

## Correlation Study of Rehabilitation Effect of Different Acupuncture Stimulation Therapy on Mental Patients

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**Abstract:** Objective: to explore the rehabilitation effect of different acupuncture stimulation therapy for psychiatric patients. Methods: In the period of one year from January 2019 to December 2019, 126 patients with psychiatric diseases were selected, and 42 cases were randomly selected by digital method, which were set at A, B and C groups. the therapeutic efficacy, quality of life, adverse reactions, and bprs scores of the three groups were compared. Results: There was no significant difference in the therapeutic effect in the three groups ( $P > 0.05$ ), no significant difference in adverse reactions in the three groups ( $P > 0.05$ ), no significant difference in BPRS scores in the three groups ( $P > 0.05$ ), and no significant difference in quality of life in the three groups ( $P > 0.05$ ). Conclusion: the effect of the three methods of acupuncture stimulation therapy in the treatment of psychiatric diseases is better, the bprs score after treatment has low adverse reaction, high safety, and the quality of life of the patients are higher, the rehabilitation effect is better, so it has the value of clinical application.

### 1. Introduction

Mental illness refers to the disorder of brain function due to various biological, psychological and social factors, resulting in cognitive, mental, emotional, will and behavioral disorders of different degrees of mental activity as clinical manifestations[1]. Usually divided into mild mental illness and severe mental illness. Mild mental disorders include neurasthenia, anxiety disorder, depressive neurosis, obsessive-compulsive disorder, phobia, hysteria, hypochondriasis, insomnia, personality disorder, sexual psychosis, indications disorder, psychosomatic disorders, behavioral problems (e.g. gambling), etc. Serious mental disorders include schizophrenia, paranoid mental disorders, affective psychosis, psychosis due to psychosis, etc.[2] For mental illness clinical use of Western medicine treatment methods, but Western medicine more adverse reactions, traditional Chinese medicine treatment is a characteristic of our treatment, acupuncture is a traditional Chinese medicine treatment, is a combination of acupuncture and moxibustion. Acupuncture is commonly used in ancient China to treat various diseases. This study explores the rehabilitation effect of using different acupuncture stimulation therapy for psychiatric patients from January 2019 to December 2019.

### 2. General Information

#### 2.1. Basic Information

In the period from January 2019 to December 2019, 126 patients with psychiatric disorders were randomly selected for 42 cases, group A, B and C, group A, 24 men, 18 women, age 25-60 years,

mean age (38.59±9.52), neurosis ,15 schizophrenia ,6 affective psychosis ,2 drug - dependent, group B ,23 men ,19 women, age 25-60 years, mean age (39±07). age 81),20 neurosis ,16 schizophrenia ,5 affective psychosis ,1 drug dependence ;21 men in group C ,21 women, aged 25-60, mean age (39.22±9.68),18 neurosis ,17 schizophrenia ,5 affective psychosis, and 2 medication. patients in the three groups had no statistical significance in age, sex, type of disease ( $p > 0.05$ ), all patients signed informed consent, and the ethics committee also approved the experiment, including criteria: all patients met the standard of mental illness and cooperated with this study. Exclusion criteria: malignant tumor, cardiovascular and cerebrovascular diseases, hematopoietic coagulation dysfunction, history of acupuncture allergy, can not cooperate with this research.

## 2.2. Research Methods

A group used conventional acupuncture: the skin of each acupoint was sterilized, pointed at the acupoint quickly into the needle, entered a certain depth, left the needle for 30 minutes, group B used acupoint injection: the patient took the sitting position, disinfected the skin of the acupoint part of the acupoint, put the syringe containing the medicine into the needle, entered a certain depth, injected the medicine, group C used the pricking collaterals to release blood: the person took the position, disinfected the skin of the acupoint part of the acupoint, used the hand-push acupoint, lightly pricked the acupoint, each acupoint pricked 3 points, used the cupping to draw out the blood of the acupoint, and left the pot 10mi. Acupoints selected, the main points for Baihui, Fengchi, Jueque, with points for Shanzhong, interline, arm, Yintang and so on.

