

Psych screening beneficial in pediatric abdominal pain

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percent), at least moderate disability (45 percent), and elevated pain (61.5 percent). There was an association between the presence of clinically significant anxiety and higher pain and pain-related disability. Clinical elevations in all three areas were seen in 21 percent of youth; in such cases, medical providers received an automated prompt to tailor care, which included consideration of a psychological referral. Psychological referral rates increased after project implementation, from 8.3 to 15.2 per 1,000 patients.

"Systematic screening for anxiety, pain, and painrelated disability as a routine part of medical care can be reliably implemented with clinically meaningful results," the authors write.

More information: <u>Abstract/Full Text</u> (<u>subscription or payment may be required</u>)

(HealthDay)—Systematic screening for anxiety, disability, and pain can increase psychological referral rates among pediatric patients with abdominal pain, according to a study published in the August issue of *Pediatrics*.

Natoshia R. Cunningham, Ph.D., from the Cincinnati Children's Hospital Medical Center, and colleagues implemented a <u>screening</u> process for patient-reported anxiety, functional disability, and pain levels in a large gastroenterology division within a major medical center. In patients ages 8 to 18 years with abdominal pain, quality improvement methods and traditional analytic approaches were used to test the feasibility and outcomes of routine screening.

The researchers observed an increase in screening rates from less than 1 to more than 80 percent. During the first six months, 1,291 patients who reported having abdominal pain completed the screening. Children with abdominal pain commonly had clinically significant anxiety (43.1

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