

# ***Research on the Improvement Effect of Nursing Interventions on Dqols Scores in Urticaria Patients***

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**Keywords:** Nursing intervention, Urticaria, Dqols score, Effect

**Abstract:** Objective Further evaluation of the ameliorative effect of the condition was made by intervening on urticaria patients with a targeted care delivery model. Method Fifty urticaria patients were included in our hospital as the subjects of this trial, after randomization number, two groups of the control group, the control group implemented routine in-hospital care, the care group adopted targeted care measures, and between groups contrast the value change level of related indicators (effectiveness, satisfaction, DQOLS score). Result Compared with the control group, the value of QOL level in the nursing group was significantly higher, and the value of total effective rate and satisfaction level were greatly increased, with a large difference between groups with statistical significance ( $P < 0.05$ ). Conclusion It is of great reference value in clinic for urticaria patients to carry out targeted care service intervention with obvious improvement in effect and enhanced quality of life level.

## **1. Introduction**

Urticaria is the more common cutaneous allergic disease in clinical dermatology, usually occurs in the spring of one year, the incidence is high, mainly skin, mucosa, vasodilation caused skin surface edema, wheal phenomenon. Such diseases are urgent, the itching at the lesion site is intolerable and the condition is easy to be repeated, the genus is harder to cure, greatly affecting the daily life and activities of patients. The pathogenesis is complicated, and it is difficult to find the exact etiology because the induction involves many factors and the treatment is difficult. A localized edematous reaction may occur due to dilation and increased permeability of small blood vessels of the skin and mucosa, which is mainly clinically pruritic, followed by red or skin colored wheals, affecting the function of the respiratory, digestive and immune systems, allergic reactions are severely life-threatening and also trigger complications such as anaphylactic shock and asphyxia. Has led to bad effects on patients' daily life and physical health [1-3]. Aiming at the deeper recognition of the disease, at present stage post-treatment is less curative and has a high recurrence rate, and there is also a lack of more systematic studies in clinical. It is even more important to propose suggestive treatment options clinically for this condition with effective preventive measures. There are certain unique advantages of nursing interventions in improving dermatological rehabilitation in clinical research, which can effectively alleviate and eliminate patients' adverse emotions, facilitate the control of the etiology, and reduce the risk of complications [4]. This study

provides an analysis of efficacy after urticaria practitioners implement a nursing services intervention with intergroup comparison.

## 2. Subjects and Methods

### 2.1 Study Subjects

Urticariasis was diagnosed in our hospital during the September 2020 April 2021 phase by screening 50 patients with urticaria based on clinical data, whose sex ratio was 29 males and 21 females, range 24-48 years, all (34.2  $\pm$  5.9) years. After randomization, 25 patients each were assigned to the control group or the nursing group. All conformed to clinical diagnostic criteria and were approved by the institutional ethics committee. The inclusion criteria were all consistent with the diagnostic criteria and good clinical compliance; Patients with severe liver and kidney failure and other, organ pathologies were excluded; not actively involved in the trial protocoler. Approved and signed informed consent was obtained from the ethics committee of the hospital. Data such as age, gender and degree of illness were compared between groups, which were not significantly different ( $P > 0.05$ ) and therefore comparable.

