Study of effect on solution-focused approach in improving the negative emotion of surgical patients in department of vascular surgery

Yan Zhai[1] and Yanyan Zhu[2]*

[1]Health Management Division of Weifang City People's Hospital, Shandong Province, China
[2]one ward Spine Surgery Medical Center of Weifang City People's Hospital**,** Shandong Province, China

Abstract: To study of effect on solution-focused approach in improving the negative emotion of surgical patients in department of vascular surgery.120 patients treated with vascular surgery in our hospital from January 2014 to December 2015 were selected as research object, and they were randomly divided into control group and observation group with 60 cases in each group according to the random number table, the control group were given to routine nursing and psychological guidance, the observation group were given to solution-focused approach, then the POMS score and SCL-90 score of two groups before and after the intervention at first and second week were compared. Results The factors score of POMS score and SCL-90 score of observation group after the intervention at first and second week were all better than those of control group, all the factor score of two groups after the intervention at first and second week were compared, there were all significant differences (all P 0.05). The effect on solution-focused approach in improving the negative emotion of surgical patients in department of vascular surgery is better and it plays an active role in improving the psychological state of patients.

Keywords: Solution-focused approach; department of vascular surgery; surgical patients; negative emotion; effect.

INTRODUCTION

Surgery is one of the most commonly used treatment to treat disease clinically (Hickey *et al*, 2014), and has the characteristics of rapid, efficient and pertinence (Battaglia *et al*, 2013), In clinic, this is common method for a doctor to treat patients with, but high surgical treatment, at the same time, are risks (Mestres *et al*, 2014), up to now, it is inadequacilly to put an end to the clinical risk of accident (Hickey *et al*., 2014) For the patients who is undergoing surgery, occasionally, because of disease, surgical treatment, operation risk and the influence of other factors, There is a certain degree of negative emotions more among patients with Vascular surgery, and in a variety of adverse psychological aspects, such as anxiety, depression, fear, and so on .the variety of emotions are associated with certain clinical negative performance, such as loss of appetite, spirit, weakness and lose of immunity (Beckmann *et al*, 2015), And this kind of mood for operation security and rehabilitation are very bad in the later recover. the clinical data statistics show that in patients with vascular surgery such problems are very common, thus relieve patients with this condition should also be a key aspect of vascular surgery nursing (Vahanian *et al*, 2012).

In order to more fully understand the characteristics of psychological anxiety in patients undergoing vascular surgery, adopt more effective and safer care measures, in this article we will focus on solving model in improving vascular surgery patients to look at the effects of negative emotions.

**Corresponding author:* e-mail: yanyanzhuwf@sina.com

MATERIALS AND METHODS

Patients

Our study randomly recruited 81 male patients (33-65 year old) and 39 female patients (32-62 year old) who get medical treatment in Department of Weifang people's Hospital from January 2014 to December 2015, who meet the vascular surgery diagnostic criteria. And is Going to get vascular surgery. These patients shall be well-distributed in the provinces according to the population density and only one case of each family could be involved. The study was approved by the Hospital Scientific Committee Weifang people's Hospital and written informed consent was obtained from all patients included in the study.

Inclusive criteria

The main research object of this study was the patients undergoing vascular surgery of the vascular surgery departments of Weifang people's Hospital including lower extremity varicose veins, hemangioma, lower extremity deep vein thrombosis and other diseases caused by vascular disease. Clinically, the main treatment method of the disease is vascular surgery. According to all the research object, including a total of 59 cases of lower limb varices, a total of 25 cases of Hemangioma, a total of 29 cases lower extremity deep vein thrombosis, 7 cases of patients with other conditions.

Grouping

Selected from January 2014 to December 2014, 120 patients who underwent vascular surgery as the research object, in accordance with the principle of random

grouping, according to random number table method it can be divided into control group and observation group, each group of 60 cases. In the control group, 41 cases of male, 19 cases of female. 32~65 years old, average (51.1±3.5), 30 cases of lower limb varicose veins, hemangioma 12 cases, 15 cases of deep vein thrombosis of lower limb, other 3 cases. Cultural degree: 31 cases of college degree and above, 12 cases of high school, technical secondary school 8 cases, 9 cases of junior high school, in the observation group, 40 cases of male, 20 cases of female; 31-66 years old, average (52.8±5.8), The lower limb vein 29 cases, 13 cases of hemangioma, 14 cases of deep vein thrombosis of lower limb, other 4 cases; Cultural degree: 32 cases of college degree and above, 11 cases of high school, 9 cases of technical secondary school, 8 cases of junior high school, After spss19.0 statistical analysis, two groups of patients in age, sex, disease types and degree of cultural comparison, there was no statistically significant difference (P>0.05), The experimental group and control group is comparable (table 1)

