The Nursing Experience on Surgical Operation Cases of Ring Mixed Hemorrhoids

Xue Wu*

Zibo Mashang Center Hospital, Zibo, China zbwuxue@126.com
*Corresponding author

Abstract: The ring mixed hemorrhoids are a kind of mixed hemorrhoids around the rectal anal canal. It belongs to the last stage of hemorrhoid development and brings serious harm to the health and daily life of patients. The surgical treatment is generally needed to completely cure the ring mixed hemorrhoids. The aim of surgery is to shorten the healing time and to protect anal function. In this study, it was mainly summarized the postoperative nursing methods on ring mixed hemorrhoids. Through nursing 196 cases of ring mixed hemorrhoids, we summarized the experience of nursing technology on ring mixed hemorrhoids after operation. By using this nursing technique, 196 patients with ring mixed hemorrhoids were cured and discharged from hospital without any complication. The nursing measures for ring mixed hemorrhoids can reduce complications and promote the recovery of patients.

Keywords: Ring mixed haemorrhoids, Surgery, Nursing, Cure

1. Introduction

Mixed hemorrhoids are located near the dentate line. The surface of hemorrhoid is covered by the anal canal skin and rectal mucosa. The ring mixed hemorrhoids are a kind of mixed hemorrhoids that are around the rectal anal canal, which belongs to the last stage of hemorrhoid development. The ring mixed hemorrhoids give rise to serious harm to patients' health and daily life. In addition, the ring mixed hemorrhoids are listed as one of 16 refractory diseases among the anorectal diseases by the State Administration of Traditional Chinese Medicine. The surgical treatments are generally needed to completely cure the ring mixed hemorrhoids. The aim of surgery on ring hybrid hemorrhoid is to shorten the cure time as much as possible and maximize the protection of anal function.

Ring mixed hemorrhoids belong to one of common diseases in anorectal diseases, which could cause great harm to patients. Until now, there are also certain difficulties in the treatment of ring mixed hemorrhoids [1-3]. The occurrence of hemorrhoids is related to the blood weakness and anal stasis. In the various anorectal diseases, the ring mixed hemorrhoids are more difficult to treat, and the difficulty of treatment is how to ensure the thoroughness and complete treatment. If the treatment method is unreasonable, it will result in the poor defecation, residual hemorrhoids, anal stenosis, and other postoperative complications [4, 5]. At present, the clinical treatment of ring mixed hemorrhoids usually uses external peeling and internal ligation, hemorrhoid resectionits, and mucosal ring cut on stapler hemorrhoids [6-8].

In the treating and nursing patient's wound after surgical operation on the ring mixed hemorrhoids, we realized that the postoperative wound performance is different due to the different surgical methods, different disease degrees, individual differences and other reasons. Among these patients, 50% of patients do not appear wound swelling and about 35% of patients have different degrees of wound swelling. Moreover, the wound swelling in about 15% of patients is more serious and the recovery is slow. For these patients with severe wound swelling, we discussed with clinicians to find the solutions from several aspects, and the causes of wound swelling after surgery were summarized.

2. The clinical symptoms and health hazard of ring mixed hemorrhoids

2.1. The clinical symptoms of ring mixed hemorrhoids

The main symptoms of ring mixed hemorrhoids are hemorrhoids prolapse and bleeding during stool.

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At the early stage of ring mixed hemorrhoids, the hemorrhoids texture is small and soft. The color of hemorrhoids surface is green purple or bright red. In addition, the hemorrhoids do not break away from the anus during defecation. With the extension of the disease period, there will be postoperative bleeding or defecation bleeding, and the bleeding is spray or drip shape. Moreover, the color of blood is bright red and blood does not mix with feces. The bleeding is also intermittent attack. At the middle stage of ring mixed hemorrhoids, the hemorrhoids become larger and bulge, and the hemorrhoids easily break away from the anus during defecation. In addition, the amount of posttoilet bleeding is less than the initial stage, and the hemorrhoids can return to normal state. At the last stage of ring mixed hemorrhoids, the color of hemorrhoids surface is gray, and the volume of hemorrhoids becomes larger and it becomes hard. At this stage, the hemorrhoids are easy to break away from the anus during defecation. Furthermore, the hemorrhoids could break away from the body even sneezing, cough, standing or walking. The hemorrhoids loss the ability to return the normal state, and hands may be used to push it back. The hot compress and lying down may be used to help hemorrhoids to return normal state. Moreover, there is no bleeding or less blood at the last stage of ring mixed hemorrhoids. [9, 10].

