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A Brief Discussion on Nursing Care and Precautions During the Postoperative Recovery Period for Anorectal Patients

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Abstract: Anorectal diseases are common and frequently occurring clinical diseases, and surgical treatment is the main therapeutic method for many anorectal diseases. The quality of nursing care during the postoperative recovery period directly affects the final surgical effect, the incidence of complications, and patients' quality of life. Different from the conventional nursing mode of modern medicine focusing on anti-infection, analgesia, and wound management, traditional Chinese medicine (TCM) nursing emphasizes the holistic concept and treatment based on syndrome differentiation, featuring diverse methods, simplicity, low cost, remarkable efficacy, and emphasis on prevention and conditioning. Based on the clinical practice of TCM hospitals and without involving specific drugs, this paper systematically discusses the key nursing points for anorectal patients in the postoperative recovery period from the perspective of TCM, including TCM intervention methods in emotional conditioning, dietary recuperation, daily life nursing, specialized characteristic technologies, pain, and bleeding management. In addition, it elaborates on the life details that patients need to pay attention to during the recovery period. It aims to provide an effective postoperative nursing and rehabilitation guidance scheme with TCM characteristics for clinical practice, and help patients achieve physical and mental comprehensive development and rapid recovery.

Keywords: Anorectal postoperative period; Recovery nursing; Traditional Chinese medicine nursing

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1. Introduction

The anus is located in the lower part of the human body, known as the po gate in TCM, serving as the messenger of the five Zang-organs. Its physiology and pathology are closely related to the Qi and blood of the Zang-fu organs and the Yin-Yang balance of the whole body. The postoperative period of anorectal surgery is not only a process of local wound healing, but also a process of vital Qi recovery and gradual stabilization of Qi-blood harmony in the human body. Delayed conditioning and nursing will aggravate the occurrence of complications such as pain, bleeding, wound edema, and slow healing, and affect patients'

quality of life.

TCM nursing is an important part of traditional Chinese medicine, which highlights the holistic view and nursing based on syndrome differentiation. Anorectal postoperative nursing is not limited to wound care alone, but focuses on patients' mental emotions, diet and daily life, defecation and urination, tongue and pulse conditions. Comprehensive nursing measures are adopted to dredge meridians, regulate Qi and blood, clear away toxins and promote granulation, strengthen healthy Qi and eliminate pathogenic factors, so as to create the best internal environment for wound healing. Complementary to modern medical nursing, TCM characteristic nursing plays an irreplaceable role in relieving postoperative symptoms, reducing complications, accelerating rehabilitation, and improving patients' comfort.

2. Core nursing measures for anorectal patients during postoperative recovery

2.1. Emotional nursing

Surgical trauma and postoperative discomfort may cause patients to suffer from anxiety, fear, irritability, and other negative emotions. TCM holds that rage impairs the liver, overthinking impairs the spleen, and fear impairs the kidney. Improper emotions will lead to liver Qi stagnation and disorder of Qi movement, thereby affecting the operation of Qi and blood, spleen and stomach function, wound healing, and the recovery of defecation function [1].

First, communication and psychological counseling. Nursing staff should take the initiative to establish a good communication relationship with patients, adopt a kind and friendly attitude, and use concise language to carefully explain the disease development, the principles of treatment schemes, and the possible prognosis, so as to eliminate patients' various worries and anxiety. It is also necessary to actively guide patients to take the initiative to express their inner thoughts, provide channels for emotional venting, help them gradually get rid of negative emotions, and establish the confidence to overcome diseases [2].

Second, guide patients to participate in various beneficial physical and mental activities, such as appreciating soft and melodious music, reading positive and interesting books, watching relaxed and pleasant movies and TV dramas, diverting their excessive attention from physical pain and diseases, so as to improve their emotional state [3]. Further, according to the traditional TCM five-tone therapy, different modes of music are selected according to patients' specific physical constitution and emotional state, such as Jue mode corresponding to the liver for soothing liver and regulating Qi, and Gong mode corresponding to the spleen and stomach for invigorating spleen and calming mind, so as to soothe the liver and regulate Qi, invigorate the spleen and harmonize the stomach, and regulate emotions.