### 2.2 Methods

Those included in the control group implemented routine intervention instructions, such as medication instructions, monitoring basic signs and discharge education. The observation group implemented targeted nursing intervention, and the specific program: dietary care: diet is a predisposing factor in the pathogenesis of urticaria, and dietary adjustment is the key to improve the therapeutic effect of urticaria patients, enhancing the control of the patient's diet, learning about their food allergy, prohibiting sensitization with spicy stimuli, beany foods, and instructing the patient to clear their diet and supplement appropriate vitamin intake; Caregivers need to instruct patients on adjustments to their usual diet. Life guidance for patients to plan a regular plan life, recommend diet match and exercise, guide the time of medication, the frequency of oral medication and other medication methods; Skin care recommends wearing cotton clothes to keep clothes dry and breathable; Psychological care: directing patients to distract so that their attention shifts to novelty at the onset of an itch, producing a new experience and relieving attention from pruritus [5-7].Caregivers need to strengthen the communication with the patient, understand the actual situation in detail, listen patiently to the pour, develop an appropriate care plan depending on the actual condition and psychological state, be patient about the causes, the program, and pacify the derived dysphoria and other adverse emotions. Health education: caregivers need to inform developing good lifestyle habits, improve their own resistance after reasonable exercise, be able to cope with the irritation caused by alternating cold and hot temperatures, and change bedding from day to day and stay as far as possible from pets in case of increased anaphylaxis due to inhalation of dust, animal dander or pollens. Prolonged sun exposure, such as diverting attention from viewing film / TV programs, is required to be prohibited in daily activities. Caregivers always keep the ward environment clean and create a comfortable and welcoming environment, actively do ward hygiene protection work, keep room air circulation, ensure that the indoor environmental humidity meets the actual needs of the patient and the patient's room tries to avoid flowers, animals, etc. may become allergen objects to avoid secondary allergy caused by the patient, and threaten the patient's physical health [8].The medical and nursing staff checked the patient's vital signs periodically to avoid injury to the patient caused by the emergency illness without timely treatment. Timely application of antipruritic water at the point of skin itching alleviates the pruritus, remind the patient unavailable to grasp the diseased lesion, prevent infection and inflammation of the wound caused by scratching

the skin. Urticaria condition care: Cannot scratch patients strongly, prohibit hot-water scald to prevent secondary infection, wear loose soft loose clothing, often change sheets to cover and clothing, reduce contamination, carers apply antipruritic water to itch, relieve its symptoms. Psychological intervention. Enhanced communication with patients, awareness of psychological changes, establishment of treatment confidence after timely distancing, and improved adherence; Condition care: focus on urticaria site care avoid prolonged sun exposure, take your shower and water appropriately, avoid overheating and cooling, and try to wear soft cotton clothing [9].

### 2.3 Evaluation Indicators

The quality of life survey (gqo-li-74), which assesses quality of life before and after intervention between groups in three dimensions: psychological function, social function and overall health, with higher scores indicating better quality of life. Remarkable effect: after treatment, the body symptoms have basically disappeared; Effective: symptoms partially resolved; Ineffectiveness: no significant change or even aggravation of symptoms. The clinical satisfaction with the care model according to the standard of quality of care delivery was classified into three levels: satisfactory, general care, and unsatisfactory. Satisfaction (%) is the sum of satisfaction rate and general satisfaction rate.

### 2.4 Data Statistical Exploration

Data obtained between groups were recorded after treatment, and the data information was contrasted using SPSS 14 statistics analysis software. If the measurement data (x+s) is tested by t, the count data rate (%) is shown by chi-square test. Differences between groups were considered significant ( $P < 0.05$ ).

## 3. Results

### 3.1 Comparative Efficacy

As shown in Table 1, the total effective rate of the control group is only 72%; the total effective rate of the nursing group is as high as 92%, which is 20% higher than that of the control group. The results showed that the clinical efficacy of the nursing group was significantly improved compared with the control group, and the numerical difference between the groups was large ( $P < 0.05$ ).

*Table 1 Comparison of Clinical Effects between the Two Groups (n)*

Group	n	Markedly effective	effective	ineffective	Total effective rate(%)
Nursing group	25	18	5	2	92%
Control group	25	13	5	7	72%

## 4. 2Dqols Evaluation

After treatment, the DQOLS score index between the evaluation groups was analyzed and compared. After treatment, compared with the control group, the score level of the nursing group was greatly increased, and the difference between the groups was statistically significant ( $P < 0.05$ ), as shown in Table 2.

Table 2 Two Groups Of Dqols Evaluation Results

Group	n	After care
		DQOLS score
Nursing group	25	89.1±5.0
Control group	25	63.0±4.4

#### 4.1 Satisfaction after Nursing

As shown in Table 3, after the implementation of high-quality care, the satisfaction of patients in the control group was only 68%, and the satisfaction of the nursing group was 96%. The satisfaction of the nursing group was 28% higher than that of the control group, and the index value difference between the groups was large, which was statistically significant ( $P<0.05$ ).