2.2. The health hazard of ring mixed hemorrhoids

If the ring mixed hemorrhoids repeatedly attack, it easily leads to the repeated bleeding. For there is iron element in the blood, if patients lose a lot of blood, it easily causes the reduction of iron content in the circulatory system. Thus, it will produce the symptoms of iron deficiency anemia. The clinical symptoms of patients include burnout, pale complexion, and reduced appetite [6, 8, 11].

If the ring mixed hemorrhoids are in a long-term prolapse and it can not shrink in time, the hemorrhoids will be held by sphincter. This state will hinder venous return, and the volume of hemorrhoids will become larger with the continuous input of arterial blood. The thrombosis will be further formatted with the increase of hemorrhoids. After the formation of thrombosis, hemorrhoids will gradually become harden and form an incarceration. However, once the incarceration was formatted in body, the patient's body is easy to produce different degrees of infection, which will further produce an obvious sense of anal swelling. In addition, the long-term incarceration of hemorrhoids in the anal outside will also aggravate the local anal edema. It further aggravates the incarceration of hemorrhoids and forms a vicious circle, which will finally result in the necrosis of hemorrhoids.

3. The nursing experience on surgical operation cases of ring mixed hemorrhoids

3.1. The disease time on the curing ring mixed hemorrhoids

There are two kinds of patients with ring mixed hemorrhoids. The first part of patients develop symptoms from 2 to 3 days, and the other part of patients develop symptoms from 5 to 7 days. The first part of patients have less severe postoperative wound swelling, but the latter patients have more severe postoperative wound swelling. In particular, the wound swelling is heavier for the patients with the heavier incarceration, especially for the patients that the maternal and child hemorrhoids break away. However, for the patients with the simple maternal hemorrhoids prolapse, the postoperative swelling degree is less severe. In addition, the degree of wound swelling is also related to whether the patient's postoperative stool is unobstructed. The swelling is heavy for the patients with constipation.

3.2. The surgical method on the curing ring mixed hemorrhoids

In the clinical care, we found the following things affecting the curing. In the operation, doctors use small power of electric knife in the operation. The subcutaneous blood vessels were treated thoroughly and the free flow is present between the flaps after the removal of hemorrhoids. In these cases, the wound swelling is light, otherwise the wound swelling is heavy. The doctors have done a surgical comparison. They got through the tissue between the flaps in some patients, and did not get through the tissue between the flaps in some other patients. They found that the patients with the subcutaneous tissue have very light wound swelling. Therefore, we suggest that the clinicians should handle the interflap tissue as much as possible, minimize the power of electric knife, and reduce the burning degree of electric knife. The main reason is that the power of electric knife is significantly related to the degree of wound swelling.

3.3. The patient size on the curing ring mixed hemorrhoids

The postoperative wound swelling is also related to the patient's own condition [2, 12]. The patient's

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body is short with fat hips, and the anus is in a tense state. It will result in the tight anal sphincter. The postoperative wound swelling will be more serious in these patients. On the contrary, if the patient's body is thin and the anus is loose, the postoperative wound swelling is light. However, there are also individual cases. There are two patients with lean body and loose anus, but heavy postoperative swelling also happened, which may be related to the individual differences. These two patients said that the trauma on themselves was also more severe and lasted longer than others.

