Clinical refined nursing in the elderly reflux esophagitis nursing application value

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Abstract: Objective: To analyze the clinical value of fine nursing in elderly patients with reflux esophagitis. Methods: 100 cases of elderly patients with reflux esophagitis admitted to our hospital were randomly divided into the control group and the observation group, with 50 cases in each group. The control group received routine nursing, while the observation group received clinical refined nursing. Compared to patients with abdominal pain, acid reflux, chest pain, heartburn and other problems to improve the situation, in addition to medical symptoms self evaluation scale SCL - 90 assessment of patients with anxiety, fear, in the form of forced, depression, paranoid score, statistics in nursing patients with medication, diet, exercise, regular review of cases, statistics of the patient's compliance. Results: The observation group of patients with abdominal pain, acid reflux, chest pain, heartburn, etc are improved more obvious, the self - assessment lists of symptom SCL - 90 psychological activities of patients tend to be healthy, normal, observation group medication, diet, exercise, regular review of the risk is higher, analysis of the two groups have significant difference (P < 0.05). Conclusion: Elderly patients with reflux esophagitis need to follow up more refined nursing forms, and the original nursing model should be divided into detailed categories and supplements, so as to achieve precise, meticulous and thoughtful nursing objectives, which are effective in controlling the adverse problems of elderly patients with reflux esophagitis and improving their health cognition.

1. Introduction
The stomach or duodenal fluid back into the esophagus, causing esophageal mucosal damage caused by chronic inflammation, the elderly accounted for the proportion of patients with RE is higher, the conscious aiming at its anti acid in elderly patients in nursing, stomach burning pain, such as series of reactions, help patients improve liver stomach don't "", "loose", "insufficient stomach Yin", "gastric collaterals blood clot" clinical adverse symptoms, and through the care of delicate and refined, let care more close to the situation of the patients, nursing efficiency.

2. Materials and Methods
2.1 General Materials
100 cases of elderly patients with reflux esophagitis admitted to our hospital were randomly divided into the control group and the observation group, with 50 cases in each group. The control group received routine nursing, while the observation group received clinical refined nursing. In terms of gender, there were 32 males and 18 females in the control group. In the observation group, there were 28 males and 22 females. In terms of age range, the age of the control group was 59–86 years old, and the age of the observation group was 60–82 years old. The mean age in the control group was (63.26±4.15) years old, and the mean age in the observation group was (64.26±6.35) years old. In this nursing investigation, the course and age of the patients had no interference significance. All the patients were diagnosed to receive treatment in our hospital and had communication and understanding abilities. The patients had no other major diseases besides reflux esophagitis.
2.2 Methods

Routine care:

(1) diet: patients are strictly prohibited from smoking and drinking, pay attention to a small number of meals, eat low-fat diet, can reduce the frequency of reflux symptoms after eating. In contrast, a high-fat diet promotes the release of cholecystokinin from the small intestinal mucosa, which can easily lead to gastrointestinal contents reflux. Patients are required to eat 7 points full, dinner should pay attention to the right amount, to avoid feeling full, at the same time, after the meal should avoid direct supine rest, can take a walk or sitting chat activities. Obese patients should also pay attention to weight loss, weight control, pay attention to diet light.

(2) detail care: patients at the time of sleep and rest can be appropriately raise 10 ~ 15 cm of the head of a bed, if has the feeling, such as an acid containing the patient should be appropriate in the mouth like the taste of candy, drink plenty of water, and proper exercise, avoid JiShi, at the same time pay attention to patients with psychological guidance, guide the patients to face their own disease, has the ability to comfort themselves, to the occasional has ability to endure pain, by transferring patient attention, under the effect of drugs, encourage patients to improve mental support. In addition, in communication with patients, patients should be observed wearing, do not wear corset, belt should be slightly loose, do not bend down and other abdominal force activities, pay attention to observe the side effects of medication patients.

