

The Effect of Humanized Nursing for Benign Frequent Ventricular Premature Beat

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Abstract: **Objective:** To explore the clinical effects of applying humanized nursing methods in patients with benign and frequent ventricular premature beats. 100 cases of patients with benign and frequent ventricular premature beats who were treated in our hospital were selected for research. The research was carried out from February 2020 to February 2021. The patients were nursed and treated with different nursing methods. Divided into a control group given conventional nursing methods and an experimental group given humanized example methods, the nursing effects of the two groups of patients were compared and analyzed. The effective rate after nursing in the experimental group was 96.00%, which was significantly different from 84.00% in the control group. The nursing satisfaction of the two groups was 98.00% and 82.00%, respectively. The nursing satisfaction of the experimental group was higher, and complications were higher. The incidence rates were 14.00% and 36.00% respectively. At the same time, there was no significant difference in somatization and obsessive-compulsive disorder between the two groups, $P>0.05$, while there were significant differences in other indicators. The experimental group was better, $P<0.05$, which means it is statistically significant. The application of humanized nursing methods in patients with benign and frequent ventricular premature beats has a significant clinical intervention effect, which can improve the effective rate, promote the recovery of the patients, and improve the symptoms of the patients, which has positive significance for the patients.

1 INTRODUCTION

For patients with benign and frequent ventricular premature beats, it is a common disease type in cardiovascular medicine. Patients can have six or more ventricular premature beats within a minute. The main symptoms of patients are arrhythmia and palpitations. For chest tightness and other conditions, when comparing patients with common diseases, the treatment of patients with benign and frequent ventricular premature beats is more difficult to carry out. According to relevant data, clinical treatment of patients with conventional nursing methods has good results, but this method will be restricted in the use of indications and contraindications, and the control effect of the patient's complication rate is poor (Huang 2019). In the context of the continuous development of clinical technology in our country, the nursing method is constantly advancing. The humanized nursing method is patient-centered and provides humanized intervention to the patient. It has a significant effect in applying it to patients with benign and frequent ventricular premature beats

(Zhou 2019). Based on this, this research applies the humanized nursing method, and expands the inquiry analysis as follows.

2 DATA ANALYSIS AND METHODS

2.1 General Information

The main personnel of this study were selected as patients with benign and frequent ventricular premature beats who were treated in our hospital from February 2020 to February 2021. The number of patients was 100. This study randomly divided them into two groups, namely the experimental group and the control group, which adopted different nursing methods, with 50 patients in each group. Among all 100 patients, 51 were males and 49 were females. The oldest patient was 87 years old and the youngest was 51 years old. (65.43 ± 5.45) years old was the mean age. According to the statistical method, there is no

significant difference in the general information of the two groups of patients in terms of age, gender, etc., $P>0.05$, which is comparable. This study was carried out after the approval of the hospital ethics committee, and the patients were informed and agreed to participate in this study. It can be ruled out that the patient has a history of mental illness and the possibility of incomplete data.

2.2 Research Methods

The patients in the control group were given conventional nursing methods. After the patients were admitted to the hospital, health education was given to the patients, the degree of attention of the patients was increased, and the patients were urged to take them on time, and the patients were monitored. The nursing method of the experimental group of patients is humanized nursing intervention. In the specific implementation process, the patient's condition is first evaluated, after the patient is admitted to the hospital, the patient is checked, and active communication with the patient is carried out to ensure that the patient's past history is maintained. The cause of onset and the time of onset should be mastered, and the admission information of patients should be improved to ensure that patients are given better care services and treatment plans based on their actual conditions. First of all, provide patients with humanized nursing services. Secondly, nurses need to warmly receive patients when they are admitted to the hospital, and then introduce the hospital environment, hospitalization system and attending doctors to the patients to help the patients familiarize themselves with the hospital environment and reduce unfamiliarity. After the patient is admitted to the hospital, help the patient to enter the hospital, lead the patient to check the ward, arrange the bed, check the patient's vital signs, ask the patient's needs, try to meet the patient's needs, and patiently answer the patient's questions to ensure that the patient adapts to the hospital environment as soon as possible. Next, provide patients with environmental care, maintain the ward environment, ensure fresh air, effectively control indoor temperature and humidity, and establish entertainment venues in the ward, establish a knowledge column for patients, and place health knowledge magazines to help patients understand the disease knowledge, reduce bad emotions. At the same time, the patient's condition and vital signs are regularly monitored, mainly including electrocardiogram, lung function, etc., and the

patient's feelings are asked. When the patient is found to have dizziness, chest tightness and other adverse conditions, assist the patient to choose a high pillow position, or choose a semi-sitting position, explain the cause of this situation to the patient, and eliminate the patient's nervousness. And try to give patients concentrated rest time to ensure the quality of sleep. In addition, health education is given to patients, starting from the actual education level of the patient, using easy-to-understand language to explain the disease knowledge, clinical treatment methods and precautions to the patient, providing the patient with the understanding of the disease, avoiding excessive worry, and informing the patient of the condition as appropriate. For the development situation, prepare patients for psychological preparation, inform patients of the relationship between disease development and psychological emotions, ensure that patients maintain a good mood, and urge patients to take medication on time to improve patient compliance. Finally, in response to the patients' adverse psychological problems, the hospital needs to provide psychological care to the patients, and carry out active communication and psychological counseling with the patients, which will help to alleviate the patients' unhealthy emotions, and positively encourage the patients to improve their self-confidence in treatment.