3.4. The mental nursing on the curing ring mixed hemorrhoids

Psychological nursing refers to a clinical method of psychological treatment in the process of clinical nursing [13]. Psychological nursing includes various ways and technologies. We actively use clinical applied psychology and related technologies, and actively affect the psychological and ideological activities of patients from all aspects, in order to achieve the perfect goal of nursing. We clearly know that the care play a key role in the treatment. However, the clinical psychological nursing in hospitals is still in the initial stage at present. Psychological nursing work is not only the work of clinical nurses, but also the responsibility of doctors and other medical staffs.

When a healthy person becomes a patient, the patient easily appears a series of abnormal psychological activities due to the unfamiliar hospital environment, the pain of disease, the reconstruction of interpersonal relations and some other reasons. One of the tasks of clinical psychological care is taking a variety of unique psychological activities, and actively adopt the corresponding psychological care measures and methods. Moreover, we further change patients' behavior and psychological condition according to the patient's psychological condition and psychological activity characteristics. In addition, we also use relevant measures to affect the patient's cognition and help patients to adapt to new environment and interpersonal relationship. Moreover, we create conducive rehabilitation and the best psychological state in the process of treatment, and let patients recover healthy as soon as possible.

Due to the lack of understanding on the disease and worrying about the effect of operation, many patients easily appear tension and fear to operation. According to the patient's disease and age, we gave psychological counseling to the patients, and patiently told patients the necessity of operation. In addition, we told the patients the detailed preoperative and postoperative preventive measures. We also let the recovered patients introduce their experience. By these ways, we eliminate the patients' ideological problems and make them actively cooperate with the surgical treatment.

3.5. The clinical nursing on the curing ring mixed hemorrhoids

In view of the different situations of patients, we do different treatments according to the wound conditions of different patients. For patients whose wound is swelling less, we take general wound disinfection, anal filling with Yunnan Baiyao hemorrhoidal ointment, and apply Jingwanhong ointment once a day. After 7~9 days curing with this method, the wound can be cured, and some individual cases may be extended to 12 days. For patients with severe wound swelling, in addition to the above methods, we further apply 5.0% of hypertonic saline and 0.3% of Revnall gauze. On this basis, we further use the local microwave hot compress for 15 to 30 minutes. The swelling in most patients was down and the wound returned to normal state after 3 to 5 days. For a small number of particularly severe patients, we further locally injected 10~15 mg dexamethasone, and also achieved good results after 3 days. Only one patient was performed a local subcutaneous radiobotomy surgery. In all, the wound healing time for patients with hemorrhoids wound swelling is generally longer than that of patients without swelling, and it needs to be extended about 1 week to curing.

Through the practice of clinical nursing ring mixed hemorrhoids, we believe that the complete healing time of ring mixed hemorrhoid wound is mainly related to the surgical method, degree of disease, and individual differences. After taking the above nursing methods, 8~10 days later, the vast majority of patients no longer feel pain after surgery. Half a month later, patients feel a slight pain after stool. The patients completely returned to normal state in about one month.

3.6. The eating nursing on the curing ring mixed hemorrhoids

During the treatment of ring mixed hemorrhoids, the patients should be given scientific arrangement of diet. In addition, food hygiene should be paid close attention, which has positive effects on improving the cure rate of hemorrhoids. Patients should eat an easily digestible, light, semi-liquid diet for 1 to 4 days after surgery. After 4 days, patients should start to eat soft food. However, patients must avoid eating

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milk, beans and other gas-producing food. In addition, patients should not eat fast spicy, salty, greasy food, and other stimulating food to avoid dry stool. Patients should eat more vegetables, fruits, lean meat, eggs and other nutritious food after surgery [14-17].

4. Conclusions

In summary, the ring mixed hemorrhoids are mixed hemorrhoids around the rectal and anal canal, which belongs to the last stage of hemorrhoids development. The ring mixed hemorrhoids bring serious harm to patients' health and daily life. Ring mixed hemorrhoids need surgical treatment to cure completely. The purpose of the operation is to shorten the cure time as long as possible, and to maximize the protection of anal function. By performing pre-surgical and post-surgical preventive care for ring mixed hemorrhoids, we summarized the technical experience on postoperative nursing ring mixed hemorrhoids. By using this nursing technique, most patients with ring mixed hemorrhoids were recovered and discharged without any complication. Thus, the corresponding nursing measures can reduce complications and promote the recovery of patients with ring mixed hemorrhoids.

