

Discussion on the Emergency Nursing of Children's Gastric Lavage after Acute Poisoning of Digestive Tract

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Abstract: Objective: To explore the nursing measures of children's acute gastrointestinal poisoning gastric lavage by selecting a certain number of samples. Methods: 30 cases of acute infantile poisoning received and treated in our hospital from February 2017 to May 2019 were selected as the objects of this study, and targeted treatment was conducted according to the different causes of poisoning. Results: Through the timely treatment and follow-up nursing of all the children, the sick children were discharged on time, the cure rate reached 100%. Conclusion: For children with acute poisoning, timely diagnosis and treatment and follow-up care can alleviate the symptoms of children, reduce the accidental death rate of children, in addition, health education for children's parents can effectively reduce the probability of children taking poison by accident.

1. Introduction

In daily life, because of the children's age is small, the resolution for a lot of things is not strong, so often can appear the phenomenon of eating, in pediatrics, the acute poisoning cases of children through the digestive tract is very much, after children poisoning, medical personnel should commence immediately gastric lavage treatment, and understand the children in the stomach poisoning substance, is the most effective treatment method. If the treatment of children is not timely so it is likely to cause a life accident, so the nursing work in gastric lavage is particularly important. In this study, 30 cases of acute pediatric poisoning received and treated in our hospital from February 2017 to May 2019 were selected as the objects, and the specific process was reported as follows.

2. Materials and Methods

2.1 General Materials

30 cases of acute infantile poisoning received and treated in our hospital from February 2017 to May 2019 were selected as the objects of this study. Patients were divided into the following categories according to different types of poisoning, including 16 cases of accidental ingestion of diazepam poisoning, 5 cases of organophosphorus poisoning, 8 cases of accidental ingestion of rat poison poisoning and 1 case of other poisoning. Among these samples, there were 18 male children and 12 female children, ranging in age from 1 to 8 years, with an average age of (4 ± 1.2) years. There was no difference in the clinical data and medical history of all samples, which could be used for observational experiments.

2.2 Methods

2.2.1 Gastric Lavage Treatment

All the children were treated with the improved method of placing gastric tube through the mouth, and the model of gastric tube was selected according to the children's age, height, age and other physiological characteristics. The specific treatment methods are as follows: first, let the child lie on his back or side, with his head tilted to one side, which can prevent the vomit from flowing back into the patient's esophagus again, causing secondary suffocation. In this process, medical staff should assist the child to fix the posture. Second, if the toxic substances of children cannot be

determined in advance, then warm water gastric lavage should be given to the children first, and then specific gastric lavage agents should be selected after the toxic substances are determined. Under normal circumstances, gastric lavage should choose 1:2000--1:5000 potassium permanganate solution for gastric lavage, but children with organophosphorus poisoning cannot choose this solution. If the child is suffering from organophosphorus poisoning, use 1% soap solution or 2% sodium bicarbonate solution for gastric lavage. If the child is suffering from rat poison, choose 1:1000 copper sulfate solution for gastric lavage. Third, a catheter was used to inject gastric lavage into the child to induce vomiting, and the child's vomit was placed in a container for follow-up observation. Fourth, when the gastric lavage is complete, the paramedics then fill the tube with 20 percent mannitol and pull the tube out.

2.2.2 Psychological Nursing Before Gastric Lavage

Children with accidental food poisoning often have a great fear, and the parents of children will also have a great fear because of the fear of not timely rescue, so before gastric lavage, it is necessary to calm the fear of children and parents, leading them to cooperate with the medical staff. In psychological nursing, medical staff should start from the psychology of children and parents, to them for a certain degree of persuasion, let parents and children to understand that optimistic mood for the rescue of children is very helpful. Medical staff should popularize the poisoning mechanism to parents, so that parents have a more comprehensive understanding of poisoning, medical staff should explain the relevant sequelae in place, so that parents can face the children's poisoning objectively.

2.2.3 Nursing during Gastric Lavage

In the first place in the process of gastric lavage should closely attaches great importance to the patient's signs of change, such as the patient's breathing, blood pressure, pulse, etc., if in the process of gastric lavage with signs of obvious changes have taken place, such as respiratory cardiac arrest, asphyxia, the phenomenon such as pulmonary edema, should immediately stop work gastric lavage, and targeted treatment measures. Secondly, in order to prevent the related complications in the process of gastric lavage, it is necessary to keep the respiratory tube of the child unblocked. If respiratory secretions appear, it is necessary to deal with them in a timely manner and further clean the mouth. After the gastric lavage, the lying position of the child should be adjusted to keep the vomit away from the child's skin to avoid the second poisoning. In the process of gastric lavage to do a good job in the care of the external environment, to adjust the surrounding environment to children comfortable temperature range, can not be too low temperature, to prevent children catch a cold. After gastric lavage, it is necessary to comfort the children's nervous psychology and prevent the fear psychology from remaining in the children's psychology. Before discharge, it is necessary to popularize the basic knowledge of the children, teach them to identify toxic substances and prevent them from being poisoned by mistake.

