

Nursing Experience of Ear Guasha Combined with Traditional Chinese Medicine Hot Compress for Postoperative Abdominal Distension in a Mixed Hemorrhoid Patient: A Case Report

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Date: 2023-11-18T00:00:00+00:00

Abstract

Abstract: This article summarizes the nursing experience of treating postoperative abdominal distension with auricular scraping combined with traditional Chinese medicine hot compress in one case following mixed hemorrhoid surgery. Based on the assessment of postoperative abdominal distension in this patient, the implementation of auricular scraping combined with traditional Chinese medicine hot compress therapy significantly improved the patient's abdominal distension symptoms, alleviated the patient's suffering, and is worthy of clinical reference and application.

Full Text

Preamble

Nursing Experience of Auricular Scraping Combined with Chinese Herbal Hot Compress in Treating Postoperative Abdominal Distension After Mixed Hemorrhoid Surgery: A Case Report

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Abstract

This article summarizes the nursing experience of treating postoperative abdominal distension in one patient using auricular scraping combined with a Chinese herbal hot compress. Based on a comprehensive assessment of the patient's postoperative abdominal distension, this combined intervention significantly alleviated the distension symptoms and reduced patient suffering, demonstrating clinical value as a reference for future application.

Keywords: mixed hemorrhoids; abdominal distension; auricular scraping; Chinese herbal hot compress; traditional Chinese medicine nursing

Introduction

Mixed hemorrhoids are a common anorectal disease, accounting for 87.25% of all anorectal disorders, with incidence increasing with age—reaching up to 56.9% in elderly patients [1,2]. Surgery is the primary treatment for mixed hemorrhoids above grade II, and abdominal distension represents one of the most common postoperative complications. Contributing factors include preoperative anesthesia, reduced gastrointestinal motility, stagnation of digestive contents, perianal edema, gauze packing, and wound pain. Due to the unique anatomical location of hemorrhoid surgery, subsequent anal tube decompression or enema may cause incisional pain and bleeding, while also stimulating anal sphincter contraction that exacerbates wound pain and edema, ultimately hindering recovery [3]. Traditional Chinese medicine (TCM) external therapies, such as auricular scraping combined with herbal hot compress, integrate physical stimulation with topical herbal application, offering advantages of safety, minimal discomfort, significant efficacy, and operational simplicity. Auricular scraping therapy [4] stimulates specific regions and reactive points on the auricle to improve postoperative gastrointestinal function and regulate organ systems. Chinese herbal hot compress [5] warms the meridians, regulates qi, unblocks collaterals, and promotes qi movement to relieve distension. This article reports the nursing experience of one patient with postoperative abdominal distension after mixed hemorrhoid surgery treated with this combined approach.

1 Clinical Case

A 70-year-old male patient was admitted for hematochezia accompanied by prolapsed rectal tissue for three months. On postoperative day 1 after external excision and internal ligation of mixed hemorrhoids, the patient reported no bowel movements, minimal flatus, and significant abdominal distension and pain. Presenting symptoms included abdominal fullness, mild tenderness on palpation, tympanic percussion notes, dark-red tongue with white greasy coating, wiry pulse, and visible anxiety. Diagnosis: postoperative abdominal distension with a TCM pattern of qi stagnation and blood stasis. Treatment principle: unblock the bowels to relieve distension while supplementing qi and supporting the body's vital forces. The patient received auricular scraping combined with herbal hot compress therapy twice daily for six sessions over three days. Following intervention, the abdominal distension score decreased from 3 to 0, Visual Analogue Scale (VAS) pain score dropped from 4 to 0, and anxiety resolved, demonstrating remarkable efficacy.

2.1 Nursing Assessment

2.1.1 Abdominal Distension Scoring Criteria Based on the *Guiding Principles for Clinical Research of New Chinese Medicines* (2002) [6]: Grade 0: no sensation of distension (0 points); Grade I: mild distension with perceived gas movement, not affecting rest or sleep, with mild abdominal protrusion and slightly increased abdominal wall tension (1 point); Grade II: moderate distension with nausea, affecting rest and sleep, with moderate abdominal protrusion and increased tension (2 points); Grade III: severe distension with abdominal pain, vomiting, anxiety, and groaning, severely impacting rest and sleep, marked abdominal protrusion, high abdominal wall tension, and tympanic percussion (3 points).