References

- [1] Lohsiriwat, V. Approach to hemorrhoids. (2013) Current gastroenterology reports, 15(7), 1-4.
- [2] Zhu, M., Zheng, X. and Yu, Z. (2020) Influence of Titanoreine on Wound Healing and Postoperative Defecation Difficulty in Circular Mixed Hemorrhoids Patients. Indian Journal of Pharmaceutical Sciences, 82(6), 1049-1053.
- [3] Sardinha, T.C. and Corman, M.L. (2002) Hemorrhoids. Surgical Clinics, 82(6), 1153-1167.
- [4] Hua, X., Zhao, Y., Zuo, H. and Liang, J. (2021) Progress in the Treatment of Edema after Surgery for Mixed Hemorrhoids. Proceedings of Anticancer Research, 5(6), 102-105.
- [5] Lohsiriwat, V. (2015) Treatment of hemorrhoids: A coloproctologist's view. World Journal of Gastroenterology: WJG, 21(31), 9245.
- [6] Lohsiriwat, V. (2012) Hemorrhoids: from basic pathophysiology to clinical management. World journal of gastroenterology: WJG, 18(17), 2009.
- [7] Cai, J., Zheng, F., Yu, S., Jia, D., Ren, G. and Bai, H. (2010) Combination of four medicines in treating postoperative complications of Ring mixed hemorrhoids. International Journal of Surgery, 12, 375-377.
- [8] Balasubramaniam, S. and Kaiser, A.M. (2003) Management options for symptomatic hemorrhoids. Current gastroenterology reports, 5(5), 431-437.
- [9] Mounsey, A., Halladay, J. and Sadiq, T.S. (2011) Hemorrhoids. American family physician, 84(2), 204-210.
- [10] Sivalingam, P., Kant, R., Arora, V. and Gore, P.P. (2016). Hemorrhoids. In Benign Anorectal Disorders (pp. 11-34). Springer, New Delhi.
- [11] Liang, H., Li, X. and Cheng, M. (2018) Effect of Longxuejie capsule combined with Jiuhua ointment treatment on wound after ring-like mixed hemorrhoid surgery. International Journal of Traditional Chinese Medicine, 6, 822-825.
- [12] Zhang, C., Zhang, W. and Xu, J. (2022) Comparison of the outcomes of hemorrhoidectomy and PPH in the treatment of grades III and IV hemorrhoids. Medicine, 101(11), e29100.
- [13] Yin, X. and Zeng, L. (2020) A study on the psychological needs of nurses caring for patients with coronavirus disease 2019 from the perspective of the existence, relatedness, and growth theory. International Journal of Nursing Sciences, 7(2), 157-160.
- [14] Yu, Q., Zhi, C., Jia, L. and Li, H. (2021) Efficacy of Ruiyun procedure for hemorrhoids combined simplified Milligan–Morgan hemorrhoidectomy with dentate line-sparing in treating grade III/IV hemorrhoids: a retrospective study. BMC surgery, 21(1), 1-8.
- [15] Ravindranath, G. and Rahul, B. (2018) Prevalence and risk factors of hemorrhoids: a study in a semi-urban centre. International surgery journal, 5(2), 496-499.
- [16] Moesgaard, F., Nielsen, L., Hansen, J.B. and Knudsen, J.T. (1982). High-fiber diet reduces bleeding and pain in patients with hemorrhoids. Diseases of the Colon & Rectum, 25(5), 454-456.
- [17] Alonso-Coello, P., Mills, E.D., Heels-Ansdell, D., López-Yarto, M., Zhou, Q., Johanson, J.F. and Guyatt, G. (2006) Fiber for the treatment of hemorrhoids complications: a systematic review and meta-analysis. Official journal of the American College of Gastroenterology ACG, 101(1), 181-188.