to measure pain. Children in the nonintervention branch ($n$ = 59) had a much greater increase in MBPS score compared to the intervention group (change in MBPS = 2.3 versus 1.5, respectively, $p$ = 0.029).

- In a double-blind, placebo-controlled, randomized trial, 110 full-term newborns received 1 g of amethocaine gel 4% or placebo 30 minutes prior to IM injection of 0.5 ml of vitamin K (Shah, Taddio, Hancock, et al, 2008). Pain was measured using VAS to assess for percent facial grimacing score, percent cry duration, and time to cry. There was no statistically significant difference for percent facial grimacing or cry duration between the two groups ($p$ = 0.41 and $p$ = 0.34, respectively). Time to cry was longer for the amethocaine group (4.7 seconds versus 2.7, $p$ = 0.01) compared to the placebo group.

- Twenty-seven 6- to 12-month-old infants were randomized to either topical lidocaine-prilocaine ($n$ = 7), 12% oral sucrose ($n$ = 7), or no intervention ($n$ = 13) for routine immunization administration (Dilli, Küçük, Dallar, 2009). Pain was measured using NIPS and duration of cry. Both intervention groups cried for an average of 35 seconds compared to the nonintervention group cry time average of 150 seconds ($p < 0.001$). NIPS scores were similarly reduced for the intervention infants (average of 3.5 compared to 6, $p < 0.001$). There was no measurable difference in pain reduction between the sucrose