2.1.2 Pain Assessment Pain intensity was evaluated using the VAS scale. A 10-cm ruler was employed with “0” representing no pain and “10” indicating unbearable severe pain. Patients indicated their pain level on the scale, which researchers then scored. This patient’s initial abdominal pain score was 4.

2.1.3 Psychological Status Assessment The Self-Rating Anxiety Scale (SAS) [7] was administered, yielding a score of 65, indicating moderate anxiety.

2.2 Nursing Interventions

2.2.1 TCM Characteristic Nursing Auricular Scraping.

Auricular holographic scraping method: The patient assumed a supine position with the head turned to one side. The auricle was disinfected with alcohol swabs. After rubbing hands to generate warmth, the nurse massaged the ear to open the auricular microcirculation. A small amount of scraping oil was applied to the ear with a cotton swab. Using a scraping board, the practitioner followed the sequence: anterior auricle before posterior, from inner to outer, whole ear before local points, for approximately 30 minutes total—10 minutes on anterior auricle, 5 minutes on posterior, 10 minutes on selected acupoints based on pattern differentiation, and 5 minutes of massage. Anterior auricle sequence: earlobe, internal/external surfaces of antitragus, antihelix, scaphoid fossa, helix, anterior tragus, internal/external tragus, cavum conchae, cymba conchae. Posterior auricle sequence: posterior earlobe, outer 1/3 of posterior auricle, middle 1/3, inner 1/3, from auricular root to sternocleidomastoid muscle.

Acupoint selection: Based on pattern differentiation and *Auricular Therapeutics* [8], primary points selected were: Rectum, Large Intestine, Constipation Point, Abdomen, Sanjiao, and Digestive System Subcortex. Supplementary points: Spleen, Kidney, Lung. For emotional distress, add Liver, Gallbladder, and Liver Yang [9].

Precautions: Continuously observe skin color changes during scraping and inquire about patient comfort, gradually adjusting speed and pressure. After treatment, clean the skin and inspect for damage.

Treatment course: Twice daily for 3 days (one complete course).

Chinese Herbal Hot Compress.

A compress containing 200 g of processed *Evodia rutaecarpa* and 200 g of coarse salt was heated and applied to the Zhongwan acupoint (located on the anterior midline of the upper abdomen, 3 cun above the umbilicus). Temperature was maintained at patient-tolerable levels (not exceeding 50°C) and removed after 15 minutes [10]. Operators should continuously verify temperature comfort to prevent burns.

Patient comfort should be monitored throughout; treatment must be discontinued immediately if burning or excessive heat is reported. Local redness post-treatment is a normal reaction that patients should be reassured will subside spontaneously. Assist patients with clothing adjustment and maintain warmth after treatment.

Treatment course: Twice daily for 3 days (one complete course).

2.2.2 Conventional Nursing *Dietary care:* Patients were instructed to maintain regular meals and avoid gas-producing foods such as milk, soy milk, soybeans, and starchy products to prevent exacerbating distension.

Lifestyle care: Nurses encouraged and assisted patients with early mobilization in bed to promote gastrointestinal motility, and guided them through 10-minute sessions of anal sphincter exercises, abdominal muscle contraction, and diaphragmatic breathing [11].

Psychological care: Nurses maintained active communication, provided education and explanations, and guided patients to maintain positive mood through light music listening and relaxation techniques to avoid negative emotional stimuli.

2.3 Effect Evaluation

According to efficacy criteria, after one treatment course, the patient achieved complete recovery. Pre-intervention: the patient exhibited abdominal distension and pain with tympanic percussion, minimal flatus, dark-red tongue with white greasy coating, and wiry pulse (severe distension). Post-intervention (day 3): the patient reported increased flatus, significant distension relief, daily spontaneous bowel movements (small amounts of brown soft stool), light-red tongue with white coating, and wiry pulse. Abdominal distension score decreased from 3 to 0 (no distension), VAS pain score dropped from 4 to 0 (no pain), and SAS score decreased from 65 to 42 (resolution of anxiety, normalized psychological status). Detailed outcomes are presented in Table 1 .

