

Intervention Effects of Traditional Chinese Medicine Emotional Care Combined with Acupoint Massage on Patients with Chronic Ulcerative Colitis: A Study on Its Impact on Psychological and Gastrointestinal Functions

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Introcution. To explore the intervention effect of traditional Chinese medicine emotional nursing combined with acupoint massage on patients with chronic ulcerative colitis and its impact on psychological and gastrointestinal function. **Methods.** 98 patients with chronic ulcerative colitis from May 2020 to May 2023 were selected as the study subjects, and were divided into two groups using envelope method, with 49 cases in each group. The control group received routine care, while the observation group received a combination of traditional Chinese medicine emotional care and acupoint massage. Both groups completed 14 days of care, and the psychological, gastrointestinal function, self-care ability, and satisfaction of the two groups were compared.

Results. After 14 days of intervention, psychological fluctuations were reduced and gastrointestinal function was improved in both groups; The SAS, SDS, gut microbiota, and colonoscopy scores of the observation group were lower than those of the control group ($P<0.05$); After 14 days of intervention, the self-care ability of the observation group was higher than that of the control group ($P<0.05$); After 14 days of intervention, the satisfaction of the observation group was higher than that of the control group ($P<0.05$).

Conclusion. The combination of traditional Chinese medicine emotional nursing and acupoint massage has a significant effect on patients with chronic ulcerative colitis, which helps to reduce psychological fluctuations, improve gastrointestinal function and self-care ability, and can achieve high satisfaction. It is worth promoting and applying.

Keywords. Traditional Chinese Medicine Emotional Nursing; Acupoint massage; Chronic

ulcerative colitis; Psychological fluctuations; Gastrointestinal function; Self care ability; Satisfaction

INTRODUCTION

As a chronic, non-specific intestinal inflammatory disease, chronic ulcerative enteritis (UC) often involves the rectum and colon, and is often recurrent. The clinical manifestations are intermittent diarrhea, abdominal pain and tenesmus [1]. Chronic UC is difficult to cure, has a high recurrence rate, and has a high canceration rate with the prolongation of the course of disease, which is closely related to the incidence of colorectal cancer [2]. The pathogenesis of chronic UC is complex, and some patients lack correct understanding and understanding of the disease, resulting in obvious psychological fluctuations of patients, which not only affect the gastrointestinal function of patients, but also increase the difficulty of clinical treatment [3]. As a characteristic nursing intervention of traditional Chinese medicine, acupoint massage can help patients dredging meridians and effectively regulate human qi and blood. Through the process of pressing acupoints, it can promote the increase of neuronal activity at all levels of patients, reduce the pain and discomfort of patients, and better help patients to disperse their attention and reduce their psychological stress response [4]. TCM emotional nursing focuses on patients' psychology. Through professional knowledge and TCM psychological guidance provided by professionals, patients' negative emotions can be improved, glioma can be accepted in a more peaceful state of mind, and the effect of clinical intervention can be consolidated [5]. This study mainly explores the intervention effect of TCM emotional nursing combined with acupoint massage in patients with chronic ulcerative enteritis, which is reported as follows.

1. MATERIALS AND METHODS

1.1 General Information

A total of 98 patients with chronic ulcerative enteritis from May 2020 to May

2023 were selected and divided into two groups by envelope method. There were 49 cases in the control group, including 27 males and 22 females, aged (23-71) years, with an average age of (51.69±4.52) years. The disease duration was (1-8) years, with an average of (4.15±0.63) years. The severity of the disease was moderate in 31 cases and severe in 18 cases. The clinical manifestations included intermittent diarrhea (n = 21), abdominal pain (n = 28) and tenesmus (n = 15). There were 49 cases in the observation group, 31 males and 18 females, aged (26-72) years, with an average age of (53.16±4.63) years. The disease duration was (1-11) years, with an average of (4.21±0.66) years. The severity of the disease was moderate in 28 cases and severe in 21 cases. The clinical manifestations included intermittent diarrhea (n = 19), abdominal pain (n = 27) and tenesmus (n = 17). The study was approved by the hospital ethics committee, and the patients signed the consent form. There was no significant difference in general data between the two groups (P>0.05).

