

Clinical Nursing Effect of "One Disease, One Product" in Patients with Ankylosing Spondylitis based on Evidence-based Philosophy

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Keywords: patients with ankylosing spondylitis; "one disease, one product" nursing; evidence-based medicine concept

Abstract: Objective To study the clinical application effect of "one disease, one product" nursing mode on patients with ankylosing spondylitis. Methods A total of 100 patients with ankylosing spondylitis were selected as the control group, and the remaining 50 patients were used as the control group. The remaining patients were used as the experimental group. BASDAI score and nursing satisfaction of two groups of patients. Results The nursing satisfaction of the experimental group was higher than that of the control group ($P = 0.002$). Compared with the control group, the BASDAI score of the experimental group was $P < 0.05$.

Conclusion The implementation of "one disease, one product" nursing mode can improve the motor function of patients with ankylosing spondylitis, and is conducive to the rehabilitation of patients.

Ankylosing spondylitis is an auto-inflammatory disease [1], the condition is more complicated, and it often accumulates important organs, which seriously affects the prognostic quality of life of patients [2]. Is the most important task at present [3-4]. Related studies have reported that strengthening exercise can improve the clinical prognosis of patients, and is conducive to the recovery of patients' diseases [5-6]. The fundamental starting point of the "one disease, one product" nursing model is to improve the quality of life of patients [7-8], It is mainly aimed at a certain disease and adopts the concept of evidence-based medicine to provide professional nursing measures for the clinical rehabilitation of patients with ankylosing spondylitis, which can promote the rehabilitation effect of clinical prognosis of patients with ankylosing spondylitis .

1. Materials and Methods

1.1 General Information

All subjects in this study met the diagnostic criteria for ankylosing spondylitis revised by the American College of Rheumatology. Exclusion criteria: those with mental illness, fractures, severe osteoporosis, and kyphosis; patients who did not cooperate. A total of 110 questionnaires were distributed and 100 were recovered, of which 3 were lost and 7 failed. The pass rate was 91%. Patients (50 patients) from November 2017 to April 2018 were selected as the control group, and patients (50 patients) from May 2018 to October 2018 were used as the experimental group. There was no significant difference in general information between the two groups of patients ($P > 0.05$), and they were comparable.

1.2 Research methods

1.2.1 Control group the control group adopted the conventional nursing mode.

1.2.2 Experimental group. The experimental group adopted the "one disease, one product" nursing model:

1.2.2.1 The "one disease, one product" nursing research group was established. It consists of the head nurse of rheumatology, highly educated nurses, senior clinical nursing and medical experts. The nursing research group includes an evidence-based group, a training group, and an inspection group. ① The evidence-based group: The team used standard evidence-based nursing practice methods to retrieve important database literature, followed the evidence-based practice steps PICO to define evidence-based issues, and the searched databases mainly included the Cochrane Library and Chinese core journal database. Quality assessment, planning to integrate the best evidence-based evidence, apply the evidence to patients with ankylosing spondylitis, and formulate the best rehabilitation care plan. ② Training team: It is mainly composed of the head nurse of the ward and the specialist nurse of rheumatology and immunology. It invites well-known experts for training. The main content of rehabilitation function training is to provide corresponding care to patients with ankylosing spondylitis after passing the assessment. ③ Supervision team: It is mainly composed of the head nurse and specialist nurses of the ward. According to the "one disease, one product" nursing mode, a supervision and checklist for patients with ankylosing spondylitis is designed to inspect all the nursing staff in the department.

1.2.2.2 "One disease, one product" measures: ① At admission: Patients are warmly received at admission, basic patient information is collected, and specialist disease evaluation for patients with ankylosing spondylitis is performed. Specialist assessments include spine, joint mobility, pain, and various scales. Based on the results of each assessment, explain health guidelines such as diet, medicine, and functional exercises related to disease. ② "Patient talk, careful observation, and sincere help" during the hospitalization 1) Explain the related disease knowledge to the patients during the hospitalization, and teach the patients "strong spine caring exercises. Videos will be played in the classroom every day. Specialist nurses will demonstrate the contents of "Strong Ridge Caring Exercise" in the classroom every Tuesday and Friday afternoon, and evaluate the patient's mastery. If there is a deviation in action or understanding, re-direct the demonstration until The patient has complete control. Every Thursday afternoon, the specialist nurses explain the common medication knowledge to patients in the form of PPT. 2) Carefully observe the changes in the patient's condition, the movement of the spine and joints, pain relief and give health guidance, and develop a personalized rehabilitation care plan. 3) Establish a WeChat group of patients with ankylosing spondylitis. The group regularly publishes pictures, videos, PPTs of disease-related knowledge, promotes the concept of healthy life, sincerely helps patients answer questions, strengthens nurse-patient communication, and encourages patients' confidence in treating the disease. ③ "Warm delivery" when discharged: Re-educate about disease-related knowledge and rehabilitation nursing guidance after discharge, confirm the patient's mastery of "strong spinal caring exercise", copy the "caring exercise" video, and distribute health knowledge about ankylosing spondylitis Manual, outpatient follow-up reminder card and follow-up notice. ④ Follow up by phone every month after discharge; establish a WeChat group of patients, distribute health education content to patients every day, experts answer questions and feedback at the middle of the month and the end of the month, and the project team members will manage it.