Method

Control group patients were given routine nursing mode and procedure of nursing, according to the type and the location of a disease, severity and treatment of the choice of surgical nursing, etc, including basic nursing, treatment with nursing and psychological care and so on, which are several big aspects. Every aspect of the many small details according to the conventional nursing process in order to implement, pay attention to the special case of each patient's nursing process and the details of the firm, Observation group focused on solving model is adopted to care, first of all, according to the situation of each of the comprehensive and personalized characteristic identify key nursing problems. On the basis of full surface care for the key issues of predictive nursing procedure and solves the nursing method of drawing, Nursing in patients with critical issues including psychological negative emotional problem, in view of the cause of the different causes of negative emotions for each patient, In view of the cause of negative emotions for each patient to evaluate different reasons, and then according to find problems and the cause of nursing for implementation of the solution, Although there are some common feelings such patients, such as depression, anxiety, fear, etc, But the cause of each patient is different, There are some other individualized should give enough attention and solve the bad emotions, solves scheme still USES the focus to solve the model, Gives more attention after the found problems, focusing on its cause and solution formulation, one by one, give the effective solution. then compare the score of experimental group and control group among POMS scale and SCL-90 scale, on Intervention before and after intervention in 1 week, 2 weeks

Evaluation standard

POMS scale is an effective scale to evaluate patients bad emotional state, And its research is used in Chinese patients with high reliability and validity of scale, This scale includes seven dimensions, respectively, fatigue, tension, anger, depression, energy, panic, and self about emotions, etc, Graded separately for each project, in which the energy associated with self score, the higher the mood of the two aspects, shows that status, the more beautiful, the rest of the options, the greater the score, , the bad mood more obvious (Lacour-Gayet *et al*, 2005), αSCL - 90 scale is more suitable for the patient's mental state assessment scale in China, In this paper, including depression, terror, somatization, force, hostility, interpersonal relationship, anxiety and paranoia in eight aspects, such as evaluation, the evaluation of every aspects integrated scoring formed by a few small problems, the final score are expressed in above 2 points and the psychological assessment program is positive (Bustamante-Munguira *et al*, 2015),

STATISTICAL ANALYSIS

Statistical analysis with SPSS 21.0 was performed. The data should be presented by mean± standard deviation (x ± s); comparison among groups was conducted with independent-test or non-parametric test; enumeration data was tested by chi-square and P<0.05 was regarded as significant.

RESULTS

Two groups of patients before and after intervention in 1 week, 2 weeks of POMS just rating scale more intervention in two groups of patients before POMS just scale of fatigue, tension, anger, or depression, energy, panic, and about the mood of the self rating, there was no statistical difference in learning significance (P>0.05). And intervene in the observation group 1 week and 2 weeks after the energy associated with self mood score higher than the control group, fatigue, tension, anger, depression and panic score is lower than the control group, the difference had statistical significance (P<0.05) (table 2)

Two groups of patients before and after intervention in 1 week, 2 weeks of SCL-90 scale score comparison of intervention in the former two groups of patients with SCL-90 scale depression, terror, somatization force, hostility, interpersonal relationship, anxiety and paranoid score comparison, difference had no statistical significance (P>0.05); The intervention group 1 week and 2 weeks after the score Less than the control group, the difference had statistical significance (P<0.05) (table3).

DISCUSSION

The department of vascular surgery are mainly aimed at the peripheral vascular except cerebrovascular and

Table 1: General comparison between two groups of patients

Group	Lower extremity varicose veins	Hemangioma	Deep vein thrombosis of lower limbs	Others
Experimental group (n=60)	29	13	14	4
Control group (n=60)	30	12	15	3
P	>0.05	>0.05	>0.05	>0.05
χ^2	0.17	0.14	0.13	0.15

Table 2: Two groups of patients before and after the intervention of POMS just 1 week, 2 weeks rating scale comparison (x + s)