2.3 Statistical Methods

For data statistics, SPSS20.0 software is mainly used. Among them, for the calculation of measurement data, the result is expressed as ($\bar{x} \pm s$), and the verification is mainly based on the t value. For the statistics of counting data, the comparison result adopts ($n, \%$) for counting and verifying, it is expressed as a Z value. When the result shows that the data is less than 0.05 hours, it means that the calculation of this study is meaningful.

3 RESULTS

3.1 Nursing Effect

The effective rate of patients in the experimental group after nursing was 96.00%, which was significantly different from the 84.00% of patients in the control group, $P<0.05$, which was statistically significant.

Table 1: Comparison of nursing effect between the two groups of patients ($\bar{X} \pm s$).

Group	Significant	Effective	Ineffective	Effective rate
Experimental group (n=50)	37 (74.00)	11 (22.00)	2 (4.00)	48 (96.00)
Control group (n=50)	24 (48.00)	18 (36.00)	8 (16.00)	42 (84.00)
X ²				7.085
P				<0.05

3.2 Nursing Satisfaction

The nursing satisfaction of the two groups of patients

were 98.00% and 82.00%, respectively. The nursing satisfaction of the experimental group was higher, and the difference between the groups was large, $P < 0.05$.

Table 2: Two groups of patient care satisfaction [(%)].

Group	Very satisfied	Satisfied	Unsatisfied	Satisfaction
Experimental group (n=50)	36 (72.00)	13 (26.00)	1 (2.00)	49 (98.00)
Control group (n=50)	21 (42.00)	20 (40.00)	9 (18.00)	41 (82.00)
X ²				9.506
P				<0.05

3.3 SCL-90 Score

There was no significant difference in somatization and obsessive-compulsive disorder between the two

groups, $P > 0.05$, while there were significant differences in other indicators. The experimental group was better, $P < 0.05$, which was statistically significant.

Table 3: Comparison of SCL-90 scores between the two groups of patients after nursing ($\bar{X} \pm s$).

Group	Somatization	Obsessive-compulsive disorder	Interpersonal relationship	Melancholy	anxiety	hostility	terror	Paranoid	Psychotic
Experimental group (n=50)	1.44±0.22	1.54±0.32	1.65±0.33	1.61±0.23	1.57±0.32	1.42±0.33	1.21±0.22	1.32±0.32	1.24±0.33

Control group (n=50)	1.34±0.33	4.003	<0.05
	1.56±0.23	2.385	<0.05
	1.46±0.22	2.998	<0.05
	1.54±0.45	3.384	<0.05
	1.78±0.33	4.856	<0.05
	1.77±0.35	4.005	<0.05
	1.92±0.43	2.940	<0.05
	1.67±0.43	3.225	<0.05
	1.52±0.22	4.034	<0.05

3.4 Complication Rate

Complications of the two groups of patients mainly

included coronary heart disease, rheumatic heart disease and cardiomyopathy. The incidence of the two groups was 14.00% and 36.00%. There was a significant difference between the groups, $P < 0.05$.

Table 4: Comparison of the incidence of complications among patients [n(%)].

Group	Coronary heart disease	Cardiac disease	Rheumatic heart disease	Incidence
Experimental group (n=50)	2 (4.00)	3 (6.00)	2 (10.00)	7 (14.00)
Control group (n=50)	6 (10.00)	5 (14.00)	7 (24.00)	18 (36.00)
X^2				4.456
p				<0.05

4 DISCUSSION

Benign frequent ventricular premature beats can be seen in normal people, and the incidence of patients is gradually increasing as the patient's age continues to increase (Wang 2019). After the patient becomes ill, if timely intervention is not given, it is easy to cause complications, including symptoms such as coronary heart disease, rheumatic heart disease, and mitral valve prolapse. In patients with benign and frequent ventricular premature beats, the general nursing method is easy to relapse, and after the humanized nursing method is applied, the recurrence rate can be reduced (Zhang 2020). Therefore, to promote the enhancement of nursing services for nursing staff and actively carry out humanized nursing work, while optimizing the workload of medical staff, it can provide patients with accurate nursing services, provide safety guarantees for

patients, and significantly reduce the incidence of patients' complications (Yu, Li 2020).

Humanized nursing services are patient-centered, providing comprehensive nursing services for patients, conducting comprehensive psychological and physical interventions, and improving patient comfort. When the humanized nursing service is applied, the cooperation between patients and doctors can be improved, the self-confidence of patients in treatment can be improved, and doctor-patient disputes can be reduced (Chi 2019). At the same time, in the implementation of humanized nursing services, the professional level of medical staff can be improved, the reputation of the hospital can be guaranteed, the sense of responsibility and professional ethics of the staff can be promoted, and the nursing staff can complete nursing with a rigorous work attitude and professional work level (Li 2019). After the application of humanized nursing services in this study, the results show that the experimental

group has better nursing effect, higher satisfaction, lower complication rate, and large differences in data between groups. It shows that humanized nursing has a higher application value in patients with benign and frequent ventricular premature beats.

In summary, the application of humanized nursing methods to patients with benign and frequent ventricular premature beats has significant clinical intervention effects, which can improve the quality of life of patients, promote satisfaction, and reduce the incidence of patient complications. The clinical application is significant and should be promoted.

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