## 2.3. Observation Indicators

Comparison of the therapeutic effects of the three groups (significant effect: clinical symptoms disappeared, all psychological, mental scale and other examinations returned to normal, cognitive, behavioral and so on returned to normal, life completely self-care; effective: clinical symptoms significantly alleviated, various psychological, mental scale and other tests significantly improved, cognitive, behavioral and other basic recovery, basic self-care; invalid: clinical symptoms did not change, various psychological, mental scale and other examinations did not improve, cognitive, behavior and other recovery, life self-care)[3]Quality of life The questionnaire included 5 items of sleep, diet, physiological function, psychological function and social function, with a full score of 100 points, the higher the score, the better the quality of life) and the BPRS score (concise mental illness scale) with a total of 18 items with a score of 18~126 points[5]. Adverse reactions (dizziness, headache, nausea and vomiting, abdominal pain, diarrhea, skin allergies).

## 2.4. Statistical Treatment

Using SPSS 21.0 software to process the experimental data, the treatment effect and so on count is expressed by  $n\%$ ,  $\chi^2$  test,  $\bar{x} \pm s$  indicates the quality of life, BPRS score and other measurement methods,  $t$  test,  $P < 0.05$  for the test has statistical difference.

## 3. Results

### 3.1. Comparison of Therapeutic Effects Between the Two Groups

There was no significant difference in the therapeutic effect among the three groups ( $P > 0.05$ ,  $\chi^2 = 0.1558$ ), see Table 1.

Table 1 Comparison of therapeutic effects between the two groups ( $n = 42$ ,  $n\%$ )

Group	Remarkable effects (n,%)	Effective (n,%)	Invalid (n,%)	Total efficiency (n,%)
Group A	10 (23.81%)	28 (66.67%)	4 (9.52%)	38 (90.48%)
Group B	10 (23.81%)	29 (69.05%)	3 (7.14%)	39 (92.86%)
Group C	13 (30.95%)	26 (61.90%)	3 (7.14%)	39 (92.86%)

### 3.2. Comparison of Bprs Scores in Three Groups

There was no significant difference in BPRS scores among the three groups ( $P > 0.05$ ,  $t = 0.6671, 0.3198, 0.3508$ ), as shown in Table 2.

Table 2 Comparison of BPRS scores between the two groups ( $n = 42$ ,  $\bar{x} \pm s$ )

Group	Pre-treatment (sub)	After treatment (sub)
Group A	110.15 $\pm$ 18.43	48.26 $\pm$ 11.42
Group B	112.07 $\pm$ 18.38	49.91 $\pm$ 11.25
Group C	111.54 $\pm$ 19.76	49.05 $\pm$ 11.22

### 3.3. Comparison of Three Groups of Quality of Life

There was no significant difference in quality of life among the three groups ( $P > 0.05$ ,  $t = 1.9137, 1.1594, 0.7438, 1.0745, 0.4238, 0.6488, 1.2360, 1.3258, 0.1188, 1.8349, 1.0341, 0.7804, 0.3624, 0.7350, 0.3601$ ), as shown in Table 3.

Table 3 Comparison of three groups of quality of life ( $n = 42$ ,  $\bar{x} \pm s$ )

Group	Sleep (score)	Diet (sub)	Physiological function (sub)	Psychological function (sub)	Social function (sub)
Group A	82.49 $\pm$ 7.03	85.42 $\pm$ 7.22	83.85 $\pm$ 7.58	82.06 $\pm$ 6.82	81.55 $\pm$ 6.07
Group B	85.43 $\pm$ 7.05	87.12 $\pm$ 7.28	85.84 $\pm$ 7.17	84.71 $\pm$ 6.41	82.04 $\pm$ 6.32
Group C	84.28 $\pm$ 7.12	86.09 $\pm$ 7.27	86.03 $\pm$ 7.49	83.59 $\pm$ 6.74	82.53 $\pm$ 6.15

