



TREATMENT OF POSTOPERATIVE PAIN IN PATIENTS WITH ANORECTAL DISEASE BY CHINESE HERBAL ACUPOINT PRESSING METHOD

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ABSTRACT

Objective: To observe the clinical effect of traditional Chinese medicine auricular acupoint pressing method on relieving postoperative pain in patients with anorectal surgery. **Methods:** The clinical data of 56 patients with anorectal disease who underwent anorectal surgery from January 2016 to June 2016 were retrospectively analyzed. Our hospital according to the random number table method to these 56 patients were divided into control group and observation group, each group had 28 patients. Our hospital on the control group of patients with routine care, the observation group of patients on the basis of routine care on the basis of traditional Chinese medicine auricular pressure to prevent or alleviate postoperative incision pain care, and then compare the two groups of patients with nursing effect. **Results:** The VAS scores of the two groups were significantly lower than those of the control group on the 2nd day, the 4th day and the 6th day after the treatment group ($P < 0.05$), which was statistically significant. **Conclusion:** The clinical effect of traditional Chinese medicine care after anorectal surgery is effective, which can effectively relieve the pain of postoperative incision. This method is worthy of clinical application.

1. INTRODUCTION

Anorectal disease is a common surgical disease, surgery is one of the main treatment. And the patient after the occurrence of pain, infection and other complications seriously affect the patient's sleep. With the change of medical model, the subjectivity of pain has been paid more and more attention. World Health Organization defines pain as an unpleasant feeling and emotional experience caused by tissue damage or potential tissue damage. The 2001 Asia-Pacific Pain Forum suggests that the elimination of pain is a fundamental right of the patient [1]. In 2002, the Tenth International Congress of Pain Society pointed out that if the initial stage of pain is not effectively controlled, can cause pathological remodeling of the central nervous system, acute pain may develop difficult to control chronic pain, thus affecting the patient's physical and social function, Hospitalization time, increase medical expenses, affect the normal life of patients and social activities [2]. Therefore, the developed countries will be pain control satisfaction as an important criterion for assessing the quality of medical care. Chinese medicine auricular pressure method can effectively prevent or alleviate postoperative complications, improve the quality of rehabilitation of patients. The auricular meridian and the body meridian communication, and with the internal organs are closely related to stimulate the ear can cause the corresponding meridian pass, regulate the function of the function of the auricle is very rich, is the ear and viscera, limb contact important way to stimulate the ear Profile corresponding to the site, can block the pathological transmission of neurons, resulting in disease or reduce or disappear. Acupuncture points on the viscera function has a regulatory role, the cortex under the hole to fill the brain, to regulate the excitement and inhibition of the cerebral cortex, the son of the celestial cavity, Ren Zi Gan Ping quality Run, functional Yang Xin Anshen, laxative, both to strengthen the analgesic effect [3]. Chinese and Western medicine combined care is to learn the essence of traditional Chinese medicine, Western medicine research, the use of modern scientific knowledge and combined with traditional Chinese medicine auricular pressure method theory and methods to enhance and maintain a healthy nursing process.

Auricular acupressure method referred to as ear pressure method, refers to the surface of the ear with a fixed tape paste a method of pressure. This method is simple, less costly, and safe no adverse reactions, wide indications, work quickly. Application of this method can play a sustained stimulating effect (because the patient can be insured at regular intervals to stimulate). The use of ear acupuncture treatment of disease, as early as two thousand years ago, "Lingshu Jue disease" in the record: "Jue headache, headache, even before and after the ear pulse heat, diarrhea out of the blood, "" Lingshu five evil "section of the cloud:" evil in the liver, then the two pain in the pain to take the intercourse between the green veins to go. History of the literature have a lot of introduction to stimulate the ear method to treat the disease, Through the eyes of ear acupuncture points to diagnose the disease records, indicating that China's use of ear to the diagnosis and treatment of disease has a long history, in recent years, ear pressure therapy has a great development, it is not only in the country to promote the use, and has been spread abroad [4]. In recent years, the application of ear pressure pressure Wang row of seed treatment of palpitations, chest pain, increasing reports. Specific steps of operation, first in the ear to find the first positive point, combined with clinical symptoms of syndrome differentiation, selection points. Then the ear with 75% alcohol disinfection, left hand care ear, right hand with some hemostatic forceps will sticky drug seed tape removed, aligned acupressure. After pressing, with your fingers light pressure points 1 to 2 minutes. Each election 3 to 5 points, if necessary, take double ear points for pressure. Every 3 to 5 days for 1 times, 5 times for a course of treatment, each treatment rest 1 week [5]. Beans can choose rapeseed, millet, mung bean, radish seed, the king does not stay seed, white mustard and so on. Common selection points:

