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2023

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https://doi.org/10.33015/dominican.edu/2023.NURS.RP.25

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#### **Recommended Citation**

Bustos, Camille Alyssa, "Supportive Interventions for Adults with Needle Phobia" (2023). *Nursing | Student Research Posters*. 12. https://doi.org/10.33015/dominican.edu/2023.NURS.RP.25

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# Supportive Interventions for Adults with Needle Phobia

# **Camille Bustos**





## Introduction

Needle phobia, also known as trypanophobia, is the fear of needles or needle-like objects resulting in significant distress in individuals who experience it (Cook, 2016). This avoidance of injections often leads to noncompliance with medical treatment and further results in negative health consequences (McMurtry et al., 2015).

The focus on addressing needle phobia has primarily been limited to psychology clinics, leaving a gap in support for those receiving injections from health care professionals in the hospital or clinic setting. It is important for health care providers and mental health professionals to work together to address this gap and ensure that individuals with needle phobia have access to the care and treatment they need (Centers for Disease Control and Prevention ICDC1, 2022).





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## Hypothesis

Interventions in the medical setting provided by trained and equipped health care professionals will reduce the signs and symptoms of needle phobia resulting in improved medical compliance and better health outcomes.

#### Method

## **Participants**

 18+ aged adults, receiving needle injections chronically, and diagnosed with needle phobia or fear of needles by a qualified healthcare professional (n=100)

#### Materials/Measurements

 Questionnaires, Likert scale, Pain scale score, and the State-Trait Anxiety Inventory.

#### Procedure

- Pre-Intervention questions will be measured to assess baseline anxiety and needle fear
- Experimental group will receive cognitive-behavioral therapy (CBT) interventions.
- CBT intervention period is expected to last between 4 to 12 weeks, with sessions lasting between 60 to 90 minutes. The exact number and duration of sessions will depend on each participant's individual needs and progress.
- Control group will not receive any interventions.
- Post-intervention and debriefing measures will occur to reassess needle phobia symptoms

## Results

Descriptive statistics will be used to compare the two samples, in order to determine the means. The inferential statistics will be used in order to determine the p-value. If the p-value is < 0.05, then we could determine the results are statistically significant and not by chance, which determines that the hypothesis is true and we can therefore reject the null hypothesis.

## Conclusion

If the results show a statistically significant reduction in anxiety levels in the experimental group compared to the control group, this would support our hypothesis that supportive interventions such as CBT practices can reduce the signs and symptoms of needle phobia in adults. This would suggest that medical professionals should consider incorporating CBT interventions in their treatment plans for patients with needle phobia to help alleviate their fears and reduce negative reactions to needle procedures.

#### References

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