Value of Psychological Nursing in Clinical Treatment of Patients with Gastric Disease

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Abstract: Objective: To analyze the application significance of psychological nursing intervention to the clinical treatment of patients with gastric diseases. Methods: 120 patients with gastric diseases admitted to our hospital from January 2018 to January 2019 were selected as the research objects. According to the ratio of 1:1, the above patients were divided into the study group and control group. Patients in the control group were given routine nursing mode. On this basis, the study group was given psychological nursing intervention. The SAS/SDS score, health knowledge mastery and nursing satisfaction of two groups were compared and analyzed. Results: After nursing, the scores of SAS and SDS in both groups decreased, but the scores of SAS and SDS in the study group decreased more significantly than those in the control group (P < 0.05). The scores of health knowledge mastery in the study group were (92.6 +3.7) and (72.6 +2.9) in the control group with statistical significance (P < 0.05). After nursing, the nursing effect of the study group was better than that of the control group, and the comparison results had statistical significance (P < 0.05). Conclusion: Applying psychological nursing intervention mode to the treatment of patients with gastric diseases can effectively improve the mental state of patients, improve the health knowledge mastery and patients' satisfaction degree, so it is worthy of clinical application.

1. Introduction

With the development of economy and society, people's life pressure is gradually increasing. In a fast-paced life, many people have irregular diet and rest time, which greatly induces gastric diseases. The main clinical conditions of patients with gastric diseases are stomach pain, gastric acid reflux, vomiting, nausea and so on. At present, the common types of gastric diseases in clinic mainly include acute gastritis, gastric calculi, gastric ulcer and benign and malignant gastric tumors. In clinical treatment, reasonable nursing methods are used to optimize the treatment effect of diseases. Patients are required to have a positive attitude and cooperate with medical staff. Psychological nursing mode occupies an important position in modern nursing work. It emphasizes the attention and adjustment of patients' emotional changes and psychological state, which is conducive to alleviating the psychological pressure of clinical patients, and is an effective way to help the treatment of diseases. Therefore, this study chooses 120 patients with gastric diseases admitted to our hospital from January 2018 to January 2019 as the research objects, and carries out a comparative analysis of nursing effects with different nursing modes. The results of the study are reported as follows.

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2. Data and Methods

2.1 General Data

120 patients with gastric diseases admitted to our hospital from January 2018 to January 2019 were selected as the research objects. The above patients met the research criteria after clinical gastroscopy diagnosis. The study group consisted of 20 males and 40 females, aged 22-71 years, with an average age of (33.2 + 2.5) years, a course of 2.5-40.2 years, and an average course of (8.7 + 4.6) years. The control group consisted of 38 males and 22 females, aged 25-74 years, with an average age of (34.3 + 3.2) years, a course of (3.1-38.2 years) and an average course of (8.4 + 5.4) years. There was no statistical difference in general data between the two groups (P > 0.05), so it was comparable.

