

## Exploration on the Effects of the Quality of Life of Patients with Dvt of Lower Limbs Based on Linkage Prevention and Nursing

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**Abstract:** Objective: to Explore the Effects of the Quality of Life of Patients with Dvt of Lower Limbs Based on Linkage Prevention and Nursing, and to Improve the Quality of Nursing Service System after Specific Analysis of the Application Effect, So as to Promote the Orderly Progress of Diagnosis and Treatment, So That the Hospital Also Established a Good Social Image. Methods: 100 Patients Who Received Effective Treatment for Related Diseases in Our Hospital from January 2016 to June 2016 But Formed Deep Venous Thrombosis of Lower Limbs Were Randomly Divided into the Control Group and the Research Group. the Control Group Received Routine Nursing Intervention, and the Research Group Received High-Risk Department Linkage Nursing Intervention. the Nursing Effect of the Two Groups of Patients Was Analyzed, and Their Scores of Psychological Function, Limb Function, Rehabilitation Training and Social Function Were Compared. Results: after a Period of Observation and Comparison, the Study Group Implemented High-Risk Department Linkage Nursing Intervention, Nursing Effect is Significantly Better Than the Control Group of Routine Nursing Intervention; the Comprehensive Score Indexes of Psychological Function, Limb Function, Rehabilitation Training and Social Function in the Study Group Were Higher Than Those in the Control Group. the Nursing Job Satisfaction and Incidence of Adverse Events Were 95.52% (6.49%) in the Study Group, and 73.73% (22.80%) in the Control Group. Conclusion: Conventional Nursing Can Not Meet the Health Needs of More Patients, We Should Strengthen the High-Risk Department Linkage Nursing Intervention, after the Implementation of Quality Nursing Management, to Promote the Improvement of the Quality of Life of Patients with Deep Venous Thrombosis of Lower Limbs. in Addition, by Improving the Quality of Life of Patients, a Harmonious Nurse-Patient Relationship Has Been Formed. on This Basis, the Orderly Promotion of Diagnosis and Treatment is Conducive to the Full Implementation of the Hospital's Health Development Plan.

### 1. Introduction

Deep Venous Thrombosis of Lower Extremity is a Common Disease, Which Refers to the Coagulation of Venous Blood in Deep Venous Vessels of Lower Extremity. the Lower Extremity of the Patient Presents Edema, Dermatitis, Pigmentation, Stagnant Ulcer and Other Symptoms, Which Are Relatively Serious Complications. the Causes of Lower Extremity Deep Vein Thrombosis Are Very Complex and the Incidence Rate is Increasing. According to the Patients' Condition Development, It is Very Important to Provide Them with Effective Rehabilitation Treatment and High-Quality Nursing Services. At This Stage, Can Build High Quality Nursing Mode, the Implementation of High-Risk Departments Linkage Nursing Intervention, to Improve the Quality of Life of Patients with Deep Vein Thrombosis of Lower Limb, This Experiment Made a Specific Research, Specially Want to Work for Other Nursing Personnel Management Ideas of Diverse and Change to Provide Effective Reference and Strength, with the Speeding Up of Promoting the Sustainable Development of Modern Medical and Health Undertakings, the Paper Summarized as Follows:

## **2. Materials and Methods**

### **2.1 General Materials**

A total of 100 patients who received effective treatment for related diseases in our hospital from January 2016 to June 2016 but developed deep venous thrombosis in lower limbs were randomly divided into the control group and the research group with 50 patients in each group. In the control group, there were 18 female patients and 32 male patients, aged between 23 and 75 years, with an average age of  $35.09 \pm 11.46$  years. In the research group, there were 13 female patients and 37 male patients, and the patients were aged 28-80 years, with an average age of  $(37.58 \pm 12.20)$  years.

1) Inclusion Criteria: all 100 patients met the diagnostic criteria of “deep vein thrombosis of lower extremity” and participated in the investigation and research voluntarily. Explain clearly the experiment significance, research purpose, nursing points, common complications, precautions, etc., and sign the informed consent. According to the principle of scientific grouping, no statistical significance was found after grouping except for age, gender and disease condition ( $p > .05$ ).

2) Exclusion Criteria: patients with major diseases, patients with cardiopulmonary insufficiency, patients with malignant tumors, patients with severe drug allergy, patients with mental illness and language dysfunction, and women in pregnancy and lactation were excluded. In addition, patients whose family members did not cooperate with doctors and also intervened in the implementation of the nursing plan were excluded.

### **2.2 Methods**

Patients in the control group were given routine nursing intervention, with rehabilitation treatment, ward inspection, medication guidance, nurse-patient communication and other work, monitoring the changes in patients' vital signs. The research group adheres to the service tenet of “patient-centered”, and carries out coordinated nursing intervention in high-risk departments in the process of implementing high-quality nursing management, as follows:

1) Build a high-risk departments DVT linkage groups, effectively improve the nurses the accuracy of the high risk factors for DVT risk assessment, increase learning opportunities between departments, to improve overall qualities, the nurse sent nursing experience rich, strong sense of responsibility, high level of professional nursing staff, to understand the basic situation of patients, and making reasonable health education plan.

