

# Application Effect of Staged Health Education in the Nursing Care of Patients with Upper Gastrointestinal Bleeding

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**Abstract:** *Objective:* To investigate the application effect of staged health education in the care of patients with upper gastrointestinal bleeding. *Methods:* This study takes health education in the care of patients with upper gastrointestinal bleeding as the main direction. 160 patients with upper gastrointestinal bleeding who received treatment in our hospital were selected as samples, and the grouping software was used to divide them into the reference group and the study group, with 80 patients each. The reference group and the study group used routine health education and staged health education respectively. Relevant research data were recorded during the nursing process, analyzed, and used as research indicators. *Results:* The compliance behavior of the study group was higher than that of the reference group after the staged nursing care, and at the same time, the nursing care satisfaction of the study group was higher than that of the reference group ( $P < 0.05$ ). *Conclusion:* The use of staged health education for the care of patients with upper gastrointestinal bleeding not only enhances the degree of patient awareness and compliance but also improves nursing satisfaction, which is worthy of promotion and application.

**Keywords:** Staged health education; Upper gastrointestinal bleeding; Application effect

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## 1. Introduction

Upper gastrointestinal bleeding has a high incidence in the clinic, its occurrence may be due to a variety of reasons, including mechanical injury, inflammation of the digestive tract, and neighboring organ lesions. Gastrointestinal bleeding is often categorized into two types in the clinic: upper gastrointestinal bleeding and lower gastrointestinal bleeding, of which the former has a higher incidence<sup>[1-3]</sup>. The main clinical manifestations of this disease are weakness of the limbs, hematemesis, and melena. It requires prompt treatment and if delayed, the patient's renal and cardiac functions will be greatly affected, and in serious cases, the patient's life is threatened. According to relevant reports, most patients with upper gastrointestinal bleeding have a limited understanding of the disease, leading to a decrease in clinical cooperation, so it is necessary to provide appropriate health education for patients<sup>[4-6]</sup>. Based on this, this study proposes the method of applying staged

health education in the nursing care of selected patients to analyze its application effect.

## 2. General information and methods

### 2.1. General information

Among the patients with upper gastrointestinal bleeding who were treated in our department, patients who met the requirements were selected for inclusion in the study, which was completed from March 2021 to March 2022. A total of 160 cases were divided into two groups of 80 patients each, which was completed through the software of average grouping. A staged health education was adopted in the study group and conventional health education was used for the patients in the reference group. There were 64 males and 16 females in the study group, the age ranged from 21–75 years old, with a mean of  $47.58 \pm 3.79$  years old. In the reference group, there were 63 males and 17 females, the age ranged from 20–74 years old, with a mean of  $46.85 \pm 3.68$  years old. The difference was not significant after statistical analysis of the relevant information, which indicates that it can be compared and highlighted as a study ( $P > 0.05$ ).

### 2.2. Methods

The education method used in the nursing care of the patients in the reference group was conventional health education, i.e., the nursing staff explained the relevant knowledge of the disease and treatment methods to the patients according to the traditional methods.

The education method used in the nursing care of the patients in the study group was staged health education, with the following specific measures:

- (1) Health education at the time of admission: When patients were admitted to the hospital to receive treatment, they were guided to fully familiarize themselves with the diagnosis and treatment environment. The nursing staff took the initiative to communicate with the patients and explained in detail the relevant contents of the upper gastrointestinal hemorrhage, educated the patients on the main reasons for the occurrence of the disease, informed them of the need to undergo the examination program and analyze the preventive measures; and at the same time, the patients were told to maintain a good state of mind, so that the patients fully understood the important role of good psychology in the treatment of the disease, which improved patients' confidence in receiving treatment.
- (2) Health education on bleeding: Patients with clinical symptoms may have different degrees of symptom manifestations, such as blood in the stool or vomiting blood, some patients may also have breathing difficulty or fatigue. Influenced by the presence of these symptoms, the patient's psychological pressure increases, resulting in a variety of negative emotions, which reduces the patient's clinical cooperation, making clinical treatment more difficult. Therefore, nursing staff should have a detailed understanding of the patient's psychological situation, and grasp the reasons that lead to the patient's negative emotions. Based on the use of simple and easy-to-understand language, nursing staff explained to the patients the preventive measures of the disease to improve the patient's knowledge of the disease, so that the clinical treatment progressed smoothly<sup>[7-9]</sup>.
- (3) Health education in the recovery period: In this stage, nursing staff paid more attention to patients' living conditions and provided them with correct guidance. For patients' diets, based on patients' conditions and the actual situation, nursing staff scientifically formulated dietary programs, planned the dietary structure, and instructed the patients to avoid taking hard and stimulating food and to mainly take fluids while ensuring that the nutritional needs were met. In addition, patients were educated on rehabilitation exercises and instructed to carry out rehabilitation exercises appropriately. Constipated

patients were advised to use appropriate medication to avoid the increase of intra-abdominal pressure, in order to prevent the occurrence of venous rupture.