2.2 Methods

Patients in the control group were given routine nursing care. Nurses are required to monitor patients' condition, take medicine according to doctors' instructions in the course of disease treatment, and report patients' condition to the doctor in time. The main nursing contents include diet and life nursing^[1]. In dietary intervention, it is essential to pay attention to patients' diet and guide patients to eat regularly and quantitatively, eat properly at a fixed time, whether hungry or not, since regular diet can promote the secretion of digestive enzymes in the stomach. At breakfast and lunch, patients should be guided to eat sufficientlyh, not to be too full at dinner, and not to eat two hours before rest, in order to reduce the burden of the gastrointestinal tract. Secondly, tobacco, alcohol, coffee and tea are forbidden. Patients need to be guided to choose digestible foods, take more vitamins, and maintain a balanced nutrition. Finally, they should drink a cup of water on an empty stomach in the morning, and do not drink water immediately after meals since it may affect the digestive function of the stomach. It is also necessary to chew slowly while eating to reduce the burden of the stomach with the digestive function of saliva, and to protect the gastric mucosa of patients. In life intervention, it is of necessity to observe patients' daily living habits, correct patients' bad habits and behaviors, guide them to wash hands before and after meals, check whether food is within the shelf life, clean fresh fruits and vegetables before eating in order to avoid diseases from the mouth, and pay attention to which pharmic drugs and food can not be used at the same time so as to avoid stomach irritation and poisoning. Patients' wards should be ventilated regularly, and clothes need to be increased or decreased according to the change of weather. Otherwise, patients' immunity decreases and their condition will aggravate. Nurses are required to stress patients' work and rest, and remind patients to keep adequate rest time, try not to stay up late, and enhance the immunity of the body, which is of great help to the recovery of patients' stomach diseases. Moreover, keeping the appropriate amount of exercise is also helpful to alleviate the stomach diseases of patients. In the selection of sports items, the elderly patients are suggested to mainly take Taijiquan, square dancing or other activities, while the younger patients can choose jogging or yoga. Especially after meals, they are advised to walk slowly but not lie down which will aggravate the gastric burden. Reasonable exercise plays a significant role in improving the rehabilitation effect of patients.

Patients in the study group were given psychological nursing intervention based on the nursing measures of patients in the control group. The main nursing measures were as follows. Firstly, psychological nursing of patients with gastric cancer. Gastric cancer, as a serious gastric disease, has posed a serious threat to the life safety of patients. It could occur in many positions of the stomach, and the most common one is the antral pyloric region. The clinical studies show that most patients with gastric cancer have severe anxiety and depression, which leads to mental disorders in severe cases. Therefore, for patients with gastric cancer, nurses need to strengthen psychological counseling and nursing, win the trust of patients with their professional ability and love, explain the importance of receiving treatment to patients, and help patients build up self-confidence. Secondly, nursing care of patients with gastric and duodenal ulcer. The main symptoms of gastric and duodenal ulcer are vomiting and nausea. If acute perforation occurs, it may cause gastric mucosal

inflammation and toxic shock in severe cases. For patients with this type of disease, nurses are expected to explain the causes of disease care and treatment methods with patients, help patients reduce psychological burden, and enhance patients' confidence in disease treatment [2]. Thirdly, psychological nursing of patients with chronic gastritis. Under the influence of multiple factors, chronic gastric mucosal inflammation will cause chronic infection if patients do not receive timely treatment. The main symptoms of patients with chronic gastritis include early satiety, upper abdominal pain, nausea and other symptoms. An important cause of the disease is the influence of psychological factors. Clinical research results show that patients with chronic gastritis may have different degrees of anxiety and depression during the onset process. Under the influence of such negative emotions, patients may suffer insomnia, physical decline or other issues [3]. In view of the above symptoms of patients with gastric diseases, nurses are required to formulate targeted psychological intervention plans based on the analysis of the causes of patients, and guide patients to relieve their emotional entanglement. Fourthly, psychological nursing of patients with acute gastritis. The main symptoms of patients with acute gastritis include blackstool, nausea, vomiting, stomach pain and other symptoms. Severe patients have diarrhea and bloody stools. Nurses should give these patients a good explanation of their condition and guide them to use drugs, explain the matters needing attention and help them build self-confidence.

2.3 Observation Indicators

The SAS and SDS scores of two groups before and after nursing were compared and observed. Self-rating anxiety scale and self-rating depression scale made by our hospital were used to analyze the scores of patients. The higher the scores of patients, the more significant their depression and anxiety were. Comparing and observing the nursing satisfaction degree of patients, the questionnaire survey was conducted. The higher the percentage of patients with satisfaction, the more satisfied they are with nursing work.

2.4 Statistical Method

In this study, statistical software SPSS20.0 was used to process the data. χ^2 was used to validate, (x + s) was used to represent the measurement data. t was taken as the measurement comparison. The comparison results showed that the statistical difference was P < 0.05.

