

## Discussion on Postural Nursing of Femoral Neck Fracture in Elderly Patients after Artificial Femoral Head Replacement

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**Abstract:** Objective: To study and analyze the effective postural nursing methods for elderly patients with femoral neck fracture after the operation of artificial femoral head replacement. Methods: A total of 38 elderly patients with femoral neck fractures admitted to our hospital during the period from June 2019 to January 2020 were randomly selected. During the study, postural nursing was used to care for them. We also observed the incidence of complications and their satisfaction with the nursing process. Results: None of the 38 patients who participated in the study developed complications and were discharged from the hospital. In addition, of the 38 patients, 37 were satisfied with their care, accounting for 97.37% of the total. Conclusion: For elderly patients with femoral neck fractures, a series of postural nursing measures can effectively prevent other complications and promote their physical recovery if they can be helped to recover after artificial femoral head replacement surgery.

### 1. Introduction

Older people are more likely to break bones than younger people because of the gradual loss of calcium in their bones. Femoral neck fractures, on the other hand, occur mostly in the elderly, and are more common in older women. In essence, the reason for this femoral neck fracture is that elderly patients accidentally twist the limb on the injured side after falling, resulting in fracture of the femoral neck. In general, only the use of artificial femoral head replacement surgery, the treatment can help the patient better recovery, otherwise the patient may not be able to move normally. After the operation, patients need more effective care, or they may not recover normally. Therefore, in this study, among the elderly patients with femoral neck fracture admitted to our hospital during the period from June 1, 2019 to January 1, 2020, 38 patients were selected using the method of random number table, and postural nursing was used to carry out rehabilitation nursing for them after surgery. Satisfactory results have been obtained. Here is the report.

### 2. Materials and Methods

#### 2.1 General Materials

Among the elderly patients with femoral neck fracture admitted to our hospital during the period from June 2019 to January 2020, 38 patients were selected by random number table. Of the 38 patients, 21 were female and the remaining 17 were all male, the age range is 60 to 72 years old, with an average age of  $(64.56 \pm 3.83)$ .

#### 2.2 Methods

##### 2.2.1 Refers to the Position of the Patient When Moving the Bed

Because the patient needs to be transferred to another bed after the operation, which is at the sensitive stage after the operation, the position of moving the patient across the bed needs to be more careful. In general, when moving a patient, hold their hip joint in place while keeping the injured limb in a neutral abductor position. By no means should the affected limb of the patient be

excessively pulled, nor should the hip joint of the patient be subjected to external rotation or adduction.

### **2.2.2 Postoperatively**

After the operation, it is necessary to keep the affected limb in the neutral position of abduction at all times, because this position can effectively prevent the patient from losing the femoral head that has just been replaced during the operation. Since postures and postures of patients after surgery have a significant impact on the recovery of the surgical site of patients, effective postural nursing must be emphasized. In the process of nursing, should do a good job in these three aspects of protection. First, after surgery, a soft pad must be placed under the patient's knee joint. This can effectively prevent the patient's affected limb from over-bending or over-straightening. Secondly, after the operation, anti-rotation shoes should be put on for the patient, or lower limb skin traction should be performed for the patient with the permission of the body, so that the affected limb of the patient can present a neutral position of 30 degrees outward. This can effectively avoid internal rotation on one side of the affected limb. Also, have a soft pillow placed between the legs. This allows both limbs of the patient to present normal abduction all the time, so as to prevent the normal limb of the patient from presenting adduction due to its proximity to the affected limb.

On the first day after the operation, the upper body should be lifted at an Angle of no more than 45 degrees. Between a week and 10 days after surgery, the patient's elevation can be controlled to within 90 degrees. In addition, the surgical wound should be regularly disinfected for the patient, so as to avoid the formation of pressure sores caused by long-term compression of the patient's surgical incision. At the same time, in order to sterilize the patient more smoothly, when keeping the patient lying on his side, the abductor pillow can be used to fix the lower limb for the patient. In addition, still can go up again on the bed sheet of the patient lay bath towel to wait, come so, just can carry on the conversion of body position for the patient more smoothly.

Finally, in order to enable patients to actively cooperate with the work of medical staff postural nursing, we must explain to them the importance of postural nursing after surgery. Patients should also be instructed not to use this position for three months after the operation. He could not cross his legs for six weeks after the operation.

### **2.2.3 Postural Nursing Methods for Placing Bedpans for Patients**

After the operation, for the patient to put the toilet to take and put this job, also should always pay attention to, avoid the patient to appear the change of position. In general, the patient's hips must be raised to a high enough level to avoid excessive bending of the limb on the affected side. When taking and putting the toilet for the patient, it must be handled gently to avoid abrasions on the patient's skin and changes in the patient's body position.

### **2.2.4 Change the Position of the Patient during His Stay in Bed**

Since patients after this operation often need to stay in bed for a long time, only by changing posture can nurses ensure that patients will not suffer from pressure sores and other complications after a long stay in bed. There are two ways to change a patient's position. In the first method, the nurse supports the patient's knee and elbow joints at the same time, and changes the patient's body position to the position of complete lateral lying in the shortest time. The second method, based on the previous method, USES a pillow to support the body. No matter which method is mentioned above, it should be avoided to put pressure on the surgical prediction of patients.

### **2.2.5 Postural Nursing Methods for Patients While Standing and Walking**

After fully considering the patient's overall recovery, the patient can be allowed to stand and walk at appropriate times. Generally speaking, after the first time the patient goes to the ground, the patient should stand on all feet while the injured limb is slightly extended. At the same time, tiptoe standing should be avoided. Also avoid adduction or external rotation while standing. When the patient is standing on all feet, there is no movement in the muscles of the hip, and the pressure on the site of the previous operation is reduced, making it easier for the patient to walk. It is only after

the patient has fully adapted to the standing position that he can practice walking with the help of a cane. At the beginning, patients were not loaded when walking, and then they gradually transferred to the state of loading walking.

### **2.3 Research Indicators**

The complications of 38 patients were counted, and their satisfaction with the nursing process was also investigated.

### **2.4 Statistical Analysis**

During the research process, relevant data were collected in great detail. After the study, these data were uniformly recorded into spss22.0 software for analysis.

## **3. Results**

None of the 38 patients involved in the study developed complications and were discharged from the hospital. In addition, of the 38 patients, 37 were satisfied with their care, accounting for 97.37% of the total.

## **4. Discussion**

For the elderly patients with femoral neck fracture, if they can use a series of postural nursing measures to help them recover after the artificial femoral head replacement surgery, they can effectively avoid other complications and promote their physical recovery. In this process, appropriate psychological care must be used to promote the patient's recovery level. This is mainly because of the relatively slow response level of old people, for the adaptation level of unfamiliar surroundings in hospital is relatively poor, therefore, have the attitude of the medical staff with full of patience and love, to relieve their anxiety, and through effective science communication, have a more comprehensive understanding of their disease, can fundamentally improve their confidence for recovery, help them to return to normal faster health level and avoid unnecessary complications.

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