Analysis of Health Education and Nursing Effect of Diabetic Patients Based on Clinical Path

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Abstract: Objective: To explore the nursing effect of health education based on clinical pathways on patients with diabetes. Methods: 80 patients with diabetes participated in the study, and the consultation period was from February 2019 to February 2020. In this study, patients were first divided into control and study groups, and then different health education methods were implemented. The control group was routine health education and nursing, and the patients in the study group were based on clinical pathways for health education and nursing. Observation indicators for statistics of two groups of patients include: Blood glucose levels before and after nursing, and satisfaction with nursing to achieve the purpose of analyzing the effects of health education nursing measures. Results: The differences in blood glucose levels between the groups before nursing were small (P > 0.05), and all improved after the nursing, and the improvement degree of the research group was better than that of the control group (P < 0.05); the satisfaction of the control group and the study group on nursing were 75% (30/40) and 97.5% (39/40), respectively, and the study group was significantly higher (P < 0.05). Conclusion: For the health education and nursing of diabetic patients, the implementation based on the clinical path has ideal value, so it can be applied.

Keywords: Clinical Pathway; Diabetes; Health Education and Nursing

Diabetes not only affects the blood sugar of the patient, but also gradually causes adverse effects on other organs of the patient, such as diabetic nephropathy. In addition, diabetes also affects the vascular health of patients. Many patients have major vascular disease due to the disease, which seriously affects the health of patients. Data show that the incidence of diabetes in China has reached 3%, and the incidence in some areas has exceeded 5%. Therefore, the treatment and prevention of diabetes has received widespread clinical attention, and the care of such patients is also very important[1-2]. In order to effectively improve the prognosis of patients, it is necessary to implement health education and nursing for patients. In order to further explore which health education nursing effect is the best, this article focuses on the clinical effect of health education on the nursing effect of diabetic patients. The report is as follows.

1. Materials and methods

1.1 General information

80 diabetic patients participated in the study, and the consultation period was from February 2019 to February 2020. This study first divided patients into control group and study group. Control group data: The number of patients was 40, of which 50% were male and female, and 20 were male. The youngest patient was 45 years old and the oldest was 61 years old. Research group data: 40 cases, 52.5% and 47.5% of men and women, 21 and 19 respectively. The youngest patient was 45 years old, the largest was 61 years old, with an average age of (53.41 ± 3.20) years. The ethics committee approved the study, and patients and their families' research right was guaranteed. There was no difference in general information between the groups (P > 0.05).

1.2 Methods

The control group was routine health education nursing. Orally explain the disease knowledge and precautions to the patient.

Patients in the study group conducted health education and nursing based on clinical pathways. 1) On the day of admission. Evaluate the level of patient health knowledge, select appropriate health education methods according to the patient's educational level, and inform the relevant inspection and treatment process, purpose, precautions, possible accidents, etc.; 2) During the hospital stay. Understand the patient's psychological state, communicate more with the patient, and patiently explain the disease-related knowledge, treatment methods and prognosis, so that they fully realize that although the disease cannot be eradicated, it can be prevented and controlled, actively give them psychological counseling, establish a good relationship with them, and help them build self-confidence to overcome disease, reduce their psychological pressure, and improve patient compliance and cooperation. Help patients develop healthy and active eating habits. Through cooperation with patients' families, learn about the patient's diet and blood pressure every day, analyze the patient's diet structure, and formulate appropriate work schedules for patients to enable them to develop a good life habit. Inform patients that they should take the medication according to the doctor's order, and cannot change their medication time and dosage by themselves. Regularly carry out diabetes-related nursing consultations, and instruct patients to visit outpatient clinics on a regular basis. Nurses should take corresponding nursing measures for patients' existing problems, and understand their compliance behavior after discharge from the hospital through evaluation or inquiry; 3) When discharged. Methods: Make a health education booklet, record the contact details of patients and their families, follow-up time, and follow-up time, tell patients to do blood glucose monitoring, strictly follow the doctor's orders in life, diet, etc., and tell their families to supervise patients.