3. Results

3.1 Compare Sas and Sds Scores between Two Groups Before and after Treatment

After nursing, the SAS and SDS scores of the two groups decreased, but the SAS and SDS scores of the study group decreased more significantly. The comparison results were statistically significant (P < 0.05), referring to Table 1 for details.

Table 1 Comparis	on of Sas and Sds Scores	Before and after Treatme	nt of Two Groups
	Time	CDC	CAC

Group	Time	SDS	SAS
Study Group	Before Nursing	58.70±8.66	63.35±5.74
	After Nursing	46.37±5.70	52.35±4.65
Control Group	Before Nursing	57.54±7.70	62.37±5.88
	After Nursing	38.26±4.58	40.26±3.22

3.2 Compare Patients' Mastery of Health Knowledge of Two Groups

The score of health knowledge mastery in the study group was (92.6 + 3.7) and that in the control group was (72.6 + 2.9), with statistical significance (P < 0.05).

3.3 Compare Patients' Nursing Satisfaction of Two Groups

After nursing, the satisfaction of the study group was better than that of the control group. The comparison results had statistical significance (P < 0.05), referring to Table 2 for details.

Table 2 Comparisons of Nursing Satisfaction of Two Groups [n (%)]

Group	Very Satisfied	Satisfied	Not Satisfied	Satisfaction Degree
Study Group(n=60)	48(80.00%)	9(15.00%)	23(5.00%)	57(95.00%)
Control Group(n=60)	35(58.33%)	13(21.67%)	12(20.00%)	48(80.00%)

4. Discussion

According to the clinical nursing practice of patients with gastric diseases, some patients have serious fear of gastroscopy. While gastropathy itself also affects the physical and mental health of patients. The psychological pressure of patients with gastropathy will increase, which will affect their treatment and rehabilitation. Based on this, in order to improve patients' activity for gastroscopy and their compliance with treatment, psychological nursing intervention has become an effective nursing path for patients with gastric diseases. Nursing staff through daily psychological counseling, establish a harmonious relationship with patients, and give patients humanistic care and other ways, so that patients will not only more trust in medical staff, but also more fully cooperate with the treatment and nursing work [4].

In this study, 120 patients with gastric diseases admitted to our hospital from January 2018 to January 2019 were selected as the research objects. According to the ratio of 1:1, the above patients were divided into the study group and the control group. The control group was treated with routine nursing mode. On this basis, the study group was treated with psychological nursing intervention methods. The SAS/ SDS scores, mastery of health knowledge and nursing satisfaction of the two groups were compared and analyzed. Results: After nursing, the SAS and SDS scores of both groups decreased, but the SAS and SDS scores of the study group decreased more significantly than those of the control group (P < 0.05). The health knowledge mastery score of the study group was (92.6 +3.7) and that of the control group was (72.6). After nursing, the nursing satisfaction of the study group was better than that of the control group. The comparison results had statistical significance (P < 0.05).

5. Conclusion

To sum up, psychological nursing mode occupies an important position in modern nursing work, emphasizing the attention and adjustment of patients' emotional changes and psychological state, which is conducive to alleviating the psychological pressure of clinical patients, and is an effective way to help the treatment of diseases. The application of psychological nursing intervention mode to the treatment of patients with gastric diseases can effectively improve the psychological state of patients, improve the cognitive level of patients' health knowledge and patients' satisfaction, so it is worthy of clinical application. As nurses, they should actively carry out nursing work for patients. In addition to necessary psychological nursing intervention, they are also required to strengthen intervention in life care and diet, such as warming work, appropriate increase and decrease of clothing, medication guidance, reduction of staying up late, development of good exercise habits, rest and diet habits, enhancement of immunity and acoidance of cold, spicy, spicy and other stimulating foods and so on... Psychological nursing is the key nursing method to relieve patients' psychological pressure, help patients recover and improve the quality of life of gastric diseases.

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