1.2 Inclusion and Exclusion Criteria

Inclusion criteria: (1) All patients were chronic ulcerative enteritis [6]; (2) The most common clinical manifestations were intermittent diarrhea, abdominal pain and tenesmus. (3) The age of the patients ranged from 23 to 73 years. **Exclusion criteria:** (1) patients with intestinal tumors or intestinal perforation; (2) mental disorders, coagulopathy or taking antibiotics in the past month; (3) drug allergy and severe liver and kidney dysfunction.

1.3 Methods

Control group: Routine care was used. Patiently explain the knowledge of chronic UC (including: pathogenesis, clinical manifestations, hazards, prevention and treatment methods, etc.), and answer the questions raised by patients. Create a good hospital environment for patients to improve patient comfort and avoid adverse stimulation; Health education materials were distributed to patients, and successful cases were invited to show up and teach to help patients build confidence [7].

Observation group: Combined with TCM emotional nursing and acupoint massage. (1) Point massage. ① Open the door of heaven. Assist the patient to

maintain the supine position, start from Yintang, upward along the forehead hairline to the sun, and return 3-4 times, cooperate with massage Yintang, Baihui and temple; The five-finger massage was used to press the Sishencong, and finally the three-finger method was used to massage along the bladder meridian to both sides of the big vertebra, 4-5 times back and forth; ② Point Anmian, Shenmen, Xinshu, Neiguan and Fengchi points. The middle fingers of both hands were used to press and knead Anmian acupoint clockwise and counterclockwise (60s is appropriate) and Fengchi acupoint (30s is appropriate), and it is appropriate to have local acid fullness. The thumb of both hands was pressed and kneaded the shu point of the heart for 60 seconds clockwise and counterclockwise. It is appropriate to press Neiguan (PC 6) and Shenmen (HT 7) on the right hand for 60s with the thumb of the left hand, alternately on both sides. 3) Self-massage. The acupoint selection was Shanzhong (CV 17), Taichong (CV 3), Riyue (CV 4), Hegu (CV 4), Shimen (CV 4) and Zhangmen (CV 3). The intensity of stimulation was appropriate to the patients' feeling of acid and fullness, and 60-90 times per minute was appropriate. (2) TCM emotional nursing. ① Persuasion and reasoning. The psychological assessment of patients with chronic UC should be strengthened after admission, and the rules of psychological changes of patients should be understood to formulate targeted adjustment measures. ② Empathy phase system. Actively communicate with patients, good at using a kind, cordial and sincere attitude, to obtain the trust of patients, understand the real thoughts of patients, and enlighten the existing problems; According to the patient's age and personality, the nursing plan was adjusted timely, and soothing music was played in the ward to adjust the patient's psychology and divert the patient's attention. We can choose the method of persuasion, empathy method, suggestion method and satisfaction method for persuasion. ③ Follow your heart. During the nursing process of chronic UC, we should pay close attention to patients' psychological desires, allow patients' reasonable desires, meet patients' needs as much as possible, understand, sympathize and support patients' ideas, and enhance patients' sense of belonging. Both groups completed 14 days of nursing.

1.4 Indicators of observation

(1) Psychological fluctuation and gastrointestinal function; Self-rating anxiety Scale (SAS) and self-rating depression scale (SDS) were used to evaluate the psychology of patients in the two groups before intervention and 14 days after intervention [8]. The gastrointestinal function of patients was evaluated from intestinal flora and colonoscopy score, and the lower the score, the better [9]. (2) self-care ability. Before the intervention and 14 days after the intervention, the Exercise of Self-care Agency Scale (ESCA) was used to evaluate the health knowledge level, self-responsibility, self-concept and self-care skills of the two groups, the higher the score, the better [10]. (3) Satisfaction. After 14 days of intervention, the service attitude, intervention effect, treatment method, treatment prognosis and nurse-patient communication satisfaction were evaluated in the two groups, each of which was 100 points, and ≥ 90 points were considered satisfactory [11].