Third, calming the mind and tranquilizing the spirit. Instruct and guide patients to practice simple and feasible sitting meditation, mindfulness meditation, or progressive muscle relaxation exercises. Specifically, patients can adjust to a comfortable posture, focus their consciousness on the dantian, and consciously regulate breathing to make it deep, even, and slow. The integration of body and mind helps patients gradually achieve inner peace and mental concentration, thereby calming the mind, relieving anxiety and physical tension, and realizing physical and mental relaxation and balance [4].

2.2. Dietary conditioning

Postoperative dietary recuperation should follow the principles of gradual progress, adapting to local conditions and timely conditioning, with the general requirements of a light, digestible, and nutritious diet.

Spicy, dry-heat, greasy, and food that may induce diseases are prohibited.

First, the early postoperative period (1 to 3 days) is the stage of activating blood circulation, regulating Qi, clearing intestines, and relieving distension [5]. A liquid or semi-liquid diet is recommended, including millet porridge, Chinese yam porridge, lotus root starch, and vegetable soup. A small amount of radish soup can regulate Qi and harmonize the middle energizer, promote digestion and remove stagnation, and relieve abdominal distension.

Second, the middle recovery period (about 4 days after operation, wound healing) adopts the method of invigorating the spleen and strengthening healthy Qi to nourish the acquired foundation, nourish Yin, and consolidate the kidney to prevent congenital deficiency, replenish Qi and nourish Yin, moisten intestines, and relax bowels to assist rehabilitation treatment. The conditioning principle is to reinforce healthy Qi and replenish deficiency, consolidate primordial essence and benefit intelligence, nourish blood and strengthen the heart, and prevent damage and sequelae caused by chronic diarrhea and dysentery. The diet can be gradually converted to soft food and a regular diet [6]. Eat more cellulose-rich vegetables such as spinach, celery, and A*uricularia auricula*, and fruits such as banana, pitaya, and kiwifruit to ensure unobstructed defecation [7]. Moderate intake of high-quality protein, such as fish, lean meat, and eggs, promotes tissue repair and wound healing. Recommended dietary therapy recipes include *astragalus* and wolfberry stewed chicken, black sesame and walnut paste for moistening intestines and relaxing bowels.

2.3. Application of specialized characteristic technologies

Chinese herbal fumigation and sitz bath are two of the most commonly used and effective external TCM therapies after anorectal surgery. It directly acts on the perianal area through the thermal power and medicinal efficacy of decocted Chinese herbal medicine, with the effects of activating blood circulation and resolving stasis, detumescence, and analgesia, clearing away heat and detoxifying, removing necrotic tissue, and promoting granulation. The liquid temperature should be controlled at about 40 ℃, subject to the tolerance of the skin [8]. Each sitz bath lasts for 15 to 20 minutes. It is contraindicated for wounds with active bleeding. Commonly used Chinese herbal medicines have the effects of activating blood and detumescence, clearing heat and draining dampness, astringing wounds, and promoting granulation, which are prescribed by physicians based on syndrome differentiation [9].

Under the guidance of professionals, patients or their family members can be taught to press main acupoints such as Hegu, Zusanli, Sanyinjiao, Chengshan, and Changqiang by themselves or with assistance. Continuous acupoint pressing stimulation can dredge meridians and Qi-blood in the body, effectively relieve postoperative and chronic pain, regulate spleen and stomach function, promote digestion and absorption, dredge defecation and urination, and improve excretion status. Zusanli, an important health-care acupoint, can invigorate the spleen and replenish Qi, harmonize Qi and blood when pressed regularly, and significantly improve the body's self-repairing ability and recovery speed [10].

Select ear acupoints related to the anus, rectum, Shenmen, Sympathetic, Subcortex, Spleen, and Large Intestine. Paste vaccaria seeds on the corresponding acupoints for continuous pressing stimulation [11]. Press regularly 3 to 5 times a day. This mild and lasting external therapy can calm the mind and soothe nerves, relieve pain, regulate the balance of autonomic nerve function, improve intestinal peristalsis, local blood circulation, and visceral function.