### 3.4. Comparison of Adverse Reactions in Three Groups

A group of 0 cases (0%), 0 cases of nausea and vomiting (0%), 0 cases of abdominal pain and diarrhea (0%), 1 case of skin allergy (2.38%), 1 case of total incidence (2.38%), 1 case of dizziness and headache (2.38%), 0 case of nausea and vomiting (0%), 0 case of abdominal pain and diarrhea (0%), skin allergy (2.38%), total incidence (4.76%), 1 case of dizziness headache (1.38%), nausea and vomiting (0%), diarrhea of abdominal pain (0%), skin allergy (0%), total incidence (2%). There was no significant difference in adverse reactions among the three groups ( $P > 0.05$ ,  $\chi^2 = 0.3457$ ).

## 4. Discussion

Because of the increasing social pressure and emotional problems, the incidence of mental diseases is getting higher and higher. The common mental diseases are depression, schizophrenia, anxiety disorder and so on. In addition to the common mental diseases, there are also neurosis: anxiety, melancholy, compulsion, suspected diseases, fear, mental fatigue, insomnia and so on as the main clinical table. Schizophrenia: mainly manifested in the lack of coherence and logic of thinking, delusions of absurdity, separation from reality, some expressing few words, poor thinking; emotional apathy, poor coordination; loss of will, isolation and laziness. Emotional psychosis: the main performance is three high: that is, emotional upsurge, thinking run easy, behavior increase, or even hurt people to destroy things; or three low: that is, low mood, slow thinking, will decline, or even negative self. Drug dependence: commonly known as "drug use", after addiction for the drug demons, can not be dialed, the majority of patients for young people, mental decadence after illness, personality become selfish, lose responsibility, good lie. Mental illness will not only cause personal injury, but also harm the family and society, so it needs timely treatment.

Traditional Chinese medicine treatment is the characteristic treatment method in our country, acupuncture and moxibustion is to stimulate acupoints to achieve good therapeutic effect. The acupuncture method is to stab a certain point into the patient's body, using twisting, lifting and other techniques to treat the disease. Moxibustion is the burning moxa according to a certain point burning skin, the use of heat stimulation to treat the disease. For mental diseases, the main principles of acupuncture and moxibustion treatment are to calm the mind, clear the stomach and reduce fire, open the orifices and clear the brain, calm the liver and reduce the liver and fire, soothe

the liver and relieve the depression, replenish the spleen and replenish the qi, calm the mind, and calm the mind and calm the mind. In this study, there was no significant difference in the therapeutic effect of the three methods ( $P > 0.05$ ), no significant difference in adverse reaction between the three methods ( $P > 0.05$ ), no significant difference in BPRS scores after the three methods ( $P > 0.05$ ), and no significant difference in the quality of life of the patients after the three methods ( $P > 0.05$ ). Through the stimulation of Baihui, Fengchi, Juque, Shanzhong, interline, arm, Yintang and other acupoints, in order to achieve the purpose of calming the mind, opening the orifices and clearing the brain, relieving depression, concentrating on the mind, and so on. The routine acupuncture is to stimulate the acupoint directly, the acupoint injection is to inject the treatment drug at the acupoint, the prick collateral bloodletting is to carry on the acupuncture at the acupoint, then use the cupping to carry on the bloodletting, the three methods all have the advantages and disadvantages, therefore the treatment effect is similar, all promotes the patient's rehabilitation.

To sum up, the effect of the three methods of acupuncture stimulation therapy in the treatment of mental diseases is better, the adverse reaction of BPRS score after treatment is low, the safety is high, and the quality of life of the patients is higher and the rehabilitation effect is better, so it has the value of clinical application.

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