Discussion

In TCM, abdominal distension falls under the categories of “intestinal obstruction” and “guan-ge.” The intestines reside in the abdominal cavity as transformation and transportation organs responsible for conveying, digesting, and

transmitting water and grains. Their physiological characteristics involve excretion without storage, fullness without repletion, constant movement, descending without ascending, and smooth downward flow as the normal state. Surgical manipulation and anesthesia stimulation cause significant damage to primordial qi and dual depletion of qi and blood, leading to qi stagnation and blood stasis that obstructs organs and meridians. This further disrupts organ function and gastrointestinal qi dynamics, causing reversal of ascending/descending functions and middle-jiao qi stagnation, manifesting as abdominal distension, pain, and constipation. Treatment should follow the principle of “promoting flow in the six fu organs” by moving qi to relieve distension and regulating bowel qi [12].

Auricular holographic scraping effectively combines systemic scraping with auricular acupuncture to regulate organ qi dynamics. As stated in *Lingshu • Kouwen*: “The ear is where all vessels converge [13,14].” In the 1950s, Chinese scholar Zhang Yingqing proposed the biographic law, which identifies three distribution patterns of auricular points: holographic law of auricular point distribution, holographic law of auricular meridians, and holographic law of auricular symmetry [15]. Based on these principles, auricular holographic therapy integrates visceral manifestation and meridian theories to regulate meridians, balance deficiency/excess, and harmonize internal functional activities through auricular point stimulation, achieving pattern-based treatment and qi supplementation. Auricular point selection rationale: Rectum and Large Intestine are selected as corresponding regional points to enhance intestinal peristalsis and unblock organs; Stomach and Abdomen facilitate heat drainage; Digestive System Subcortex regulates gastrointestinal function; Spleen and Sanjiao govern transformation and transportation; Lung (internally-externally related to the Large Intestine) governs descending and enhances fecal transmission; Spleen and Kidney strengthen the spleen, supplement qi, and promote bowel movements; Constipation Point is an empirical point for moistening intestines and relieving constipation. Combined, these points synergistically regulate organ function.

Processed *Evodia rutaecarpa* in the herbal hot compress regulates qi, dries dampness, and warms the middle to relieve pain. Coarse salt enters the Kidney meridian and exhibits excellent heat absorption; when heated and applied to *Zhongwan*, it alleviates epigastric pain, abdominal distension, poor appetite, and intestinal cramping while fortifying yang, supplementing qi, warming meridians, dispersing cold, and promoting qi and blood circulation [16,17]. This TCM therapy utilizes herbal properties and thermal effects to improve blood circulation, enhance organ activity, move qi to resolve stagnation, and warm meridians.

This case confirms the reliable clinical efficacy and significant outcomes of auricular scraping combined with herbal hot compress for preventing and treating postoperative abdominal distension. Auricular holographic scraping is a novel technique whose therapeutic scope and mechanisms require further exploration due to its recent clinical adoption. Unlike whole-body scraping, this procedure demands proficient technique and precise pressure control—insufficient force

fails to penetrate and affects efficacy, while excessive force damages auricular skin. Practitioners must possess solid TCM foundations to rapidly and accurately differentiate patterns and formulate effective protocols for individual patients.

Clinical observation demonstrates that these two TCM therapies offer comfortable procedures with high patient acceptance and compliance. They are unrestricted by location, protect patient privacy, overcome whole-body scraping's time-consuming nature, avoid the pain and poor compliance associated with auricular acupressure, and deliver remarkable efficacy [18]. Future work should expand sample sizes to further clarify clinical effects. Under current national initiatives promoting TCM nursing technologies, healthcare professionals should fully utilize TCM resources, capitalize on TCM nursing characteristics and advantages, and advance TCM nursing development.

Conflict of Interest Statement: The authors declare no conflicts of interest.

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