The Impact of Pet Therapy on Pediatric Physical and Psychological Health
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PICOT Question:
In hospitalized pediatric patients, what is the effect of providing pet therapy in comparison to not providing pet therapy on pediatric patients’ physical and psychological health?

Why is this a problem?
As the world of pediatric medicine continues to expand, the techniques and skills being practiced are also broadened. For those that are not aware, children are much more frightened of healthcare workers than the average adult, especially when they are ill or in pain. When caring for a sick child, it is important that they are comfortable, relaxed, and that the environment feels as close to home as possible. These key characteristics will make the overall experience for the child and family less traumatic and hopefully result in a positive outcome. A new approach for pediatric healthcare is pet therapy, which can be used to benefit the psychological and physical health of hospitalized individuals. The areas involved with this type of therapy are medical surgical, oncology, intensive care, and psych care units in the acute setting, as well as long-term care facilities.

Animal assisted therapy (AAT) has been proven to increase patient satisfaction and comfort, as well as improve their overall physical status. Children are becoming more interested and motivated in their treatment plans when they are given the chance to do it with the help of a furry friend.

References:

Implications of practice
Pet therapy or animal assisted therapy is categorized as a cost-effective alternative treatment method for hospitalized pediatric patients. Recent reports of AAT have been shown to decrease anxiety and depression, boost communication skills, and soothe the fears of the family and patient. This integrated approach has positively impacted patients’ psychological health, along with their physical health. According to Uglow (2019), “the presence of a friendly dog was shown to be effective at reducing the blood pressure (BP) and heart rates of children aged 2 to 6 years of age undergoing simulations of routine examination”. This therapy can also be used as an intervention to decrease pain, rather than using analgesics that can cause severe negative effects on the patient.