Application Analysis of Comfort Nursing in Replantation Nursing of Severed Finger

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Keywords: comfortable nursing; Replantation of severed fingers; Clinical effect

Abstract: Objective: To explore the clinical effect of comfort nursing in replantation nursing of severed finger. Methods: Our hospital in January 2016 - January 2018, 54 cases of patients with replantation is as the research object, were randomly divided into control group and observation group, each group of 27 cases, control group using conventional care, implement comfortable nursing on the basis of the observation group, the operation effect of two groups of patients, complications, and patient satisfaction were compared, to discuss clinical effect of comfortable nursing in replantation. Results: The survival rate of replantation fingers in the observation group (66.67%) was significantly higher than that in the control group (33.33%). The incidence of complications in the observation group (3.70%) was significantly lower than that in the control group (22.21%). Moreover, the satisfaction of patients in the observation group (100%) was significantly higher than that in the control group (77.77%), with statistically significant differences (P<0.05). Conclusions: In patients of replantation is the process of nursing, using comfortable nursing has an important practical significance, not only help to improve the survival rate of replantation refers to, and also can reduce the incidence of complications, so as to promote the patients' satisfaction significantly increased, to build a good doctor-patient relationship is very good, is worth promoting.

1. Introduction

Broken finger mainly refers to the finger fracture caused by trauma. If the patient does not get timely treatment, it is easy to lose hand function, which further affects the patient's normal life. The causes of finger amputation are various, common in mechanical damage, traffic accidents and other reasons, the disease has a high disability rate. At the present stage, with the continuous development of medical technology, finger replantation technology has received extensive attention from medical personnel. When it is applied in the treatment of patients with finger replantation, not only the original finger can be retained, but also vascular reconstruction can be achieved, thus providing a possibility for the restoration of patients' hand function. However, because this technology is in the initial stage of development in China, there are many factors influencing it. Once problems occur in a certain link, the survival rate of replantation fingers may be reduced, thereby affecting the rehabilitation effect of patients. Therefore, in order to reduce the influence of adverse factors, it is necessary to introduce comfortable nursing into the actual nursing work, and carry out comprehensive nursing for patients before, during and after surgery, so as to meet the actual needs of patients to the greatest extent, and strive to improve the survival rate of replantation fingers, but also to reduce the occurrence of complications. This paper obtained effective data and conclusions through the clinical effect of comfort nursing in replantation nursing of severed finger, which is reported as follows.

2. Materials and Methods

2.1 General Materials

54 patients with replantation of severed fingers admitted to our hospital from January 2016 to January 2018 were selected as the study subjects. They were randomly divided into the control
group and the observation group, with 27 patients in each group. In the control group, there were 18 males and 9 females aged 20-50 years with an average age of (38.7±4.6) years. There were 9 cases of knife wound, 5 cases of twisted wound, 7 cases of traffic accident wound and 6 cases of electric saw wound. Among them, 7 cases had thumb fracture, 4 cases had index finger fracture, 5 cases had middle finger fracture, 5 cases had ring finger fracture and 6 cases had little finger fracture. Observation group: 16 males and 11 females, aged 21-48 years old, with an average age of (36.9±4.8) years old, 8 patients received knife cutting injuries, 7 patients received twisted rolling injuries, 8 patients received traffic accident injuries, and 4 patients received electric saw injuries. Among them, 5 cases had thumb fracture, 6 cases had index finger fracture, 3 cases had middle finger fracture, 8 cases had ring finger fracture and 5 cases had little finger fracture. There was no significant difference between the two groups (P>0.05).