(1) According to experience acupoints. Shenmen points sedative, soothe the nerves, anti-inflammatory, analgesic. Clinical practice shows that Shenmen acupuncture analgesic effect is good, for the treatment of pain must choose points.

(2) According to the function of attending acupoints. Sympathetic acupoints can regulate autonomic nerve function, for autonomic nervous system dysfunction; can relieve visceral smooth muscle spasm, analgesic effect on the viscera.

(3) To acupoints according to the disease site. Rectum, month door heat swelling, anti-inflammatory pain, the corresponding damage to the door parts of the month, so the selection of the two points.

(4) According to clinical studies. Many physicians in the clinical observation of pain in the corresponding parts of the ear can appear in the pain response point, select the corresponding part of the site, is the key to the treatment of pain syndrome.

Which ear acupuncture points position shown in Figure 1.

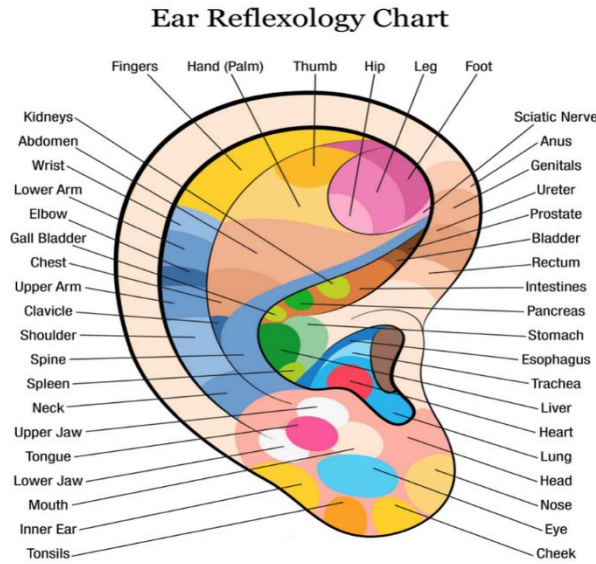


Figure 1: Ear reflexology chart

2. MATERIALS AND METHODS

2.1 Normal information

A total of 54 patients with anorectal disease who underwent anorectal surgery from January to June in 2016 were enrolled in this study. Fifty-six patients were enrolled in this study, 28 of the experimental group and 28 patients in the control group. Aged 31 years old -38 years (38. 15 years ± 12.9 years old); 31 males and 25 females; 78 males and 12 ethnic minorities; among the two groups, there was no significant difference in gender and age (P > 0.05), see Table 1.

Table 1: Comparison of two cases of general data

Group	Number of cases	Gender		Average age
		Male	Female	
Test group	28	16	12	39.82
Control group	28	15	13	36.41
P		0.786		0.863

Table 1 results showed that the two groups of patient's sexes, age, by statistical tests, no significant difference (P > 0.05), comparable.