Table 3 Two Groups Of Nursing Satisfaction

Group	cases	Number of satisfactory cases	General Nursing Cases	Number of unsatisfactory cases	Overall satisfaction rate(%)
Nursing group	25	18	6	1	96
Control group	25	13	4	5	68

#### 5. Conclusion and Discussion

Urticaria, also commonly known as “rubella mass”, is a common skin disease with variable frequency, complicated disease mechanism, long course of disease, and difficult to cure. Itching is unbearable during the attack, and it is easy to repeatedly scratch the skin, which will damage the epidermis and increase the infection rate, causing secondary injuries, and the unfavorable symptoms are improved. The etiology of urticaria is complex, and it is difficult to find the cause. The main pathology develops into skin mucosal vascular reaction. The causes of the disease are complex, such as food, food additives, physical stimulation, insect bites, endocrine changes, etc. [10]. In addition, the patient's recurrent symptoms cause anxiety, irritability and other adverse psychological and emotional reactions, which bring disadvantages to the recovery of the disease. It is characterized by rapid onset, indeterminate location, and recurrence. It is often caused by enhanced skin and mucosal reactions or small blood vessel permeability and dilatation. Partial edema, fever, diarrhea and other symptoms are difficult to completely cure, which affects normal living standards. Clinically, the skin surface is painful to varying degrees, and some have obvious red or white wind masses. The age of onset of the disease is not fixed, the course of the disease is long, and it is easy to recur. A kind of vicious circle disease is formed. Itching is unbearable during the attack. Although it does not pose a serious threat to life, it greatly affects the patient's quality of life and aggravates psychological pressure. During the treatment process, the patient has a series of negative emotions such as psychological anxiety, anxiety and depression. Intensified the patient's psychological pressure, the patient's condition is not conducive to treatment and rehabilitation. Clinically, nursing intervention has positive effects on curative effect [11]. In the routine treatment of patients, it is more necessary to effectively adopt effective nursing interventions. According to the analysis and research of patients' emotional concepts and disease symptoms, corresponding nursing guidance should be carried out to promote the health of patients. Conventional nursing programs have a moderate effect on improving symptoms and quality of life in patients with urticaria, and the patients recover slowly and have serious negative emotions. The emotional and psychological fluctuations of patients are related to the aggravation of symptoms. Conventional nursing interventions can no longer meet the needs of patients, such as physical and psychological needs, and the effect of intervention is not good. Therefore, it is urgent to find a more effective nursing model. Therefore, the comprehensive and effective nursing intervention in clinical treatment

relieves bad mood and speeds up the recovery of the disease. At this stage, conventional nursing care can no longer meet the needs of patients. There are mistakes and omissions in clinical nursing according to doctor's instructions or experience, which seriously threatens the health of patients, and their nursing outcomes are very poor. In view of the difference in severity of the disease, different modes of nursing have achieved ideal curative effects and good prognosis. Dermatology care can effectively promote functional recovery and reduce the disability rate. Therefore, early detection and early treatment, early implementation of nursing intervention, improvement of the quality of life, and development of a comprehensive nursing plan are the key links.

Conventional nursing has limited diagnosis and treatment effects and cannot effectively improve the physical and psychological burden of patients. Intensified nursing is given to remove animal fur, pollen and other possible causes. Pay attention to the daily water temperature, the softness of clothing, the faster the recovery, the shorter the itching time of the patient, the faster the recovery from the disease, and the environmental and diet care will help improve the quality and strengthen the physique. Follow-up nursing services provide patients with a new method of more efficient and satisfactory nursing services. After the implementation of nursing measures (relevant professional knowledge, technology, etc.), the work will be completed faster and better.

The study in this article showed that compared with the control group, the overall effective rate, satisfaction degree, and GQO-LI-74 score of the nursing group were improved; therefore, the symptoms of dermatology patients improved significantly, and the difference between the groups was large ( $P < 0.05$ ). It shows that nursing intervention has achieved definite curative effect, improved quality of life, accumulated more clinical experience, and better served patients.

In summary, studies have shown that when responding to the treatment of urticaria, sufficient attention is paid and active response. At the same time, early implementation of care is a key link, which is more advantageous, beneficial to improving symptoms, reasonable intervention, and effective control of the disease. It can relieve the patient's bad mood and improve satisfaction, and ultimately the patient's body recovery effect will be better, and the quality of life will be effectively improved. Therefore, nursing has a positive guiding significance and is worthy of clinical reference one by one.

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