1.5 Statistical Analysis

SPSS26.0 software was used to process the data. The enumeration data were analyzed by χ^2 test, expressed by n (%), and the measurement data were analyzed by t test, expressed by $(\bar{x} \pm s)$, $P < 0.05$ was statistically significant.

2 RESULTS

2.1 Psychological fluctuation and gastrointestinal function were compared between the two groups

After 14 days of intervention, the psychological fluctuations of the two groups were reduced, and the gastrointestinal function was improved. The scores of SAS, SDS, intestinal flora and colonoscopy in the observation group were lower than those in the control group ($P < 0.05$), as shown in Table 1.

Table 1 Comparison of psychological fluctuations and gastrointestinal function between the two groups

(score, $\bar{x} \pm s$)

Groups	Point of time	SAS	SDS	Gut Microbiota	Colonoscopy score
Observation group (n=49)	Before intervention	55.89 ± 4.53	59.93 ± 5.51	3.24 ± 0.51	3.17 ± 0.46
	After 14 days of intervention	43.67 ± 3.51 ^{#*}	45.43 ± 4.39 ^{#*}	1.56 ± 0.24 ^{#*}	1.21 ± 0.24 ^{#*}
Control group (n=49)	Before intervention	55.91 ± 4.55	59.95 ± 5.54	3.26 ± 0.53	3.19 ± 0.48
	After 14 days of intervention	50.35 ± 4.42 [*]	52.26 ± 4.84 [*]	2.32 ± 0.42 [*]	2.64 ± 0.32 [*]

Compared with the control group, [#]P<0.05; Compared with that before intervention, ^{*}P<0.05

2.2 Self-care ability was compared between the two groups

The self-care ability of the two groups was improved after 14 days of intervention. The health knowledge level, self-responsibility, self-concept and self-care skills of the observation group were higher than those of the control group (P<0.05), as shown in Table 2.

Table 2 Comparison of self-care ability between the two groups (score, $\bar{x} \pm s$)

Groups	Point of time	Health literacy	Sense of self	Sense of self	Self-care skills
Observation group (n=49)	Before intervention	41.49 ± 4.31	13.24 ± 1.98	20.53 ± 2.43	20.51 ± 2.97
	After 14 days of intervention	51.53 ± 5.84 ^{#*}	21.63 ± 2.43 ^{#*}	28.82 ± 4.38 ^{#*}	26.68 ± 3.64 ^{#*}
Control group (n=49)	Before intervention	41.51 ± 4.33	13.26 ± 2.01	20.55 ± 2.45	20.52 ± 3.00
	After 14 days of intervention	45.84 ± 4.72 [*]	17.49 ± 2.13 [*]	24.36 ± 3.62 [*]	23.24 ± 3.32 [*]

Compared with the control group, [#]P<0.05; Compared with that before intervention, ^{*}P<0.05

2.3 The satisfaction of the two groups was compared

The satisfaction of the observation group was higher than that of the control group after 14 days of intervention ($P<0.05$), as shown in Table 3.

