

Nursing Experience of Thumb-tack Needle Combined with Auricular Acupressure for Postoperative Pain in an Acute Appendicitis Patient

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Abstract

Objective: To observe the therapeutic effect of press-needle combined with auricular acupressure in treating post-appendectomy pain.

Methods: A patient after acute appendicitis surgery was selected and treated with press-needle combined with auricular acupressure.

Results: Press-needle combined with auricular acupressure can alleviate post-appendectomy pain.

Conclusion: During the treatment process following acute appendicitis surgery, press-needle combined with auricular acupressure significantly improved post-operative pain symptoms, reduced patient suffering, shortened hospitalization duration, enhanced patient satisfaction, and is worthy of clinical reference and promotion.

Full Text

Nursing Experience of Thumbtack Needling Combined with Auricular Acupoint Pressing Pills for Postoperative Pain in a Patient with Acute Appendicitis

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Abstract

Objective: To observe the effect of thumbtack needling combined with auricular acupoint pressing pills in the treatment of postoperative pain of appendicitis. **Methods:** Summarize a record of a patient with acute appendicitis after operation who was treated with thumbtack needling and auricular acupoint pressing pills. **Results:** Thumbtack needling together with auricular acupoint pressing pills can relieve the pain of acute appendicitis after operation. **Conclusion:** In the treatment of acute appendicitis after operation, the combination of thumbtack needling and auricular acupoint pressing pills can significantly improve the postoperative pain, reduce the pain of patients, shorten the length of hospital stay, improve the patient's satisfaction, which is worthy of clinical reference and promotion.

Keywords: Thumbtack needling; Auricular acupoint pressing pills; Acute appendicitis after operation; Nursing

Introduction

Acute appendicitis is a common disease in general surgery, closely associated with factors such as appendiceal lumen stenosis, impaired blood supply, and bacterial infection. Clinical manifestations in patients with acute appendicitis include migratory right lower quadrant pain with paroxysmal exacerbation, nausea, and vomiting [1]. Notably, as acute appendicitis severely impacts patients' quality of life, timely and effective treatment is essential. In recent years, domestic scholars have indicated that surgery is the conventional treatment for acute appendicitis patients, and that effective perioperative nursing care is crucial for improving surgical outcomes, relieving pain, and enhancing psychological status [2]. Clinical practice in China has also demonstrated that quality nursing methods combined with traditional Chinese medicine (TCM) techniques can improve postoperative prognosis and alleviate postoperative pain in acute appendicitis patients [3]. Our department has applied thumbtack needling combined with auricular acupoint pressing pills to relieve postoperative pain in appendicitis patients, achieving satisfactory evaluations. We now report this case.

1. Clinical Data

The patient was a 35-year-old female admitted on August 15, 2022, with a 10-hour history of migratory right lower quadrant pain. Chief complaints included migratory right lower quadrant pain accompanied by nausea, without vomiting, and inability to sleep at night. Physical examination revealed poor mental status, sallow complexion, dark red tongue with a white thick coating, wiry pulse, and abdominal tenderness, rebound tenderness, and muscular tension. TCM diagnosis: intestinal abscess (肠痈). Syndrome differentiation: qi stagnation and blood stasis (气滞血瘀). Western medicine diagnosis: acute appendicitis. Past medical history: previously healthy. Allergy history: denied drug or food allergies. Specialized examinations: abdominal ultrasound showed abnormal echo

in the right lower quadrant, suggesting possible appendicitis. Blood routine: white blood cell count $11.38 \times 10^9/L$, neutrophil percentage 77%. On August 15, 2022, the patient underwent appendectomy under epidural anesthesia in the operating room. Postoperatively, the patient received anti-inflammatory, fluid infusion, and nutritional support therapy, along with thumbtack needling combined with auricular acupoint pressing pills for analgesia.

2. Nursing Intervention

2.1 Nursing Assessment (1) Pain assessment: Postoperatively, the patient complained of wound pain without discomfort in other areas. Pain was evaluated using the Visual Analogue Scale (VAS) method, which employs a 0-10 cm ruler to quantify subjective pain intensity. A VAS score of 0 represents no pain, while 10 represents unbearable severe pain; higher scores indicate greater pain severity. This case scored 5 points, indicating moderate pain.

(2) Daily living care assessment: The Barthel Index assessment scale was used. The Barthel Index classifies self-care ability into levels: severe dependence (completely unable to care for self, requiring total assistance); partial dependence (mostly unable to care for self, requiring considerable assistance); mild dependence (mostly able to care for self, requiring minimal assistance); and no dependence (completely able to care for self, requiring no assistance). This case scored 55 points, indicating mostly requiring assistance from others.

2.2 TCM Characteristic Nursing Measures (1) Thumbtack needling therapy: Thumbtack needling can penetrate to the intradermal layer, regulate qi flow, provide sustained acupoint stimulation, thereby enhancing the effect of unblocking collaterals and relieving pain [4]. It promotes the orderly circulation of qi and blood in meridians, dredges meridians, and regulates organ function. Acupoint selection: Appendix point (阑尾穴), Hegu (LI4), Taichong (LR3), Zusanli (ST36), and Yanglingquan (GB34). Pre-operation: Routine skin disinfection was performed. Japanese Seirin thumbtack needles (needle length 1.5 mm, diameter 0.2 mm) were used. The practitioner fixed the skin with the left hand and inserted the needle tip perpendicularly into the skin with the right hand, pressing to secure the needle properly. The needles could be retained for 3 days. During retention, the patient's skin condition was observed for redness, swelling, or blisters, and the patient was asked about any discomfort. Digital acupoint pressure therapy was performed daily for 5-10 minutes each time. If any discomfort occurred, the thumbtack needles were immediately removed.