Fine nursing:

(1) diet: the patient's diet habit has been formed early, not only to warn the patient to pay attention to diet light, easy to digest, but also should be more detailed for the patient to provide food case, the patient can follow the diet diet slightly changed to his favorite food, improve the satisfaction in the diet. Such as milk yams roux: milk 250 grams, yams, flour each 30 grams. Cut the Chinese yam into small pieces, add water and stew until the soup thickens, then add milk, stir in the roux and bring to a boil. Take it on an empty stomach, 1 ~ 2 times a day, 1 month for a course of treatment. Fried radish tassel: 250 grams of fresh radish tassel, food oil, salt amount; Wash radish tassel, cut off, put into hot oil pot cooked, add a little salt seasoning, can be eaten. Ginseng pig stomach soup: pig stomach 1, astragalus 120 grams, dangshen 120 grams, the astragalus, dangshen wash section, pig belly wash, shenqi wrapped in cloth into the pig belly, hemp tightly, add an appropriate amount of water, stewed with fire, cooked after removing the package can be eaten hot. Twice a week for a month for a course of treatment.

(2) exercise and massage: not only to carry out regular exercise nursing, but also should be in fine nursing, pay attention to massage after exercise, exercise guidance is as follows: "half bridge" exercise: two legs flexion 90 degrees, foot on the bed surface, lift hips and waist, as far as possible to make the trunk and legs into a day straight, at the same time tighten anus, inhalation; Let go, exhale, and repeat 15 times, three times a day. After the exercise, rub the hands together and massage them repeatedly on the upper, lower, left and right sides of the abdomen according to the sequence. The massage can be suspended after the abdomen is comfortable, and the baby can be warmed in the abdomen for physical heating to strengthen the warmth of the abdomen and peristalsis of the gastrointestinal tract.

(3) psychological nursing: If patients with stomach problems, in addition to pay attention to diet, exercise, should also pay attention to the environment to decorate, happy can reduce patient pain, communication with the patients' families, can be in the patient's ward placed flowers, often for patients to change clothes, dress, men can often communication and so on, the current political affairs from the be fond of of patients with positive communication and discussion, allow patients to divert attention, to reduce the negative thoughts of the disease.

(4) drug care: pay attention to drug taking time, some drugs can irritate the stomach, should pay attention to distinguish drug effect and side effects, stimulation, avoid drugs such as aspirin, indomethacin, bute, paracetamol, prednisone, destroy the gastric mucosal barrier, or stimulate the secretion of gastric acid and pepsin, reduce the protection of gastric mucosa, can cause stomach trouble. Stomach condition should be explained before taking medicine, notice to take medicine after meals, can take the pill that protects stomach at the same time.
(5) Detail care: actively treat chronic infection of oral cavity, nasal cavity and pharynx to prevent local infection of bacteria or its toxin swallowed for a long time, causing inflammation of gastric mucosa. Pay attention to the mouth clean, often gargle mouth, Chinese herbal medicine paste, paste god que point (umbilical cord).

2.3 Observation Indexes

Compared to patients with abdominal pain, acid reflux, chest pain, heartburn and other problems to improve the situation, in addition to medical symptoms self evaluation scale SCL - 90 assessment of patients with anxiety, fear, in the form of forced, depression, paranoid score, statistics in nursing patients with medication, diet, exercise, regular review of cases, statistics of the patient's compliance.

2.4 Statistical Treatment

Excel software such as medical office under the discrete data statistics and classified count ($X^2$ test, is used to infer that two or forming than there is difference between the overall rate), matching measurement data comparison between samples or groups (t test, observe the differences of this group of samples with overall), $x$ (average) ±s (Standard Deviation) said mean add and subtract Standard Deviation, the small probability event of statistical quality control ($P < 0.05$ said have significant difference (one hundred trials, the frequency is less than 5 times).

3. Results

In the form of refined nursing, there were 1 case of abdominal pain, 0 case of acid reflux, 1 case of chest pain and 0 case of heartburn. The overall incidence of adverse symptoms was 4%.

Under the routine nursing mode, the patient had 1 case of abdominal pain, 1 case of acid reflux, 2 cases of chest pain, and 1 case of heartburn. The overall incidence of adverse symptoms was 10 percent.