Table 3 Comparison of satisfaction between the two groups [n (%)]

Groups	Number of cases	Attitude of service	Effect of intervention	Methods of treatment	Treatment, Prognosis	Nurse-patient communication
Observation group	49	49 (100.00)	47 (95.92)	48 (97.96)	47(95.92)	48 (97.96)
Control group	49	45 (91.84)	41 (83.67)	43 (87.76)	40(81.63)	42 (85.61)
χ^2	/	4.170	4.009	3.846	5.018	4.900
P	/	0.041	0.045	0.049	0.035	0.027

3 DISCUSSION

As a digestive system disease with a high clinical incidence, chronic ulcerative colitis (UC) is characterized by recurrent attacks and great harm. It is clinically characterized by inflammation or ulceration, mostly involving the rectum and distal colon, and in severe cases, the whole colon will be involved. At the same time, due to the lack of correct understanding and understanding of chronic UC, some patients have obvious psychological fluctuations, which affect their gastrointestinal function [12]. In this study, the psychological fluctuations of the two groups were alleviated and the gastrointestinal function was improved after 14 days of intervention. The scores of SAS, SDS, intestinal flora and colonoscopy in the observation group were lower than those in the control group ($P<0.05$). It can be seen from the results that TCM emotional nursing combined with acupoint massage can relieve the bad psychology of patients with chronic UC, help to improve the gastrointestinal function of patients, and facilitate the recovery of patients. Analysis of reasons: Acupoint

massage is a kind of external intervention method of traditional Chinese medicine. According to the characteristics of the disease, the regular pressing of the relevant acupoints is helpful to improve the conduction of meridians and play an analgesic and sedative effect. At the same time, acupressure increases physical contact with patients, which can improve the degree of medical humanistic care, reduce patients' resistance to treatment, and realize the transfer of doctor-patient emotion [13]. In this study, the commonly used acupoints for acupoint massage include Anmian, Shenmen, Xinchu, Neiguan, Fengchi, Danzhong, Taichong, Riyue, Hegu, Zhimen and Zhangmen, etc. Among them, sleep can play a sedative effect; Shenmen has the effect of calming and calming the mind and clearing the heart and regulating qi. Xinchu can regulate qi and blood and calm the mind. Neiguan (PC 6) has the functions of relieving pain, broadening the chest and regulating qi, calming the mind and calming the mind. Fengchi acupoint can clear the head and brighten the eyes, dispel wind and detoxify. Danzhong has the effect of regulating qi, relieving pain and promoting qi and relieving depression; Taichong can play the role of flattening the liver, extinguishing the wind, dredging the collaterals and relieving pain. Riyue has the effect of soothing the liver and promoting the gallbladder and invigorating the spleen. Hegu can play the role of clearing heat and relieving surface, dredging collaterals and relieving pain. Zhimen has the functions of soothing the liver and invigorating the spleen, regulating qi and promoting blood circulation. Zhangmen has the function of stomach and gallbladder; All kinds of herbs play together, which has the effect of dredging meridians, promoting lung ventilation and opening the orifice, promoting local blood circulation, and playing the effect of anti-inflammation and pain relief.

Emotional disorder plays an important role in the pathogenesis of chronic UC. Due to the patient's emotional disorder, it leads to liver loss and weak temper [14]. At the same time, for patients with emotional disorders, worry and anger, resulting in stagnation of fire, loss in dispersion, cross spleen and stomach, leading to spleen and stomach discord, abnormal transportation, thus causing diarrhea. In this study, the health knowledge level, self-responsibility, self-concept and self-care skills of the

observation group were higher than those of the control group 14 days after intervention ($P<0.05$). The satisfaction of the observation group was higher than that of the control group after 14 days of intervention ($P<0.05$). According to the results, TCM emotional nursing combined with acupoint massage can improve the self-management level of patients with chronic UC and obtain higher satisfaction. Analysis of the reasons: the implementation of TCM emotional nursing can affect and improve patients' emotions through language, posture, expression, behavior and temperament, relieve patients' concerns and worries, enhance confidence in overcoming the disease, eliminate patients' pain, bad emotions and behaviors, and play the advantages of different intervention methods with acupoint massage, and most patients can benefit from it [15].

In summary, TCM emotional nursing combined with acupoint massage has a significant effect in patients with chronic UC, which can help to reduce the patient's psychology, improve gastrointestinal function and self-care ability, and obtain higher satisfaction, which is worthy of promotion and application.

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