Moxibustion warm therapy is applicable to patients with postoperative Qi and blood deficiency, slow

wound healing, local cold intolerance, and a preference for warmth or a cold physical constitution. After TCM syndrome differentiation by physicians, mild moxibustion or ginger-separated moxibustion can be applied on acupoints with warming and tonifying effects, such as Zusanli, Guanyuan, Qihai, and Shenque. Through the penetration of moxa heat and the warming and dissipating effect of ginger, it can warm and dredge meridians, replenish Qi and activate blood, strengthen healthy Qi, promote the growth of new granulation tissue, and accelerate the rehabilitation process [12].

3. Precautions for anorectal patients during postoperative recovery

3.1. Daily life precautions

First, moderate activity. Avoid prolonged standing, sitting, and squatting in the early postoperative period. Slow walking beside the bed and gentle stretching exercises can be performed to promote blood circulation. Strenuous exercise and heavy physical labor are prohibited for one month to prevent incision bleeding and edema. Anal contraction exercises can be performed many times a day for 5 to 10 minutes each time to strengthen the function of the anal sphincter.

Second, ensure adequate rest and develop a regular work and rest schedule with sufficient sleep. Sound sleep enables blood to return to the liver and facilitates the generation and transformation of Qi and blood [13].

Third, keep local cleanliness. Take a sitz bath with warm water or Chinese herbal liquid after defecation and before going to bed every day, and change underwear frequently. A shower is recommended while a tub bath is forbidden. Keep the anal area completely dry after bathing.

3.2. Self-observation of condition and follow-up visit

Observation contents: Pay daily attention to the shape and color of stool, presence of blood or mucus in stool, changes of anal pain, swelling, itching, and secretion, and abnormal oozing blood and exudate on wound dressing.

Identify early warning symptoms: Severe pain, increased bleeding such as dripping or jet bleeding, aggravated anal distending pain accompanied by obvious discomfort, chills and fever, and difficult urination all require immediate hospital treatment [14].

Regular re-examination: Return to the hospital on time as advised by doctors for wound healing observation and necessary treatment, including examination of ligature shedding and observation of wound drainage. Do not delay re-examination due to subjective judgment of wound recovery.

3.3. Long-term conditioning and recurrence prevention

(1) Moderate diet

Adhere to the long-term dietary principle of more vegetables and less oil, more coarse grains and less refined grains, maintain a balanced and reasonable diet structure, and strictly limit the intake of high-fat, high-sugar, high-salt, and refined processed food. In particular, spicy and irritating food, strong alcohol, and high-temperature frying cooking methods should be avoided. Ensure sufficient daily water intake to promote metabolism and blood circulation.

(2) Regular defecation

Develop a fixed daily defecation time to form a stable biological clock. Avoid reading and playing on mobile phones in the toilet to prevent distracted attention, prolonged squatting, and excessive straining,

which may cause anal damage.

(3) Avoid overstrain

Refuse long-term excessive fatigue and staying up late in daily life, so as to prevent disease recurrence and health deterioration caused by physical weakness and Qi deficiency [15]. Adhere to the principle of combining work and rest, arrange work and rest reasonably, and maintain an optimistic mental state, which is crucial to physical health.

(4) Avoid exogenous pathogenic factors

Keep the anal area warm and avoid sitting and lying in cold and humid places for a long time. Attach importance to chronic diseases that may increase abdominal pressure, such as persistent cough and chronic diarrhea, and take effective management measures to prevent adverse impacts on the anal area.

4. Conclusion

In summary, the postoperative recovery period of anorectal diseases is a comprehensive rehabilitation process involving physiological, psychological, and social aspects. TCM nursing has a solid and profound theoretical basis and a variety of effective nursing methods, showing unique advantages in postoperative rehabilitation. It stabilizes mental state through emotional regulation, protects the stomach and invigorates the spleen through dietary conditioning, directly acts on the lesion through unique characteristic operations, and takes daily life prevention as the fundamental system. This people-oriented nursing mode combining prevention and treatment can effectively improve postoperative symptoms, reduce complications, accelerate rehabilitation speed, and enhance patients' medical experience and self-health care awareness.

Clinical practice should give full play to the advantages of TCM nursing, integrate TCM nursing with modern nursing technologies, and establish a more complete and efficient rehabilitation scheme for anorectal postoperative patients. Meanwhile, strengthen health education for patients and their families to help them master relevant nursing measures and precautions, realize doctor-patient cooperation, achieve satisfactory therapeutic effects, and reduce recurrence rate.

Disclosure statement

The author declares no conflict of interest.

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