

强化健康教育应用于小儿哮喘护理中的临床效果

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【摘要】目的: 分析强化健康教育应用于小儿哮喘护理中的临床效果。**方法:** 选取共 80 名小儿哮喘者, 设为 2021.06—2022.05 期间我院临床统计对象, 调查小儿哮喘治疗资料按照入院先后顺序不同将其平均分为两部分, 第一部分 (2021.06—2021.11 就诊) 共计 40 名患儿纳入常规组, 第二部分 (2021.12—2022.05 就诊) 共计 40 名患儿纳入实验组。常规组给予常规护理干预, 实验组给予常规护理+强化健康教育干预, 对比两组患儿家属护理满意度、遵医配合率、护理前后负性情绪 (SAS、SDS) 和生活质量 (SF-36) 评分、临床症状评分、呼吸功能指标 (肺功能和血气指标)。**结果:** 护理前, 两组对比 SAS、SDS、SF-36 评分未见差异性, $P>0.05$ 。护理后, 相较常规组, 实验组家属护理满意度、遵医配合率更高, $P<0.05$ 。相较常规组, 实验组 SAS、SDS、临床症状评分更低, $P<0.05$ 。相较常规组, 实验组 SF-36 评分更高、呼吸功能指标更优, $P<0.05$ 。**结论:** 小儿哮喘者在接受临床护理中开展强化健康教育, 以利于提高小儿的依从配合性提高治疗效果, 也可降低患儿病情发作频率, 建议普及应用。

【关键词】: 小儿哮喘; 护理; 强化健康教育; 效果

Clinical Effect of Strengthening Health Education in Nursing Care of Children with Asthma

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Abstract: Objective: To analyze the clinical effect of strengthening health education in the nursing of children with asthma. Methods: A total of 80 children with asthma were selected as the clinical statistical objects of our hospital from June 2021 to May 2022. The treatment data of children with asthma were divided into two parts according to the order of admission. The first part (treatment from June 2021 to November 2021) included 40 children in the routine group, and the second part (treatment from December 2022 to May 2022) included 40 children in the experimental group. Routine nursing intervention was given to the conventional group, and routine nursing+intensive health education intervention was given to the experimental group. The nursing satisfaction, compliance rate, negative emotions (SAS, SDS) and quality of life (SF-36) scores before and after nursing, clinical symptom scores, and respiratory function indicators (lung function and blood gas indicators) of the two groups of children's families were compared. Results: Before nursing, there was no difference in SAS, SDS and SF-36 scores between the two groups ($P>0.05$). After nursing, compared with the conventional group, the family members of the experimental group had higher satisfaction with nursing care and compliance rate ($P<0.05$). Compared with the conventional group, the SAS, SDS and clinical symptom scores of the experimental group were lower ($P<0.05$). Compared with the conventional group, the experimental group had higher SF-36 score and better respiratory function indicators ($P<0.05$). Conclusion: Intensive health education should be carried out in the clinical nursing of children with asthma in order to improve the compliance and cooperation of children, improve the therapeutic effect, and reduce the frequency of attack of children's disease. It is recommended to popularize the application.

Keywords: Asthma in children; Nursing; Strengthening health education; Effect

1-6

[1]

[2-3]

1 资料和方法

1.1

2021.06—2022.05

80

40

2021.06—

2021.11

40

2021.12—

2022.05

20

20

6-12

7.30 ± 1.20

6 —

5

2.75 ± 1.33

22

18

6-12

8.02 ± 1.30

6

—5

2.80 ± 1.40

P 0.05

1.3

1.2

SAS SDS

SF-36

1.4

SPSS 23.0

$\bar{x} \pm s$

n%

T

X^2

“

P 0.05

”

“

P 0.05 ”

2 结果

2.1

+

12

20

8

80.00%

20

19 1 97.50% ± 1.09 P/kPa PEF 74.10 ± 4.25 % FEV1 76.38 $\pm$
X²=6.134 P 0.05 7.00 L T=5.309

2.2 3.519 12.191 6.502 P 0.05

35 87.50% 3 讨论

30 75.00% 29 72.50%
32 80.00% 40
100% 38 95.00% 36
90.00% 39 97.50%
X²=5.333 6.274

4.020 6.134 P 0.05 33%

2.3

1 SAS SDS SF-36
P 0.05 SAS SDS SF-36
P 0.05

1 $[\bar{x} \pm s]$

		SAS	SDS	SF-36
	40	72.15 $\pm$ 9.15	70.21 $\pm$ 3.94	62.00 $\pm$ 5.15
	40	71.89 $\pm$ 9.20	71.07 $\pm$ 4.02	61.54 $\pm$ 4.09
T		0.127	0.966	0.442
P		0.05		
		SAS	SDS	SF-36
	40	50.14 $\pm$ 5.14	32.64 $\pm$ 4.55	72.63 $\pm$ 2.29
	40	40.01 $\pm$ 3.47	17.64 $\pm$ 2.51	92.65 $\pm$ 4.44
T		10.331	18.257	25.345
P		0.05		

2.4

3.35 $\pm$ 0.50 /W 7.58
 ± 1.20 min 3.22 $\pm$ 1.06
1.10 $\pm$ 0.80 /W 3.16 $\pm$ 0.61 min
1.14 $\pm$ 0.64
T=15.084 20.766 10.624 P 0.05

2.5

PaO₂ 12.40 $\pm$ 2.00 P/kPa PaCO₂ 6.44
 ± 3.16 P/kPa PEF 62.81 $\pm$ 4.03 % FEV1 67.26 $\pm$
5.45 L PaO₂ 10.48 $\pm$ 1.11 P/kPa PaCO₂ 8.30

[4-6]

SAS SDS SF-36

P 0.05

SF-36

SAS SDS

P 0.05

参考文献:

- [1] .
[J]. ,2021,19(12):169-170.
- [2] .
[J]. ,2021,19(02):163-164.
- [3] .
[J]. (),2019,26(10):174-176.
- [4] .
[J]. ,2020,24(33):4860-4862.
- [5] .
[J]. ,2020,12(14):74.
- [6] .
[J]. ,2020,18(04):223-225.