WEB TABLE I: SUMMARY OF STUDIES INCLUDED IN THE REVIEW

Study	Intervention components, number of participants	Findings
Social Skills Training		
Varni JW, et al. 1993 [8]	Social skills training <i>vs</i> Standard school reintegration services, <i>n</i> =64	Higher perceived social support decreased internalizing/externalizing behaviours.
Die-Trill M, et al. 1996 [10]	Sixteen, 1 h group sessions focused on development of social skills, <i>n</i> =8	Improved social skills
Barakat LP, et al. 2003 [13]	Children: Social skills training: Verbal and non-verbal communication; empathy and conflict resolution; cooperation, <i>n</i> = 13	Improvement in social competence; behavior problems Better verbal and nonverbal functioning.
Barrera M, et al. 2009 [7]	Social skills including friendship making and assertion, <i>n</i> =32	Improved self-control, social skills, quality of life
Cognitive Behavioral		
Kazak AE, et al. 1996[9]	Distraction, play, guided imagery (customized intervention for each child), $n=162$	Lower levels of distress for the combined pharmacological + psychological intervention group
Barrera M., 2000 [11]	Two training and two in-vivo sessions, using behavioral and cognitive behavioral techniques, <i>n</i> =1	Physical resistance eliminated; maternal anxiety and sibling distress reduced
Butler WR, et al. 2008 [16]	22-hour individual sessions (1/wk) of Cognitive Remediation Program, <i>n</i> =161	Improved academic achievement; Less cognitive problems, better attention, less attention-hyperactivity symptoms according to parents
Hardy KK, et al., 2013 [29]	25 sessions of home-based computerized cognitive training program for 3 mo, <i>n</i> =20	Improved visual working memory and reduced leaning problems
Nekah SMA, et al. 2015 [31]	10 sessions (60 min) of structured cognitive- behavioral group play therapy, $n=18$	Beneficial in reducing anxiety and depression
Hardy KK, et al. 2011 [24]	50 min/wk for 3 mo, <i>n</i> =9	Improved working memory and attention
Van Dijk-Lokkart EM, <i>et al</i> . 2015 [32].	6 + 2 sessions (children and parents respectively) of structured psychosocial program to enhance social-emotional functioning and coping, <i>n</i> =30	Overall, patients liked participation in the intervention and were positive about the psychologists
Malboeuf-Hurtubise C, et al., 2013 [28].	Mindfulness meditation intervention, $n=28$	Specific outcome not mentioned
Body Focused		
Hinds PS, et al., 2007 [15]	Pedaling a stationary bicycle-style exerciser for 30 minutes twice daily for 24 d, $n=29$	Improved sleep
Thygeson MV, et al., 2010 [18]	One 45-min session; children and parents separately and Yoga, <i>n</i> =16	Decreased anxiety in parents and adolescents
Speyer E, et al., 2010 [19]	Hospital stay with APA sessions vs. hospital stay without APA session, n=30	Better HRQoL for most of the HRQoL psychological and physical dimensions.
Braam KI, et al., 2010 [20]	Combined physical and a psychosocial intervention, $n=100$	Found to be able to maintain or enhance physical fitness and increase quality of life.
Yeh CH, et al., 2011 [22]	Intervention: three weekly sessions (30minutes) of individualized homebased aerobic exercise program, <i>n</i> =22	Significantly lower "general fatigue"

Contd...2/-

Indian Pediatrics Volume 55—March 15, 2018

Study	Intervention componentsand number of participants	Findings
Gohar SF,et al. 2011[23]	Stretching, strengthening and aerobic exercises, $n=9$	Gross motor function and PedsQL improved steadily however, the PedsQL slightly decreased from interim maintenance to delayed intensification. The parents reported to be satisfied with the intervention.
Huang JS, et al., 2014 [30]	weight management intervention (WMI), $n=38$	Less weight gain; increased moderate- to-vigorous physical activity; reduced negative mood
Vallet C, et al., 2015 [34]	Adapted physical activity program, $n=11$	Improvement in global self: perceived sport competence and perceived physical strength.
Shockey DP, et al., 2013 [26]	4-session of relaxation and biofeedback. Each session for 60 mints approx, $n=11$	Combination intervention found to be beneficial to children experiencing procedural distress as a novel coping strategy
Music Therapy		
O'Callaghan C, et al., 2011 [21]	Music behaviours, <i>n</i> =26	Specific improvement not mentioned.
Polat S, et al., 2015 [33]	Therapeutic music sessions (15 to 30 min) during the chemotherapy procedure, $n=28$	Reduced anxiety
Others		
Favara-Scacco C, <i>et al.</i> 2001 [12].	Daily psychotherapeutic encounters, <i>n</i> =32	Experimental group exhibited non- resistance and collaborative behaviors. Therapy was useful in supporting children and parents during intrusive procedures
Kazak AE, et al.,2005 [14]	Pre- and 2-mo post intervention (specific techniques not mentioned), $n=19$	Reduced anxiety and parental post- traumatic stress disorder symptoms
Moore IM, et al., 2012 [25]	40-50 h direct instruction on mathematical concepts, $n=32$	
Akard TF, et al., 2015 [35]	Intervention that guided children to answer questions about legacy-making and create a digital story about themselves, <i>n</i> =28	Better emotional and school functioning
Chari U, et al., 2013 [27]	20 sessions of non-directive play therapy. (30 min each), $n=1$	Better illness adjustment and general mental well-being, enhanced coping, and normalization.