2) Explain clearly the matters needing attention, strengthen communication between nurses and patients, and adopt psychological counseling measures to eliminate patients' anxiety, depression, anxiety and other negative emotions, patiently answer their questions, and strive to reflect the actual value of nursing work.

3) Implement individualized health education plan, should according to the cognitive levels of different patients, patients condition and emotional state, select the most appropriate way of guidance, updating the education content, it is easier to meet the health needs of patients, with the help of a video broadcast, picture display, text introduces forms, such as closing and the distance between the patients with active, let the family trust nursing work, to follow-up plan the efficient implementation of lay a good foundation.

4) Pay more attention to diet management, understand patients' eating habits in personalized health education activities, and provide them with a balanced diet with nutrition. Establish rehabilitation training plan in time, introduce special sports for different patients, pay attention to control time, control difficulty, personalized health guidance with the recovery of patients' motor function.

5) Patients after hospital discharge, told they visit on time, in the form of telephone communication through family follow-up, continue to deepen the personalized health guidance, ensure the patients for the reasons for the formation of lower extremity deep vein thrombosis and thrombolysis knowledge, health problems, such as rehabilitation exercise all have correct understanding, actively explore other ways, further improve the high quality nursing intervention, the effect of individualized health education.

### 2.3 Effect Observation

The treatment and rehabilitation of the two groups of patients were observed, and the nursing effect was compared with the scores of psychological function, limb function, rehabilitation training and social function, and then the nursing satisfaction and incidence of complications of the patients were calculated by questionnaire.

### 2.4 Statistical Analysis

Professional statistical software SPSS 20.0 was used to process all kinds of data and information. The table data were presented as mean standard deviation and tested with  $\chi^2$ .

## 3. Results

### 3.1 Patients in the Control Group and the Research Group Respectively Implemented Different Nursing Intervention Methods, and the Nursing Effect Was Compared, as Shown in Table 1:

Table 1 Comparison of Nursing Effect between the Two Groups

group	n	excellent	effective	noneffective	effective rate
the control group	50	24 (47.80%)	12 (24.19%)	14 (28.01%)	36 (71.99%)
the research group	50	35 (69.81%)	10 (20.22%)	5 (9.97%)	45 (90.03%)
$\chi^2$		11.006	6.510	10.308	10.794
p		<0.05	<0.05	<0.05	<0.05

### 3.2 Analysis of comprehensive scoring indexes of psychological function, limb function, rehabilitation training and social function of patients in the control group and the research group, as shown in table 2:

Table 2 Comprehensive Quality Of Life Score Indicators of Patients in the Two Groups

group	n	psychological	psychological	rehabilitation training	social function	comprehensive scoring
the control group	50	47.22±8.40	42.80±7.74	49.88±8.89	42.16±7.05	43.55±8.21
the research group	50	64.39±10.97	59.73±9.91	62.50±10.02	63.99±10.17	57.64±9.60
$\chi^2$		5.991	5.076	5.589	5.175	4.355
p		<0.05	<0.05	<0.05	<0.05	<0.05

### 3.3 Survey on Nursing Satisfaction of Patients in the Control Group and the Research Group, as Shown in Table 3:

Table 3 Two Groups Of Patients Nursing Job Satisfaction Survey

group	n	great satisfaction	general satisfaction	dissatisfaction	the satisfaction rate
the control group	50	20 (39.94%)	17 (33.79%)	13 (26.27%)	37 (73.73%)
the research group	50	33 (66.11%)	15 (29.41%)	2 (4.48%)	48 (95.52%)
$\chi^2$		10.418	7.345	9.866	9.919
p		<0.05	<0.05	<0.05	<0.05

### 3.4 Incidence Statistics of Adverse Events in Rehabilitation Nursing of Patients in the Control Group and the Research Group, as Shown in Table 4:

Table 4 Incidence of Adverse Events in the Two Groups

group	n	communication issues	nurse-patient conflict	medical disputes	Incidence rate
the control group	50	6 (12.25%)	3 (5.94%)	2 (4.61%)	11 (22.80%)
the research group	50	2 (3.99%)	1 (2.50%)	0 (0.00%)	3 (6.49%)
$\chi^2$		3.907	3.245	3.112	4.288
p		<0.05	<0.05	<0.05	<0.05

## 4. Discussion

Linkage prevention and nursing in high-risk departments requires nursing personnel to combine the psychological and physiological characteristics of patients, consider their ability to adapt to the strong and weak, to carry out high-quality nursing management with clear objectives, so as to promote the recovery of patients, build harmonious nurse-patient relationship, and constantly optimize the nursing effect. Linkage prevention and nursing in high-risk departments should deeply understand the service tenet of “patient-centered”, guide patients to restrain their self-behaviors, develop good eating habits, hygiene habits, sports habits, etc., and actively face a better life, with higher and higher quality of life. By strengthening the quality of nursing service, the effective implementation of high-risk departments linkage nursing and intervention, the condition of lower extremity deep vein thrombosis patients improved, their positive, active to participate in the activities of health education, under the guarantee of the harmonious relationship between nurses and patients, the diagnosis and properly solve problem, ultimately affect the psychological function, physical function, rehabilitation training, social function and so on comprehensive score index changes, diagnosis and treatment work orderly, modern medical and health cause the speeding up of long-term planning, sustainable development is.

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