2.2 Method

Methods of the patients in the control group were routinely treated in our hospital. The specific method was to observe the vital signs of the patients closely, including observing whether the patients had bleeding at the incision of the operation, whether the perianum had inflammation, Whether the tumor out of the tumor, the defecation is smooth and whether there is difficulty in urinating. Once the patient is found to have the above-mentioned abnormality, the caregiver should immediately inform the attending physician and assist the attending physician in the treatment. Nurses also asked the patient to rest, eat light digestible food, eat spicy and irritating food. In addition, the nursing staff also on the patient psychological care, medication guidance and so on.

Methods of care for patients in the observation group In our hospital, the patients in the observation group were treated with traditional care on the basis of routine nursing. The method of Chinese medicine care is: to carry out auricular acupressure care: nurses to guide the patient to take the prone position, according to the doctor's choice of acupuncture points, the use of workers without row of seeds on the ears of the

corresponding points of the opposing pressure, Times, each press 3-5min for surgical incision pain in patients with severe, nursing staff may be appropriate to increase the intensity of the press of the ear.

2.3 Evaluation index

Our patients were evaluated by visual analogue scale (VAS score). The pain of the two groups was evaluated at 6h, 2d postoperatively, postoperative day 1 and postoperative day 6. VAS score of 1-10 points, the higher the score the patient said the stronger the pain. Pain Rating A straight line score of 10 was scored using a visual analogue scale (VAS), and the degree of pain was expressed with 0-10 points. 0 divided into painless, 10 divided into pain, 1-3 divided into mild pain, 4-6 divided into moderate pain, 7-9 divided into severe pain. Let the patient according to their own degree of pain in a straight line on the location, the scale is the patient's pain score.

2.4 Statistical method

Using SPSS18.0. The data were processed by the software. The measurement data were expressed as the mean and negative standard deviation (x ± s) of the mean, and the difference was significant with the X2 test, P < 0.05, Statistically significant.

2.5 Equations

The VAS scores of the two groups were significantly lower than those of the control group at the 2nd day, the 1st day and the 6th day after the treatment group (P < 0.05). The statistical significance was statistically significant. There was no significant difference in VAS scores between the two groups (P > 0.05). There was no significant difference between the two groups (Table 2).

Table 2: Experimental group and control group after surgery the degree of pain comparison

Group	Number of cases	Painless	Mild pain	Moderate pain	Severe pain
Test group	28	2	16	8	2
Control group	28	0	6	18	4

Table 2 shows that the experimental group in patients with postoperative pain is better than the control group, the statistical test p = 0. 035 (P < 0.005), a statistically significant.

3. CONCLUSIONS

Postoperative pain on the body's dangers cannot be ignored, causing a series of pathophysiological changes in the body, induced underlying diseases and complications of attack, so full and effective perioperative pain care has an extremely important clinical significance is to improve Postoperative safety factor, and the necessary measures to promote postoperative rehabilitation. The current perioperative painless concept is widely accepted. The so-called perioperative painless care is the painless principle, the medical care of patients with medical and nursing work, as much as possible to reduce the suffering of patients. In this study, the patients were treated with traditional Chinese medicine and western medicine combined with painless nursing care. The results showed that the pain in the painless group was significantly lower than that in the conventional nursing group, and the postoperative quality of life was improved. The postoperative rehabilitation was improved, the hospitalization days were shortened, and the nursing satisfaction was improved.

The patient's ear acupressure is through the role of the patient's ear in the different reaction points, in order to achieve anti-inflammatory, analgesic, antispasmodic purpose. The patient's treatment is based on the patient's physical care to guide their reasonable arrangements for meals, thereby increasing the resistance of the body to help them as soon as possible to restore health. In the study of wood, our hospital in the control group of patients with routine care, the observation group of patients in the routine care on the basis of traditional Chinese medicine care. The results showed that the VAS score of the observation group was significantly lower than that of the control group on the 2nd day, the 1st day and the 6th day after the operation (P < 0.05), which was statistically significant. This is consistent with the research results of Lu Ying and others. In summary, the anorectal surgery patients after the clinical effect of Chinese medicine significantly, can effectively alleviate

the pain after surgery incision. This method is worthy of clinical application.

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