2.2 Methods

Patients in the control group were treated with routine nursing, including preoperative introduction of surgical matters needing attention, intraoperative routine nursing for patients, such as doing a good job in keeping hands warm and adjusting the indoor temperature, and postoperative necessary analgesic nursing and anti-infection nursing for patients. Observation group on this basis, the implementation of comfort care, the specific content is as follows: 1. Before surgery: patients in the severed finger, psychological inevitable negative, pessimistic mood, coupled with the lack of confidence in the severed finger replantation technology, more easy to make the negative mood increased. Therefore, in order to help patients build confidence in recovery, nursing staff need to take effective nursing methods. On the one hand, psychological intervention should be carried out for patients with severed fingers, and targeted nursing plans should be made based on the actual situation of patients, so as to strengthen emotional communication and interaction with patients, psychological counseling should be carried out for patients, and successful cases should be used to enhance patients' confidence, so as to improve patients' compliance. On the other hand, the nursing staff need to introduce the hospital authority and relevant knowledge of the replantation technology of severed finger to the patient, so that the patient can have a comprehensive understanding of the technology and win the trust of the patient while increasing the chance of interaction with the patient, so as to reduce the negative impact of bad emotions. (2) the operation: in order to let the patient in the operation process to achieve the best state of comfort, nursing staff need to do a good job in keeping warm and cooperate with the work. First, the nurse should clean and warm the injured area of the severed finger and establish venous access. During this process, the patient should move gently and aseptically. The severed finger should be refrigerated. [2] secondly, during the operation, it is necessary to cooperate with the work of the attending physician, provide the doctor with necessary sedatives, diastolic agents and other drugs, adjust the indoor temperature to a reasonable range, and try to reduce the adverse reactions of patients and shorten the operation time. (3) after the surgery: after the surgery, the nursing staff need to push the patient back to the ordinary ward, let the patient keep lying or semi-lying, the patient's severed finger elevation, so as not to appear swelling phenomenon. In order to reduce the occurrence of complications, the nursing staff need to regularly turn over and wipe the body for the patient, which can not only manage the patient's skin well, but also promote the patient's blood flow. In addition, in order to alleviate the patient's pain, nursing staff should also do a good job of massage, when necessary can use pain relief drugs to relieve symptoms. At the same time, nursing staff need to closely observe the patient replantation finger status, such as color, temperature, once the occurrence of purple or bleeding phenomenon, the need to immediately report to the attending physician, in order to take effective measures to improve, further reduce the risk of vascular crisis, infection and other phenomena. After one month, patients should be instructed to carry out rehabilitation training, and a targeted rehabilitation plan should be made based on the actual situation of the patients, so as to help the patients recover hand function and further improve the survival rate of replantation fingers.

2.3 Observation Indicators

Surgical outcomes (including success rate of replantation and functional recovery), incidence of
complications (including vascular crisis, wound infection, malunion and poor nerve recovery) and patient satisfaction (including very satisfied, satisfied and dissatisfied) were observed in both groups.

2.4 Statistical Method

SPSS17.0 software was used for statistical analysis of the data collected in this study. Measurement data were expressed as (x±s), t test was used for inter-group comparison, rate of enumeration data was expressed as (%), and x2 test was used for inter-group comparison. P<0.05 indicated that the difference was statistically significant.

3. Results

3.1 Comparison of surgical effects between the two groups

The survival rate of the replantation finger in the observation group (66.67%) was significantly higher than that in the control group (33.33%), with statistically significant differences (P < 0.05). See table 1 for specific data.

<table>
<thead>
<tr>
<th>Group</th>
<th>cases</th>
<th>replantation successfully</th>
<th>functional recovery</th>
<th>total survival rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>the observation group</td>
<td>27</td>
<td>24(88.89)</td>
<td>18(66.67)</td>
<td>18(66.67)</td>
</tr>
<tr>
<td>the control group</td>
<td>27</td>
<td>22(81.48)</td>
<td>9(33.33)</td>
<td>9(33.33)</td>
</tr>
<tr>
<td>P&lt;0.05</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3.2 Comparison of the incidence of complications between the two groups

The incidence of complications in the observation group (3.70%) was significantly lower than that in the control group (22.21%), and the differences were statistically significant (P < 0.05). The specific data were shown in table 2.