Group	Time	Fatigue	Nervous	Indignation	Depression	Energy	Panic	Emotions related to self
Control group (n=60)	Before interference	17.1±1.1	18.6±1.8	25.8±1.2	19.8±1.4	8.9±1.4	17.8±1.6	11.2±1.7
	1 week after interference	12.1±2.1	15.1±1.9	18.1±1.6	14.9±1.8	12.3±1.8	13.8±2.2	12.6±2.1
	2 weeks after interference	9.3±1.6	11.1±1.4	11.9±1.8	11.4±1.8	14.2±1.8	9.1±1.5	14.5±1.8
Experi-mental group (n=60)	Before interference	17.2±1.5	18.9±1.6	23.9±2.1	18.1±1.5	8.2±1.8	17.1±1.6	11.1±1.9
	1 week after interference	9.4±1.8*	12.0±1.5*	15.1±1.9*	11.8±2.1*	16.4±1.7*	8.9±1.4*	15.8±2.0*
	2 weeks after interference	7.2±1.7*	8.5±1.3*	9.1±1.1*	8.3±1.6*	19.1±1.5*	7.6±1.2*	17.8±1.6*

Note: compared with control group, P<0.05

Table 3: Two groups of patients before and after intervention in 1 week, 2 weeks of SCL - 90 scale score comparison (x+s)

Group	Time	Depress	Terrorist	Somati-zation	Forced	Hostile	Inter-personal relation-ships	Anxiety	Paranoid
Control group (n=60)	Before interference	2.22 ± 0.30	2.19± 0.33	2.10± 0.25	2.08± 0.19	2.05± 0.15	2.10± 0.21	2.24± 0.28	2.01± 0.18
	1 week after interference	1.97± 0.27	1.95± 0.31 *	1.89± 0.26	1.86± 0.21	1.88± 0.22	1.90± 0.18	1.96± 0.27	1.82± 0.25
	2 weeks after interference	1.85± 0.28	1.80± 0.27	1.76± 0.23	1.70± 0.18	1.66± 0.21	1.77± 0.20	1.84± 0.24	1.64± 0.19
Experi-mental group (n=60)	Before interference	2.20± 0.32	2.21± 0.32	2.08± 0.26	2.06± 0.20	2.05± 0.15	2.10± 0.21	2.26± 0.27	2.03± 0.17
	1 week after interference	1.73± 0.26*	1.69± 0.28*	1.58± 0.24*	1.60± 0.24*	1.61± 0.21*	1.68± 0.22*	1.70± 0.23*	1.54± 0.21*
	2 weeks after interference	1.54± 0.31	1.51± 0.26	1.44± 0.22	1.42± 0.19	1.40± 0.18*	1.43± 0.16*	1.51± 0.24*	1.38± 0.17

Note: compared with control group, P<0.05

cardiovascular diseases prevention (Cardiov *et al*, 2013), diagnosis and treatment. there are some things in common about emotional state between the vascular surgery patients and other department surgery patients in the process of surgery. For example, Show anxiety, depression, fear, worry about aspects of bad mood, and type of disease and treatment for the patient did not understand the point more generally, so bad mood performance is more apparent (Centella *et al*, 2013), otherwise this negative emotional state is very bad for patients Cooperate with treatment and improve the recovery rate of the disease, So slow negative emotional state of patients plays a very important role to promote the treatment and rehabilitation of disease And nursing intervention is a more effective means to relieve the negative emotional state of patients (Igual *et al*, 2012). But different intervention model to improve the effect of this kind of negative mood state is very different. The intervention model of focus on solve the probleme is aimed at the dealing with the problems, which is potential and having been found, to emphasize and pay attention to solve one by one to point at the same time (London *et al*, 2014), in order to make each problem is the best solution. In this article we will focus on the application of solving mode in improving vascular surgery patients.

To look at the effects of negative emotions, found that the more traditional nursing intervention of patients in the POMS just scale and SCL-90 mental symptoms scale evaluation of the effect is more outstanding, Mainly with

the focus on solving patterns in patients with such negative emotions associated ease the way (Dua *et al*, 2014). This model solve this kind of patients in the process of negative emotional states For every care more targeted to resolve the problem, and more seriously, will be the key to solve every problem are, and for its selection of solutions to make patients feel to seriously, to treat the enthusiasm and coordination is also higher(Sachs *et al*, 2011), Therefore, for the treatment of diseases and negative emotional relief is more advantageous.

CONCLUSION

From what has been discussed above, we believe that focus on solving mode in improving the effect in vascular surgery patients with negative emotions better, to improve their psychological state plays a positive role.

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