

Nursing intervention to prevent hyperbaric oxygen

Effect of treatment on middle ear air pressure injury

Shihung

Affiliated Hospital of Inner Mongolia Nationalities University, Tonglia o 028007

Abstract: [purpose]Explore the effect of nursing intervention on preventing the middle ear air pressure injury caused by hyperbaric oxygenation.[method]willExample the first hyperbaric oxygen treatment for patients was randomly divided into control group andObserver Group,: Example,Control group given general care,The observation group implements a series of nursing interventions based on the control group,Compare the incidence and injury of middle ear air pressure injuries in two groups of patientsdegree.[result]The incidence of air pressure injury in the observation group was lower than that in the control group,lessdamage than control group,There is a statistically significant difference between the two groups(P<0.01).[conclusion]Highto treat patients with active nursing interventions,Can effectively prevent the occurrence of middle ear air pressure injury.

Keyword: Hyperbaric Oxygen; Middle Ear pneumatic injury; Nursing Intervention

Figure category number in:R473.76Document identification code:Ad0l:10.3969/i.ISSN.L674-4748.2017.36.013article number:1674-4748 (2017) 36-4519-03

pressure in hyperbaric oxygen treatment due to changes in ambient pressure causing drum indoor and outdoorpressure imbalance causing middle ear pressure, is hyperbaric oxygen treatment commonside effects, Show ear jam, Ear Expansion, earache, bad reverse of tympanic membrane congestions hould, Severe earache Severe, Unbearable, Theeven has a perforation of the eardrum [1], Sendsickness rate 10.0%~20.3%. Middle ear air pressure injury not only increase patient treatment pain, Severe can cause hyperbaric oxygen treatment interruption, affects the patient prognosis. to prevent middle ear pressure injuries, Guarantee Patient treatment Annall, Our hospital takes a series of positive care for patients undergoing hyperbaric oxygenation treatment Author Introduction Shihung, Deputy Chief Protector, Bachelor's, Unit; 547000, Guangxi Zhuang Autonomous Region Hechi People's Hospital.

Reference Information Shihung. The effect of thousand-pre nursing on preventing the middle ear air pressure injury caused by hyperbaric oxygenation

[J].General Care, 2017, 15: 4519-4521.

Intervention, get good results. Their now reported as follows.

1. Data and methods

1.1 Data Selection2015Year1Month one2017Year5Month in this

hospitalized with hyperbaric oxygen therapy for the first timeExample,where maleExample,femaleAllExample;Ageyears old ~year old(43.5year old±10.2year old)Textdegree:Junior High and above, Example, Junior School belowExample; disease High Distribution: dizziness 8 example, Migraine Example, neurova scularHeadacheExample,One-oxygenCarbon poisoningexample, Cerebral infarction Example; All patients are eligible for The Chinese Medical Association Hyperbaric theHyperbaric adaptationcertificate, all Oxygen Branch developed Oxygen treatment give treatment pressure0.2MPa,Mask Suction pure oxygenmin(includepressure decompression eachmin, Middle and BreakTenmin)Hyperbaric treatmenttherapy.toGroup clear, enables Oxygen standard:conscious language communication, first line highoxy-Pressure treatment,Bilateral tympanic membrane complete,no inset,no perforation, flag cognitive impairment psychiatric history, Active cooperating; exclusion Clear, No and standard:Meaningambiguous,Language,Awareness,Mentally handicapped,has hyperbaric oxygen

Copyright © 2012 Author(s).

This is an open-access article distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (http://creativecommons.org/licenses/by-nc/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

treatment taboocertificate and use ephedrine contraindications. Assigncases to randomly divided into Group and observer groups each \$Example, Two groups of patients at age, Sex, culture Difference between degree and disease distribution no statistically significant (P>0.05, has comparison.