<table>
<thead>
<tr>
<th>Group</th>
<th>cases</th>
<th>vascular crisis</th>
<th>wound infection</th>
<th>malunion</th>
<th>poor nerve recovery</th>
<th>Total Incidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>the observation group</td>
<td>27</td>
<td>0(0.00)</td>
<td>1(3.70)</td>
<td>0(0.00)</td>
<td>0(0.00)</td>
<td>1(3.70)</td>
</tr>
<tr>
<td>the control group</td>
<td>27</td>
<td>1(3.70)</td>
<td>3(11.11)</td>
<td>1(3.70)</td>
<td>1(3.70)</td>
<td>6(22.21)</td>
</tr>
<tr>
<td>P&lt;0.05</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3.3 Comparison of patient satisfaction between the two groups

The satisfaction of patients in the observation group (100%) was also significantly higher than that in the control group (77.77%), with statistically significant differences (P < 0.05). See table 3 for specific data.

<table>
<thead>
<tr>
<th>Group</th>
<th>cases</th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>dissatisfied</th>
<th>Total satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>the observation group</td>
<td>27</td>
<td>19(70.37)</td>
<td>8(29.63)</td>
<td>0(0.00)</td>
<td>27(100.00)</td>
</tr>
<tr>
<td>the control group</td>
<td>27</td>
<td>9(33.33)</td>
<td>12(44.44)</td>
<td>6(22.23)</td>
<td>21(77.77)</td>
</tr>
<tr>
<td>P&lt;0.05</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

4. Discussion

With the development of microtechnique, the replantation of severed finger has been paid more and more attention by medical workers. However, not all patients can finger replantation surgery,
for those with systemic diseases, poor health, with multiple fractures or severe soft tissue injury patients, the wounded finger is not recommended, on the one hand, may find it difficult to achieve significant treatment effect, on the other hand will cause certain threat to patient safety. In addition, if fracture time is too long, the tissue has been denaturated, should not be used severed finger replantation. Therefore, in order to give full play to the function and advantages of replantation of severed fingers, the majority of doctors should formulate reasonable treatment plans based on the actual situation of patients, clarify the surgical contraband and indications, continuously improve the survival rate of replantation of fingers, and strive to enhance the treatment effect while also reducing the rate of disability of severed fingers.

According to incomplete statistics, the success rate of replantation of severed fingers in China is up to 78%. Although there is a high success rate, there are still some patients who have lost hand function permanently, which is one of the main reasons for the rising disability rate of severed fingers. [3] according to the study, nursing work has a huge impact on the success of replantation of severed fingers. Only by constantly improving the overall quality of nursing work can the influence degree of adverse factors be reduced, so as to provide a reliable guarantee for obtaining the best therapeutic effect. With the increase of clinical trials, comfortable nursing has shown great advantages in the nursing work of replantation of severed fingers. This nursing mode can not only improve the survival rate of replantation of fingers, but also reduce the incidence of complications and greatly improve the satisfaction of patients.

Comfort nursing, as an effective nursing model, mainly emphasizes the comfort and satisfaction of patients. Specifically, it means that nursing staff should take targeted and effective nursing measures to promote patients to achieve the most pleasant state in physiology, psychology, society and spirituality. For patients with replantation of severed fingers, they will inevitably have negative emotions due to wound pain or psychological pressure. Under the influence of such negative emotions, patients' compliance and satisfaction will be greatly reduced, which is extremely adverse to the recovery of patients' hand function, and comfort care can just solve these problems. Comfort nursing can intervene patients' physiology, psychology and spirituality, help patients build up confidence in rehabilitation, and give patients effective rehabilitation training. While meeting patients' actual needs, it can also reduce the negative impact of bad emotions and promote patients to achieve a state of pleasure in all aspects. This study showed that the survival rate of replantation fingers in the observation group (66.67%) was significantly higher than that in the control group (33.33%). The incidence of complications in the observation group (3.70%) was significantly lower than that in the control group (22.21%). Moreover, the satisfaction of patients in the observation group (100%) was significantly higher than that in the control group (77.77%), with statistically significant differences (P<0.05).

To sum up, in the process of nursing care of patients with replantation of, using comfortable nursing has an important practical significance, not only help to improve the survival rate of replantation refers to, and also can reduce the incidence of complications, so as to promote the patients' satisfaction significantly increased, to build a good doctor-patient relationship is very good, is worth promoting.

References