1.3 Observation indicators

Observation indicators of the two groups of patients were counted: blood glucose levels before and after nursing, and satisfaction with nursing in order to analyze the effect of health education nursing measures.

Glycemic water: GLU (fasting blood glucose), 2h postprandial blood glucose, HbA1c (glycosylated hemoglobin) levels.

Satisfaction: A self-made satisfaction survey form was distributed to 80 patients. Investigate statistics from four aspects of comprehensiveness, overall, pertinence and effectiveness. Each score is 10 points and the total score is 40 points. Satisfied: $32 \leq$ score ≤ 40, more satisfied: $24 \leq$ score ≤ 31, dissatisfied: Score < 24.

1.4 Statistical processing

SPSS21.0 statistical software processes the data. Count data rate, continuous correction $\chi 2$ test; measurement data, t test; $P < 0.05$ for statistical significance.

2. Result

2.1 Comparison of blood glucose levels before and after nursing

The difference in blood glucose levels between groups before nursing was small ($P > 0.05$), and all improved after nursing, and the improvement degree of the study group was better than that of the control group ($P < 0.05$). See Table 1 for details.

Group N = 40	GLU/tendency/L		2h postprandial blood glucose /mmol/L	
	Before Treatment	After Treatment	Before Treatment	After Treatment
The Control Group	8.57 + / - 2.67	7.13 + / - 1.25	13.38 + / - 2.43	10.96 + / - 1.58
The Research Group	8.55 + / - 2.64	6.41 + / - 1.07	13.35 + / - 2.45	9.03 + / - 1.15
T	0.0753	3.0082	0.1025	9.1111
P	0.9401	0.0033	0.9186	0

Table 1. Comparison of blood glucose levels before and after treatment

2.2 Comparison of satisfaction

The nursing satisfaction of the control group and the research group was 75% (30/40) and 97.5% (39/40),

respectively, and the research group was significantly higher (P < 0.05). See table 2 for details.

Group	Satisfaction	Partly satisfaction;	Not satisfied	Total
The control group	18 (45%)	12 (30%)	10 (25%)	30 (75%)
The research group	22 (55%)	17 (42.5%)	1 (2.5)	39 (97.5%)
X^2				8.5375
P				0

Table 2. Comparison of nursing satisfaction

3. Discussion

The prevalence of diabetes has increased year by year, and the socioeconomic burden caused by it has gradually increased. The prevalence of diabetes has increased year by year, and the socioeconomic burden caused by it has gradually increased, but the types of diabetes are also different. Clinical types are usually divided into type 1 diabetes, type 2 diabetes, gestational diabetes, elderly diabetes, etc. The specific symptoms of different types of patients are also different[3]. The main pathogenesis of diabetes is islet β-cell dysfunction and insulin resistance, which is a lifelong chronic disease. With the development of the course of the disease, vascular and neuropathy will affect many organs, and most patients with diabetes clinically also manifest as eating more, drinking more, urinating more and losing weight, as well as irritability and irritability[4].

Diabetes is difficult to cure, and patients need to maintain good living habits for a long time to control the development of the disease. Most of the patients with diabetes are middle-aged and elderly people. Due to incomplete understanding of pathological knowledge, they cannot manage themselves well, treatment compliance is low, and the prognosis is not satisfactory[5]. Therefore, it is necessary to strengthen the health education for patients. Clinical path-based health education and nursing is not only a guide for patients on medication, pathology, etc., more importantly, in the daily life of patients, use WeChat and telephone to strengthen out-of-hospital guidance. In addition, the conditioning of diabetes is a long process. Nursing staff need to provide long-term care guidance measures to guide patients' lifestyle habits, allow patients to gradually develop good lifestyle habits, and improve their self-management capabilities, and patients' treatment compliance can be higher[6].

This article conducts research in a comparative form, and the results show that for the health education and care of diabetic patients, it is ideal to implement on the basis of clinical pathways, so it can be applied.

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