- 1.2 method to give hyperbaric oxygen routine care to control group, that is, the patient is highlyperbaric oxygenation for treatment purposes, method, effect, Note items, Health Education related to adverse reactions, and pinch nose drumgas, Swallow, methods and psychology of preventing middle ear air pressure injury by yawning and other pressure Care etc. The Observation Group is based on general care in the control group, before treatment 1 dstart points 3 Stage Care intervention, Specific actions are as follows.
- 1.2.1 Evaluation and training before the treatment1DThe responsible nurse makes the patientHyperbaric oxygen,cognition and psychological status of related knowledge of middle ear pressure injuryevaluate,targeted health education and heart based on patient's cognitive levelignore.by demonstrating,imitating,Play video and other methods to guide the patient intotheline ear pressure balancing action training,that is, swallowing action-Openmouth to move jaw-Toplayyawn-valsavaAction(To take adeep breathand close the glottis,Pinch the nosethen force the Exhale action,until fully mastered,Instruct it to go to treatmentkeep practicing before.
- 1.2.2 Situational Experience Hyperbaric oxygen treatment beforeminsend patients to Hyperbaric Oxygen Chamber after, with hyperbaric oxygen-nurses_Take care of the patient., cooperation points, The re-education of content such as ear pressure balancing training. First high-pressure the patient with oxygen treatment is susceptible to the special conditions of hyperbaric oxygen treatment. Psychologylet patients visit before treatment hyperbaric oxygen cabin condition, Understanding Cabin Internal structure, contact intercom inside and outside cabin, monitor and camera etcprepare, Watch other patients 'treatment from monitor, to ease or fade Inaddition to its tension, negative emotions for fear, enhance the environment for hyperbaric oxygen treatment due.
- 1.2.3 Ephedrine Nasal drops before entering the cabinTenminapplyephedrinenasaldrops, patient Lianping supine position, scapula Cushion Pillow, headerno cushion pillow, head to left, right flank side 45° to about 0.15ML include 1.5 mg Ephedrine 1% Ephedrine hydrochloride nasal drops 3Dropdon't drip in the nasal cavity of the lower side, each side maintained after drop 1 min~2 minthen prostrate, to facilitate liquid absorption.
- 1.2.4 Toarrange patient seating and experience after cabin intervention in thecabinadjacent to old patients, with old with new, Increase the security of the patient, nurse should Contact the cabin patient at any time, ask for any discomfort, The is in a timely state of mind. Guide to notify the patient to keep doing the ear-pressure balancing action when pressurization, every 1 minAsk and remind 1 Times. during treatment, continuously play music in cabin, Beautiful and healthy music can make human secretion beneficial to regulate blood flow, Eliminate function and nerve reflex hormones and enzymes, can distract the patient., easing treatment Tension, fear and worry, make body and mind relaxed, Smooth endinto voltage regulation [4].
- 1.3 Effect Evaluation observation compare two groups of patients1days after treatmentEar injury Incidenceand severity.page1Day treatment End,Patientask for extra pressure during decompression with no ear pain,ear Jam,expansion casethe condition of the double eardrum membrane is observed by the ear-nose and throat surgeon using the electric ear microscope and completesrecord.Middle ear air pressure injury and degree of injury reference to pressure injury otitis mediaDiagnostic criteria^[5]:has earache,Ear Expansion,Ear Blocking,performance such as hearing loss;have tympanic membrane inset,signs of congestion or rupture or tympanic fluid buildup;where[earachelighter,ears have a feeling of tightness,Eardrum inset,The middle ear mucous membrane hyperemia is lightdegree;earachesevere,has tinnitus,ears are blocked,extensive hyperemia of the eardrum,The lumen has exudate to moderate;eardrum rupture,Sharp Earache suddenly disappears,hemorrhagic exudate flows out of the outer earfor heavy degrees.
- 1.4 Statistical methods useSPSS13.0Statistical software for dataprocess, count data withX²check,Degree of damage with rank and check,withPthe<0.05is statistically significant for the difference.

