Survey of the Continuing Care Needs of Patients after Heart Valve Surgery

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Abstract: This paper is to investigate the needs for extended care of patients after heart valve surgery.A total of 80 patients with heart valve surgery were selected to participate in this study, and then they were divided into groups (routine group and experimental group). The conventional group and the experimental group were treated with routine nursing and extended nursing respectively to analyze and compare the effect. The ADL scale scores of the two groups were compared. The scores of the conventional group before and after treatment were 10.24±1.24 points and 21.30±2.25 points, respectively, while the scores of the experimental group after treatment were 24.09±1.29 points, and the situation of the experimental group was relatively better (p < 0.05). Through the analysis and comparison of the complications of the two groups. the complications of the observation group were lower than those of the conventional group, and there was a certain difference between the two groups (p < 0.05). The overall situation is good, and it can improve the quality of life and reduce the occurrence of complications.

Keywords: Heart Valve Surgery; Extended Care; Needs; Condition

1. Introduction

Heart valve is located in the artery, between the ventricles, if there is abnormal heart valve will affect the heart function, the main surgical treatment of heart valve, the study pointed out that in the treatment process to take effective nursing intervention can promote recovery. In terms of artificial valve replacement for patients with heart disease, the corresponding quality of life and nursing care can be improved, and the effect is good ^[1]. In the prevention of chronic diseases, through strengthening disease awareness, because of the overall risk and trauma of heart valve surgery, it directly affects the postoperative quality. By using the mode of knowledge, belief and action to do a good job of corresponding nursing, do a good job of effect comparison. The overall risk is higher after heart valve surgery, and it has a certain effect in improving the prognosis of the disease. The content of routine heart valve replacement education is simple, and oral indoctrination is generally used, and the health knowledge is not enough to fully reflect the health education method. Zhixinxing health education model can improve the quality of life while regulating bad life behavior by strengthening health education. This paper investigates the status quo of extended nursing care for patients after heart valve surgery, as follows:

2. Data and Methods

2.1 General Information

A total of 80 patients with heart valve surgery who participated in this study were selected and then divided into groups (routine group and experimental group). The number of patients in the routine group and the experimental group were 40, respectively, and the patients were 25-70 years old and 26-71 years old. Exclusion criteria: First, patients with diabetes and gastrointestinal ulcers were excluded before operation. Second, people with mental illness. By comparing the two groups of patients, there was no significant difference.

2.2 Methods

The routine group adopted the routine nursing mode.

The observation group formed a continuing care group. First, form a continuing care team. Through strengthening theoretical learning, clarifying teaching content and related knowledge of heart valves, doing health education work well and improving the effect

of emotional care^[2]. Third, health knowledge education. By assessing the patient's educational level and acceptance of health knowledge, the health knowledge of heart valve surgery patients was distributed, self-care knowledge including and postoperative precautions. Play health education videos through multimedia, explain surgical treatment knowledge, and self-care twice a week. Fourth, establish faith in health education. By inviting doctors to explain the relevant rehabilitation beliefs and explaining the precautions of surgery through clinical treatment, the belief of patients can be enhanced during corresponding psychological assessment. In addition, music can also be used to break the depressed mood in the ward. Heart valve surgery requires lifelong use of anticoagulant drugs, as prescribed, to see if there are any side effects. Fifth, regulate patient behavior. The patients had anxiety and depression, the overall postoperative recovery was poor, and the postoperative treatment effect was poor. For the nursing staff should breathe correctly, control the breathing rate, and generally train 3 times each time. Preoperative dietary management was carried out for patients, and dietary management was done according to the actual situation of patients. Part of the lack of movement awareness of patients, easy to endanger the safety of patients. Therefore, for heart valve surgery, strictly control the amount of exercise and increase the intensity of exercise. Avoid heavy physical labor within 1 year after surgery to avoid trauma and other accidents. By effectively preventing infection, prevent bacteria from entering the bloodstream. The nursing plan includes the amount of food intake, the number of meals and the dosage of medicine, and the related exercise is carried out according to the adverse reactions of drugs, and the principle of gradual and orderly sports is adopted. Sixth, diet management. Nursing staff should prepare dietary formulations, which will have a certain impact on patients who lack exercise awareness and exercise intensity. Avoid heavy physical work by strictly controlling the amount of exercise. After heart valve surgery, infection, including periodontitis and trauma infection, should be effectively prevented to avoid affecting the mobility of artificial valve ^[3].

2.3 Observation Indicators

ADL scale (full score is 30 points, the higher the score, the better the effect); Analysis and comparison of complications.

2.4 Indicator Processing

The selected software type is SPSS statistical package, specifically version 22.0, and the objects processed by T-value method are the measurement indicators. If the similar indicators show P < 0.05 before and after the intervention, the statistical purpose will be achieved.

3. Results

ADL scale score was compared between the two groups. Before and after treatment, the scores of patients in the conventional group were 10.24 ± 1.24 points and 21.30 ± 2.25 points, respectively, while the scores of patients in the experimental group were 24.09 ± 1.29 points after treatment, and the situation of patients in the experimental group was relatively better (p < 0.05).

group	pre-treatment	post-treatment
Conventional group	10.24 ± 1.24	21.30±2.25
Experimental group	$11.03{\pm}1.03$	24.09±1.29
t	0.352	6.025
Р	0.856	0.000

Table	1.Com	parison	of ADL	Scale	Scores	between	Two Groups
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Through the analysis and comparison of the complications of the two groups, the complications of the observation group were lower than the conventional group, and these had certain differences (p<0.05).

complication
6 (15.00)
1 (2.50)
6

t

10.350

P 0.000

4. Discussion

The incidence of valvular heart disease is on the rise, and about 90% of patients need surgical treatment to promote the continuation of the disease. According to relevant literature, artificial valve since implantation can effectively activate coagulation factors and form thrombosis after surgery, anticoagulant drugs are generally required after surgery to prevent complications. However, due to the lack of intervention by medical staff after discharge, most patients directly affect their medication compliance, so they can avoid corresponding complications by carrying out extended care. Risk is high during heart valve replacement procedures, due to changes in cardiac function before surgical treatment, changes in the postoperative environment, surgical and anesthesia measures can affect the infusion. Since the heart function is unstable, if effective measures are taken, the stress can be reduced. The lack of understanding of disease after heart valve replacement requires an effective health education model ^[4]. Health education can promote the recovery of heart function. and actively cooperate with postoperative rehabilitation. At the same time, it is better to use written preaching and oral teaching. As a new nursing intervention model, health education can be realized bv strengthening health education, correcting patients' bad behaviors, establishing healing belief and heart valve replacement knowledge ^[5]. Develop good living habits and improve patients' compliance. Compared with the general health education model, various online and offline health education methods are adopted to improve the coverage and efficiency of education. To sum up, education mode for patients with heart valve surgery can provide certain guarantees for patients when improving their bad behaviors, and has good effects while regulating patients' psychological condition and compliance. At present, the continuous nursing of heart valve replacement should strengthen health education while also providing treatment for complications, and the overall effect is good when promoting follow-up and treatment of patients^[6].

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