3. Results

Through the classification of the samples and symptomatic treatment, all the children recovered and were discharged from hospital, with the hospital stay ranging from 2d to 11d, and the cure rate reached 100%, as shown in the table below.

poisoning type	n	LOS(d)	cure rate
diazepam poisoning	16	2.3	100%
organophosphorus poisoning	5	5.4	100%
rat poison poisoning	8	4.3	100%
other poisoning	1	2.1	100%

4. Discussion

In the clinical treatment of pediatric cases, poisoning cases caused by accidental ingestion of toxic substances by children are common, and the accident caused by this has attracted the attention

of the broad masses of the people. When children accidentally eat toxic substances should be immediately sent to the hospital for treatment, and adopt gastric lavage drainage measures to eliminate toxic substances, so as to obtain precious time for life rescue. If the diagnosis and treatment can not be timely, the presence of toxic substances can seriously destroy the central nervous system of children, children will leave more serious sequelae and even death. The first choice for acute poisoning is gastric lavage, the main purpose of which is to help children expel toxic substances and prevent them from being absorbed into the gastrointestinal tract, thereby threatening their lives. From the perspective of psychological nursing, when children eating poisonous substances, can cause a series of adverse reactions, such as convulsions, the phenomenon such as foaming at the mouth, the occurrence of these phenomena often leads parents appeared anxious mood, the mood of anxiety in the parents will be transmitted to children, and children's age is small, has not experienced similar events, so their heart is very panic, so that in the process of treatment will not be able to cooperate with medical staff, so in the face of this situation, the medical staff shall be determined with open mouth will open the children's teeth, and use the teeth of stents to prevent children with stomach tube. Before and after the operation, medical staff should give psychological counseling to the children, and let the family members of the children accompany the children during the whole treatment process, so as to enhance the confidence and security of the patients. In the process of gastric lavage, the length of the gastric tube should match the age and weight of the child, and the length should be controlled within a reasonable range. If the gastric tube is too long, the child's gastric mucosa will bleed; if it is too short, the effect of gastric lavage cannot be achieved. Therefore, the length should be kept within a reasonable length. In the process of gastric lavage, medical staff also need to carefully observe the changes in the patient's physical signs. If there is any abnormality, the lavage should be stopped immediately. After the lavage, parents should be informed to let the child fast for one day, so as to give the gastric mucosa sufficient recovery time. In the process of gastric lavage, it is also necessary to fix the postural position of the child. If the patient changes the postural position during gastric lavage, it is likely to cause postural hypotension, which is very unfavorable for the recovery of the child. In the process of gastric lavage, medical staff should also do a good job in environmental care, the process of gastric lavage should keep the surrounding environment warm, to avoid the occurrence of other types of complications. In addition, it should be noted that children who have experienced poisoning events often leave a shadow in their hearts. Parents and medical staff should carry out certain psychological care for the psychological conditions of children, so as to let them know the development of the disease and the healing situation, and relieve the tension and fear of children.

The results also prove the validity of the multiple nursing measures application, in this experiment, selected from February 2017 to May 2019, accepts the treatment of 30 cases of acute pediatric poisoning cases as the research object, the object of study in these children are all in the common type of poisoning, after the incident, the parents for the first time sent to hospital for gastric lavage treatment, in the process of the parents and the medical staff work closely, the medical staff in the whole process of gastric lavage for children with a complete psychological nursing, and adopt various measures to link with tension, fear, To make the children more cooperative with the work of medical workers. The final results showed that all the children received symptomatic treatment, and all the children recovered and were discharged from hospital. The hospital stay ranged from 2d to 11d, and the cure rate reached 100%. The patients and their families were very satisfied with the overall treatment effect.

To sum up, acute poisoning incidents in children occur from time to time, and timely gastric lavage measures and nursing measures can help the children to get rid of the pain in time, prevent the occurrence of sequelae. In this study, 30 cases of patients were carried out in a timely manner of gastric lavage treatment, and in front of the gastric lavage, to wash in the stomach and gastric lavage after professional nursing staff to carry on the effective psychological nursing, eventually all children rehabilitation hospital discharge, there is no sequela, the phenomena of the cure rate reached 100%, therefore, in the future of pediatric clinical treatment, timely to gastric lavage treatment on children poisoning, and carries on the psychological intervention, for the parents to

strengthen the education of children, to prevent poisoning incidents from happening again.

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