2. Results

- 2.1 Comparison of the incidence ofMiddle ear air pressure injury in two groups of patientsObservation Group occurrence1example,occurrence2.0% (2/50),control group occurred12example,occurrence24% (12/50),There are significant differences between the two groups.a²=5.73,P<0.01.
 - 2.2 Comparison of injury severity of middle ear air pressure in two groups of patients

3. Discussion

Hyperbaric Oxygen treatment is a hyperbaric oxygen compartment that places the patient in a high-pressure environmentinside, reach cure disease by breathing and ambient pure oxygen, This procedure is divided into for pressure, voltage and decompression three phases, in the pressurized phase of the oxygen chamber, because of the external pressure rising, the pressure of the tympanic membrane decreases the formation of negative pressure gradually getting bigger, Cause the outer air cannot enter the middle ear to cause tympanic membrane injury, mainly occurs during pressurization phase, The first hyperbaric oxygen treatment patients see more to prevent the first hyperbaric oxygen treatment for patients with middle ear pressure injury, before treatment 1 dTo the patient through the strengthening of hyperbaric oxygen related knowledge of health teaching education, Improve patient awareness of hyperbaric oxygen Therapy, directs the patient to theear pressure balance Action training, After training, the patient can be mastered, on When pressurized, the patient can perform the ear-pressure balancing action so that the patient can swallow the drum. To open the function of regulating pressure,tostabilize the tympanic pressure, prevent The occurrence of a middle ear pressure injury, the eustachian tube pharyngeal mouth is located on the nasopharynx side wall, and pharyngeal lymphoid tissue Rich, foldmore⁶. We are dropping ephedrine To give a flat-top head left, Right Turn4 5°Posture, The solution can be down the outside side of the nasal cavity, drop to pharynx on the side of nasopharynx through nasal posterior holearound drum orifice and here retention, When ephedrine works, It's good for swallowing. Open drum tube opening, Auxiliary ear pressure balance action in favor of Eustachian tubeopens to prevent middle ear pressure injury thesituational experience can be used to make the patient familiar with and understand the use of the environment and facilities in the hyperbaric oxygen compartment by and aSolution for others ' treatment procedure, reduce their fear; first treat patients See the huge cabin, hear all kinds of airflow tension, fear, charconsidernegative emotions to make the palate, throat muscle coordination Drop, causes the eustachian tube pharyngeal opening. The gas does not go smoothly into the eardrumroom. Drum Indoor and outdoor pressure cannot reach balance, is the that causes a middle ear pressure injuryreason [4], Our education by visiting time, Psychological grooming, TreatPrevious story experience, Timely psychological guidance for patients during treatment and soundle intervention can effectively relieve patients 'negative psychological emotions, pre-Prevent middle ear pressure injury from occurring from the results of this study, Observation Group The incidence of ear pressure injury is lower than the control group, Less damage than control group, There are statistically significant differences between the two groups(corpse<0.01), Tips for high-voltage oxygen treatment for patients with active nursing interventions, can be effectively preventedEar barometric injury occurrence.

References

- 1. HuangLifang, ChenRunfang, Cupedo,, and so on tympanic membrane massage after relieving hyperbaric oxygen therapy for middle ear gas
- application in compression[J[]. Chinese Journal of Modern Care, 2015, (). 2377-2379.
- 2. WangQiang,Liu Lei.Hyperbaric Oxygen Medicine Tutorial[M[].Beijing:Military Medical Science Press, 2006:1-57.
- 3. Liu.the prevention of middle ear pressure injury caused by hyperbaric oxygen therapy by ephedrine nasal drops in different postureseffect and patient tolerance[J]. China Chinese and western medicine ear and nose and Throat magazine. 2016, (3) 174-177.
- 4. HuHui,Zhang.Nursing Research progress of hyperbaric oxygen therapy combined with ear pressure injury[J].Full-section

Care, 2017, (8): 919-922.

5. Sun.Clinical diagnosis of disease based on Cure improvement standard[M[]. 2version:People's military surgeon publishes

Cl	11	h	1	9	9	8	•	
\sim	u	ω_{s}	1	_	_	v	٠	٠

6. Tanaka,SunJua.otorhinolaryngology-head and neck Surgery[M].Beijing:People's Health publishing Club,2006:137-147.