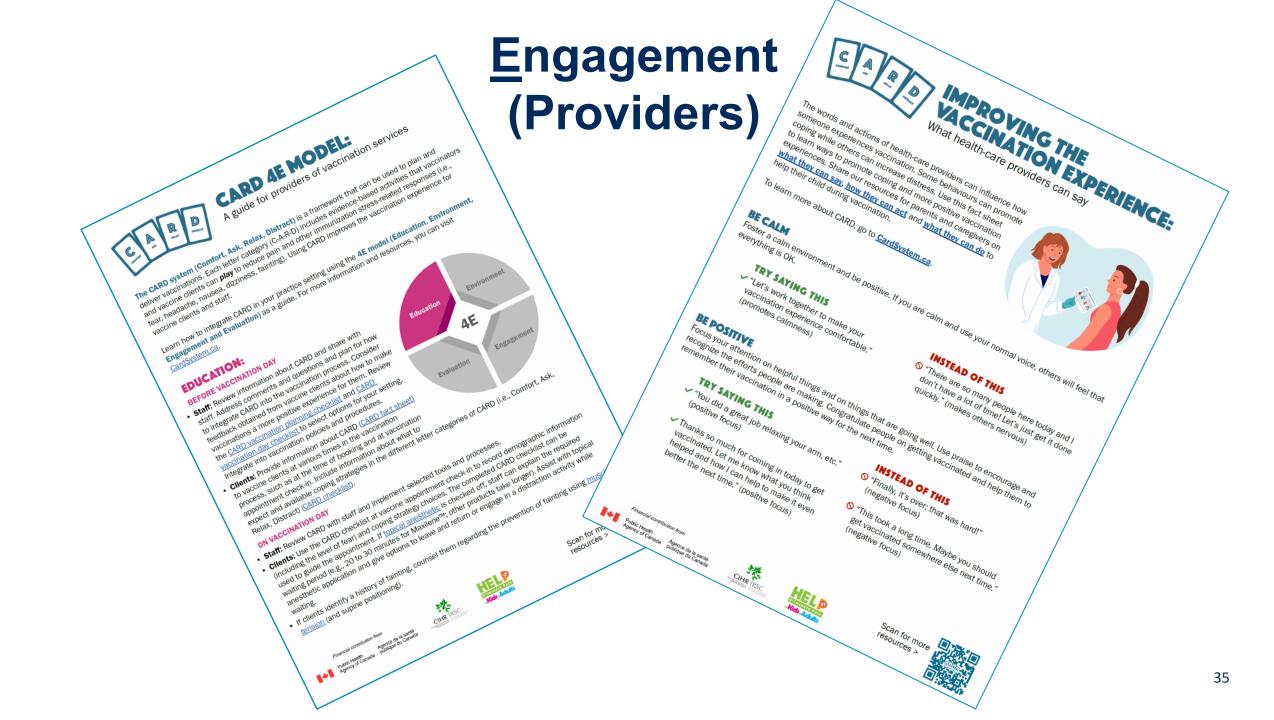
# **Environment** (Providers)

#### **Vaccine injection area**

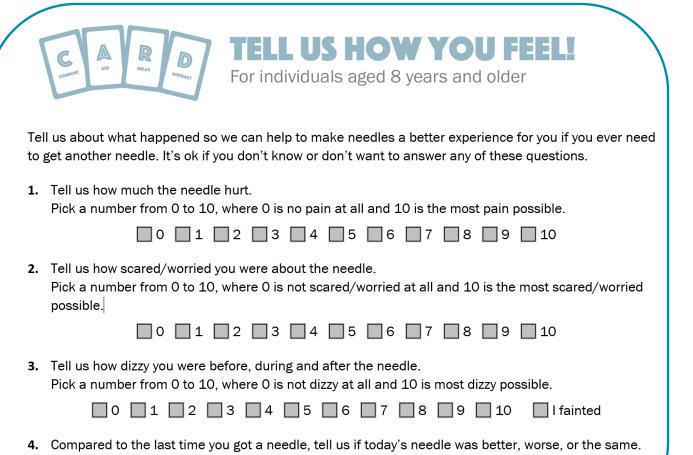




**Injection area 2:** In this example, the original room used for vaccinations has been changed to a different room with more space and the ability to provide privacy. Posters provide distraction and obscure equipment. The client's chair has been positioned to face a poster. The vaccinator uses a stool (tucked under the desk) to sit beside the client. Distraction items are provided on the examination table (not in view).



### **Evaluation (Clients)**



☐ The same ☐ Worse ☐ I don't know

Please explain.

I don't remember

"It made a big

difference!"

"I almost cried reading the CARD checklist because I felt so cared for. Thank you!"

### **Evaluation (Providers)**

"Everything was just a little more strategic. It's just building on the skills we already have"

CARD made the entire process less stressful, for myself, as a vaccinator, for the child, and also the parents"

CARD staff debrief surve	<del>!</del> y	
Clinic Date:	Location:	Time:
Who was present:		
other learn from their experiences	Reflect on the vaccination program by using the questions to ensure their perspectiv	es and challenges and empower them to help each ing these questions as a guide. Include feedback wes are captured and considered. This will require
1. What went well and why?		
2. What didn't go well and why?		
3. Did the team work productively	together?	
4. What can we do differently to m	nake it even better next time?	

"All around positive reviews! I mean, you'd have to really be out of your mind as a parent or child to have a negative review about this, right?"

















### **Summary**

- Pain and fear hurt vaccination
- Evidence-based strategies exist to reduce pain and fear
- The CARD framework helps integrate the evidence into practice

"I love my job and this made it better"



### Resources

- Aboutkidshealth (SickKids): <u>cardsystem.ca</u>
- Immunize Canada: <u>CARD resources</u>
  - New: <u>CARD Game for Kids</u> (mobile web game)
- HELPinKids&Adults (University of Toronto) and resources
- Pediatric Pain, Health and Communication Lab and resources
- Government of Canada: <u>Vaccination pain management for children</u>: <u>Guidance for health care providers</u>
- Government of Canada: Vaccination pain management for adults: Guidance for health care providers
- Canadian Paediatric Society's <u>statement on COVID-19 vaccinations</u>
- World Health Organization 2015 guideline on pain mitigation during vaccination
- Immunization stress-related responses: <u>full manual</u>, <u>synopsis</u>, <u>summary for clinicians</u>