- (4) Health education at discharge: Appropriate health education at discharge was necessary for patients to fully realize the importance of good living habits. Patients were instructed to quit drinking and smoking, take medication according to the doctor's orders, and review their conditions on time. In addition, patients were told to reduce or avoid the use of drugs that stimulate the stomach and intestines, and to consult a doctor promptly if there were symptoms of black stools or vomiting blood.

### 2.3. Observation indicators

- (1) Evaluation of patients' compliance behavior after nursing: This was done using a compliance behavior scale containing four items, with a total score of 100 points, the score was proportional to the compliance behavior, and the scores were counted by group as a unit and then analyzed for differences.
- (2) Patients were given a questionnaire used by the hospital to investigate satisfaction and were instructed to fill it out objectively. Subsequently, the nursing staff recovered the questionnaire, obtained satisfaction according to the content of the questionnaire, divided the boundaries of satisfaction and dissatisfaction, expressed the different stages of satisfaction with scores, and calculated the satisfaction level for statistical comparisons.

### 2.4. Statistical methods

Percentage and mean  $\pm$  standard deviation (SD) were the important representations of the information related to this study, while  $t$  and  $\chi^2$  comparison were the methods of comparison between groups; the processing of data was performed using the SPSS23.0 computer software,  $P < 0.05$  indicated a statistically significant difference.

## 3. Results

### 3.1. Comparison of the medical compliance behavior of the two groups

The compliance behavior of the study group was significantly higher than that of the reference group ( $P < 0.05$ ), as shown in **Table 1**.

**Table 1.** Scores of medical compliance behavior after education by different methods (mean  $\pm$  SD, points)

Group	Cases	Health responsibility	Medication	Exercise	Emotional coping
Study group	80	21.68 $\pm$ 1.57	22.41 $\pm$ 1.59	21.54 $\pm$ 2.49	21.42 $\pm$ 2.43
Reference group	80	18.94 $\pm$ 0.77	18.88 $\pm$ 0.59	17.77 $\pm$ 1.58	18.96 $\pm$ 1.63
$t$	-	22.135	28.163	18.067	11.768
$P$	-	< 0.05	< 0.05	< 0.05	< 0.05

### 3.2. Comparison of satisfaction after different methods of nursing care

The satisfaction of the study group was higher than that of the reference group ( $P < 0.05$ ), as presented in **Table 2**.

**Table 2.** Comparison of satisfaction after different methods of care [n (%)], (mean ± SD)

Group	Cases	Very satisfied	Satisfied	Unsatisfied	Total satisfaction
Study group	80	60	14	6	74 (92.5%)
Reference group	80	50	13	17	63 (78.75%)
$\chi^2$	-	-	-	-	5.235
<i>P</i>	-	-	-	-	< 0.05

## 4. Discussion

Upper gastrointestinal bleeding is a relatively common clinical digestive tract disease. It has many causative factors and develops quickly. Once it occurs, it will show different degrees of bleeding symptoms. Patients affected by the disease are prone to negative emotions, at the same time, most patients have a limited understanding of the knowledge related to the disease, which leads to low clinical cooperation.

Therefore, during the treatment of patients, it is necessary to increase the implementation of health education. A reasonable educational approach can improve the patient's knowledge of the disease, so as to enhance the degree of clinical cooperation [10-12]. In this study, we used staged health education for the study group, and the results showed that the compliance behavior and satisfaction of the patients in this group were higher than those in the reference group ( $P < 0.05$ ).

## 5. Conclusion

In summary, the application of the staged health education model in the care of patients with upper gastrointestinal bleeding can effectively improve patient compliance and promote nursing satisfaction, which is worthy of application and promotion in future care.

## Disclosure statement

The authors declare no conflict of interest.

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