(2) Auricular acupoint pressing pills: Auricular acupoints are locations on the auricular surface that communicate with the body's zang-fu organs, meridians, tissues, limbs, and trunk. When internal organs or body parts develop disease, corresponding areas on the auricle often exhibit tender sensitivity, specific skin changes, or deformation and discoloration. We only need to locate these points. Practitioners can use a probe to search for tender points in the required acupoints with uniform and gentle force [5]. For this case of postopera-

tive wound pain, we selected the liver, gallbladder, Shenmen, sympathetic, and appendix points, as using the traditional Chinese medicine herb Wang Bu Liu Xing (Vaccaria seed) on the sympathetic, Shenmen, and appendix points has the effect of reducing swelling and relieving pain. Operation method: After routine skin disinfection, Wang Bu Liu Xing seeds were pressed onto the identified sensitive points. Sufficient pressure was applied during placement, and continuous kneading was performed after application to promote blood circulation and rapid absorption. The pressure should be such that the patient does not feel pain but experiences warmth and distension. Kneading could be repeated. The acupoints were pressed 3-5 times daily, with 1-2 minutes per point each time. During retention of Wang Bu Liu Xing seeds, the patient's skin condition was observed for redness, swelling, or blisters, and the patient was asked about any discomfort. If any discomfort occurred, retention was immediately discontinued.

2.3 Routine Nursing Postoperatively, the patient was kept NPO (nothing by mouth) temporarily and received anti-inflammatory, fluid infusion, and nutritional support therapy. Attention was paid to avoiding wind-cold exposure and maintaining warmth. Communication with the patient was maintained, and the patient was guided to maintain a pleasant mood and avoid stimulation from negative emotions that could cause wound pain.

3. Efficacy Observation

Before treatment with thumbtack needling combined with auricular acupoint pressing pills, the Visual Analogue Scale (VAS) pain score was 5 points. Based on the patient's daily self-assessment of pain (VAS), after 2 days of treatment, the pain score decreased from 5 to 1 points. The Barthel Index score for daily living care improved from 55 to 100 points, demonstrating remarkable efficacy.

Discussion

From a TCM perspective, appendicitis falls under the category of "intestinal abscess" (肠痈), caused by factors such as improper diet, qi stagnation and food accumulation, blood stasis, and exposure to cold or heat. TCM nursing should therefore focus on clearing heat and cooling blood, promoting diuresis and dispersing masses, and emotional guidance [6]. During implementation of TCM nursing protocols, thumbtack needling produces long-lasting and stable stimulation of corresponding acupoints through superficial needling, promoting orderly circulation of qi and blood in meridians [7], dredging meridians, regulating organ function, and achieving bidirectional benign regulation [4].

Research has shown that acupuncture applied to abdominal surgery patients at bilateral Zusanli (ST36), Sanyinjiao (SP6), and Yinlingquan (SP9) acupoints significantly improves postoperative pain [8]. Acupuncture at the appendix point can relieve appendicitis, indigestion, and abdominal pain, while acupoint massage helps regulate intestinal function [9]. Auricular acupoint pressing utilizes auricular points that communicate with the body's zang-fu organs, meridians,

tissues, limbs, and trunk. Wang Bu Liu Xing seeds possess the effects of activating blood circulation, unblocking meridians, reducing swelling, and relieving pain [10]. Therefore, applying Wang Bu Liu Xing seeds on the sympathetic, Shenmen, and appendix points effectively reduces swelling and alleviates pain. Auricular acupoint pressing with Wang Bu Liu Xing seeds demonstrates remarkable analgesic effects for post-appendectomy pain.

During nursing care, attention must be paid to emotional care, with patient explanations provided patiently using accessible language to introduce disease knowledge, enabling patients to correctly understand their condition, maintain emotional stability, and cooperate actively with medical staff to promote early recovery. Auricular acupoint pressing for post-appendectomy pain offers convenient material sourcing, simple operation, and good patient acceptance. Clinical observation indicates this treatment for acute appendicitis postoperative pain has no side effects, can relieve anxiety, stabilize mood, and divert attention from pain [11], making it worthy of clinical promotion.

Emotional intervention can help patients improve their mental state, while dietary intervention provides scientific nutritional support. For incision and pain management, patients were guided to consume herbal decoctions containing Honeysuckle (金银花) and Dandelion (蒲公英) as excellent herbs for clearing heat, detoxifying, promoting diuresis, and dispersing masses; Rhubarb (大黄) and Red Peony (赤芍) for cooling blood, purging fire, and detoxifying; Moutan Cortex (牡丹皮) for activating blood and dispersing stasis; and Licorice (甘草) for harmonizing all ingredients to achieve the combined effects of clearing heat, cooling blood, promoting diuresis, and dispersing masses. This formula can reduce incision pain, promote blood circulation around the incision, and accelerate healing [6]. Acupoint stimulation in bowel care nursing can promote recovery of urination and defecation functions. Activity guidance can accelerate recovery of motor function, followed by discharge guidance to help patients develop and maintain healthy lifestyle habits after returning home. Implementing TCM nursing protocols for appendicitis surgery patients can reduce postoperative pain, prevent complications, and facilitate better and faster rehabilitation. Furthermore, through understanding TCM techniques, patients can develop trust in their therapeutic effects and become more willing to accept TCM treatments [12].

In summary, thumbtack needling combined with auricular acupoint pressing pills can significantly improve pain symptom relief in acute appendicitis patients after surgery, promote recovery, enhance patient satisfaction, and is worthy of clinical reference and application.

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