1.2.2.3 Features of the "one disease, one product" nursing model: ① Formulate relevant evaluation forms based on evidence-based evidence and clinical nursing work experience, build the best rehabilitation process and plan for patients with ankylosing spondylitis, and formulate patients with ankylosing spondylitis Sports rehabilitation nursing brochures, standardized procedures for rehabilitation exercises, "strong spine caring exercises" video playback operation procedures, the establishment of patient WeChat groups, etc., aim to provide patients with a variety of multi-faceted health knowledge transmission channels. ② Strengthen the training of rehabilitation exercise for patients with ankylosing spondylitis. Rehabilitation experts will train the group members. After the

training, they will conduct a centralized assessment. Qualified people will issue a "one disease, one product" rehabilitation nursing qualification certificate. Formulate a rehabilitation exercise supervision checklist for patients with ankylosing spondylitis, implement a "one disease, one product" nursing mode plan, and promote the rehabilitation of patients' limb functions.

1.2.3 Evaluation Index

Patients were evaluated 6 months after the project was implemented, and comparisons of various indicators such as BASDAI and nursing satisfaction between the two groups of patients were evaluated. The evaluation content of BASDAI mainly includes the patient's fatigue, pain, morning stiffness and other issues. The fatigue, pain, joint stiffness and stiffness time of the past week are evaluated. The higher the score, the more active the condition.

1.3 Statistical methods

In this study, the latest SPSS 23.0 software was used for data analysis. Measurement data were expressed as $X \pm s$, count data were expressed as percentages, chi-square analysis, t test, $P < 0.05$, and the differences were statistically significant.

Results

After implementing the "one disease, one product" nursing mode, the nursing satisfaction of the patients was higher than that of the control group. The BASDAI score was different from the control group, and the difference was statistically significant ($P < 0.05$).

Table 1 Comparison of BASDAI scores between two groups of patients before and after treatment

Time	Group	Number of cases	Degree of fatigue	Degree of pain	Joint stiffness	Joint stiffness time
Before treatment	Control group	50	8.1±0.7	5.4±1.2	6.1±1.3	42.1±10.0
	test group	50	8.2±1.5	5.7±0.5	6.4±1.2	38.0±12.1
After treatment	Control group	50	4.5±1.3	2.9±0.8	3.5±0.6	15.3±10.4
	test group	50	2.1±0.5	1.7±1.2	2.8±0.5	9.3±4.6

Table 2 Comparison of patient satisfaction between the two groups

Group	No Number of cases	Basically satisfied	Satisfied	Not satisfied	Overall satisfaction rate
Control group	50	9	23	18	32 (64%)
Test group	50	18	27	5	45 (90%)
χ^2 Value	9.543				
P Value	0.002				

3. Discussion

With the implementation of the "one disease, one product" nursing project, the stiffness of joints in patients with ankylosing spondylitis has been reduced, and the time for joint stiffness is shortened. The results of this study are consistent with those of domestic scholars [13-14]. The results show that the BASDAI scores of patients with ankylosing spondylitis after the implementation of the "one disease, one product" nursing program are different. The results of this study are consistent with the results of the domestic scholar Zeng Degeng. Patient's limb pain, avoid joint stiffness, is conducive to the patient's recovery. After the implementation of the "one disease, one product" nursing program, the patient's fatigue level has improved. With the implementation of the "one disease, one product" nursing program, the patients' daily exercise and exercise are carried out

according to the plan. It is beneficial to the limb recovery of patients with ankylosing spondylitis. After the implementation of the project, the general physiological function of the patient has changed, and the limb motor function has improved. This nursing mode can improve the patient's limb movement and help the recovery of the disease. The results of this study show that the nursing satisfaction of patients with ankylosing spondylitis has increased after the implementation of the "one disease, one product" nursing project, which is consistent with the findings of domestic scholar Ye Jing and so on. Therefore, the project is in line with the service concept of quality care, Good nursing service concept, thoughtful service, and good patient-patient communication are important links to improve nursing satisfaction. The "one disease, one product" project reflects the professionalism and humanistic care of nursing, and implements an integrated service process for patients. In this study, through the implementation of "one disease, one product" nursing program for patients with ankylosing spondylitis, guidance for rehabilitation training for patients, comprehensive relevant evidence-based evidence, and development of individualized rehabilitation nursing models [9] Rehabilitation provides better nursing effect. The "one disease, one product" nursing model can fully reflect the characteristics of clinical specialist nursing, and improve the quality of clinical nursing. However, due to the small number of samples included in this study, the results of the study have certain limitations, and large-scale empirical studies should be conducted in the future.

Acknowledgements

Supported by Medical Scientific Research Foundation of Zhejiang Province, China (2019KY601)

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