Table 1 comparison of the incidence of adverse reactions between the two groups

<table>
<thead>
<tr>
<th>group</th>
<th>n</th>
<th>abdominal pain</th>
<th>acid reflux</th>
<th>chest pain</th>
<th>heartburn</th>
<th>total rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>the observation group</td>
<td>50</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>4%</td>
</tr>
<tr>
<td>the control group</td>
<td>50</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>$X^2$</td>
<td>-</td>
<td>6.235</td>
<td>4.152</td>
<td>2.563</td>
<td>5.263</td>
<td>4.125</td>
</tr>
<tr>
<td>$P$</td>
<td>-</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
</tr>
</tbody>
</table>

In the investigation of the psychological conditions of the patients in the observation group including anxiety, fear, compulsion, depression and paranoia, their psychological problems and bad feelings were all lower. In the control group, their bad feelings were weak but relatively stronger than those in the observation group in the evaluation of anxiety, fear, compulsion, depression and paranoia.

Table 2 comparison of the main psychological status of patients in the two groups under the evaluation of symptom self-rating scale scl-90

<table>
<thead>
<tr>
<th>group</th>
<th>n</th>
<th>anxiety</th>
<th>fear</th>
<th>compulsion</th>
<th>depression</th>
<th>paranoia</th>
</tr>
</thead>
<tbody>
<tr>
<td>the observation group</td>
<td>50</td>
<td>1.23±1.03</td>
<td>1.23±0.68</td>
<td>1.02±0.36</td>
<td>1.26±0.25</td>
<td>1.09±0.5</td>
</tr>
<tr>
<td>the control group</td>
<td>50</td>
<td>2.01±0.69</td>
<td>2.14±0.52</td>
<td>1.69±1.05</td>
<td>2.41±0.26</td>
<td>2.05±0.4</td>
</tr>
<tr>
<td>$P$</td>
<td>-</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
</tr>
</tbody>
</table>

After series of nursing care, the compliance of patients in both groups was improved. The observation group was more compliant in medication, diet, exercise and self-cognition and
examination of the disease. Compared with the control group under routine nursing, the compliance was higher.

Table 3 comparison of the compliance of the two groups of patients during treatment and nursing

<table>
<thead>
<tr>
<th>Group</th>
<th>n</th>
<th>Right Medication</th>
<th>Reasonable Diet</th>
<th>Proper Motion</th>
<th>Regular Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation group</td>
<td>50</td>
<td>44</td>
<td>47</td>
<td>42</td>
<td>43</td>
</tr>
<tr>
<td>Control group</td>
<td>50</td>
<td>41</td>
<td>42</td>
<td>38</td>
<td>39</td>
</tr>
<tr>
<td>X²</td>
<td></td>
<td>5.241</td>
<td>5.298</td>
<td>4.265</td>
<td>4.129</td>
</tr>
<tr>
<td>P</td>
<td></td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
<td>&lt;0.05</td>
</tr>
</tbody>
</table>

4. Discussion

Elderly reflux esophagitis, nursing process, considering the older patients with stomach trouble again and again, inflammation can be complicated by other adverse reactions such as acid reflux, should be the rational use of drugs, actively protect intestines and stomach have beneficial bacteria, for through the daily care and protection, eliminate inflammation of the stomach, alleviate symptoms of stomach problems, according to the refinement of nursing patients, single gastric disease control can only form a regular effect, at the same time we should pay attention to the patient's psychological nursing guidance, diet, exercise and detail, appropriate living well and distribute work, optimism, at the same time should strengthen the physical exercise, enhanced physique, strengthen gastrointestinal motor function. Close the distance with patients in nursing, pay attention to the patient's life care. Help patients develop good habits and habits, improve the efficiency of daily health care for patients, actively prevent the recurrence of stomachache in the nursing, more delicate gastric mucosa protection, pay attention to the habits and preferences of patients, to achieve the purpose of efficient nursing. Should be aimed at older reflux esophagitis patients sex form positive consciousness of daily care, nursing discussion, constantly moving toward fine care point of view, adhere to the concept of fine service for the patients, improve patients' negative psychological problems caused by disease, improve patient adherence, reduce adverse reactions to patients, improve the efficiency of nursing as a whole.

References


