

Value Exploration of Introducing Traditional Chinese Medicine Thinking into Health Management of Elderly Diabetes

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Abstract

Purpose: To explore and analyze the value of introducing traditional Chinese medicine thinking into health management of elderly diabetes. **Selection methods:** from January 2020 to June 2021 treated 100 cases of elderly diabetes with chronic diseases, random number table method is divided into the experimental group and control group, each group of 50 cases of senile chronic cases, two groups of elderly diabetes with chronic diseases are based on the actual condition to carry out the routine treatment and management, the experimental group based on the thinking of traditional Chinese medicine health management at the same time. The control effect of chronic disease and quality of life of the two groups were evaluated and compared after 12 months of continuous management. **Results:** After management intervention, the disease control effect of elderly diabetes with chronic diseases in the experimental group was better than that of the control group, and the difference was statistically significant ($P < 0.05$). After management intervention, the WHOQOLBREF scale scores of elderly diabetes with chronic diseases in the experimental group were higher than those in the control group, and the difference was statistically significant ($P < 0.05$). **Conclusion:** The introduction of traditional Chinese medicine thinking into the health management of elderly diabetes can effectively improve the effect of disease control and the quality of life of patients. Therefore, the health management model based on traditional Chinese medicine thinking is a management model with outstanding application value, which is worth developing and promoting in the elderly diabetes with chronic diseases.

Keywords

Elderly diabetes, Chronic diseases, Traditional Chinese medicine thinking, Health management, Traditional Chinese medicine characteristic therapy

1. Introduction

Chronic diseases, namely chronic noninfectious diseases, are increasingly common in the context of disease structure transformation and disease spectrum change, and pose the greatest threat to human quality of life and life safety [1-2]. Chronic diseases have the characteristics of hidden onset, lack of specific cure, lack of biological etiology evidence, slow progress and so on, which puts forward higher requirements for diagnosis, treatment and management. The elderly is the main part of the chronic illnesses, in progressively under the situation of population aging society, the elderly diabetes with chronic health management has become the hotspot in research of medicine

in recent years, health management involving medical, nursing, rehabilitation, health promotion and other aspects of content, the specific content of management is also associated with the construction of medical health system gradually improve. Traditional Chinese medicine is Chinese traditional medicine, after thousands of years of development, the overall concept, the concept of the department outside the internal theoretical system is complete and has rich practical experience, in the development of medicine, treatment of disease prevention plays an important role. In recent years, our hospital has introduced the thinking of traditional Chinese medicine into the health management of chronic diseases, and guided the development of the management of chronic diseases through the concepts of "treating without disease", "three separate treatment, seven separate care" in traditional Chinese medicine, aiming to improve the disease control effect and prognosis effect of elderly diabetes with chronic diseases. This study analyzes the application measures and value of health management based on TCM thinking based on the data of some elderly diabetes with chronic diseases.

2. Data and Methods

2.1. General data

A total of 100 elderly diabetes with chronic diseases admitted to our hospital from January 2020 to June 2021 were selected and divided into experimental group and control group by random number table method, with 50 cases in each group. There was no significant difference in the general data between the two groups ($P > 0.05$), as shown in Table 1. Inclusion criteria: meeting the diagnostic criteria for chronic diseases; The matching data such as disease course and medication history were clear. Cooperate in the whole process of management work; High medication compliance; No chronic disease complications; People with normal mental state and psychological status. Exclusion criteria: patients with organic lesions; Patients with a history of surgical treatment within 12 months before enrollment; Leave the local area for a long time during the management period (more than 14 days for a single time or more than 2 times per year); Persons complicated with infectious diseases; Patients with malignant lesions.

Table 1. Comparison of general data between the two groups of elderly diabetes with chronic diseases

group	gender	age	types of chronic diseases	course of chronic disease	bmi
	(Male/female, case)	($\bar{x} \pm s$, age)	(Diabetes/hypertension/ Diabetes mellitus with hypertension, case)	($\bar{x} \pm s$, years)	($\bar{x} \pm s$, kg/m ²)
The experimental group/50	28/22	75.29±8.92	18/17/15	9.75±3.31	23.18±2.18
The control group/50	27/23	76.01±9.33	17/17/16	10.22±3.47	22.79±2.21
χ^2/t	0.040	0.394	0.061	0.693	0.888
P	0.841	0.694	0.970	0.490	0.377

2.2. Methods

2.2.1. Control group

Carrying out routine treatment and management of elderly diabetes, the attending physician formulates the medication, the pharmacist dispenses the medicine after checking the prescription without error. The nurse explains the medication in detail to the patient, combined with the specific conditions of patients with chronic diseases and the requirements of daily diet, activities and other aspects of attention, issued chronic disease related health education atlas for patients and their families to read. Patients were regularly admitted to the hospital for further consultation and medicine, and were admitted to the hospital in time if they were unwell. The medical staff should assess the patient's condition and adjust the treatment plan during admission.

2.2.2. Experimental group

On the basis of the control group, health management based on traditional Chinese medicine thinking was also implemented, specific as follows:

1) Establishment and training of TCM health management team: A TCM health management team shall be established by TCM doctors, general practitioners, health managers and general practitioners. Among them, there are 2 doctors of traditional Chinese medicine, 2 general practitioners, 3 health managers and 8 general practitioners. TCM

doctors make TCM diagnosis for each patient through four TCM diagnoses. Identification of traditional Chinese medicine constitution, mainly divided into phlegm-dampness, damp-heat, qi evil, Yin deficiency, Yang deficiency and other different constitutions. Team doctors and health managers define the key points of diagnosis, treatment and health management of each elderly chronic disease patient according to their actual condition and TCM constitution. The medical staff in the group received professional training in traditional Chinese medicine thinking, chronic diseases, health management and so on. The training of TCM related professional knowledge helped the medical staff in the group to construct traditional Chinese medicine thinking and improve the professional level of chronic health management.

2) Development of health management plan based on traditional Chinese medicine thinking: Through the TCM health management team meeting, the health management plan of each elderly diabetes with chronic diseases is formulated. Patients are diagnosed with chronic diseases, so the plan is formulated based on the TCM thinking of "preventing changes from existing diseases". Health management plan covers health education, psychological intervention, behavior management and characteristics of traditional Chinese medicine therapy intervention, etc., including health education must adopt diversified ways, including face to face communication and health lecture, health distributed video data broadcast, manuals, etc., the detailed content of health education were written by chronic disease of traditional Chinese medicine, western medicine experts, security health education is scientific and standardization. Psychological intervention and behavior management should be formulated in combination with patients' actual psychological and emotional state, behavior habits and activity rules. TCM characteristic therapy is formulated by TCM doctors, and TCM treatment plan is formulated according to the specific TCM constitution and syndrome differentiation of patients. Such as traditional Chinese acupuncture, auricular pressure bean, acupressure, acupoint injection, etc. After the completion of the health management plan, the nursing staff will introduce the specific contents of the health management plan to the patients and their families in plain language to obtain the cooperation of the patients and their families.

3) Health management program implementation: Nurses provide face-to-face health guidance services for patients based on professional health education content. To introduce the causes of chronic diseases, lesion characteristics, disease progression, common complications and hazards to patients, so as to enhance their attention to their own lesions. The team doctors carry out health lectures and record health videos from time to time to gradually improve patients' cognitive level in the process of health management. In the process of health management, nurses need to pay attention to the intervention of patients' psychological status, and use different ways such as speech guidance, encouraging patients to express, guiding patients to do things they are interested in to help patients improve negative emotions and build a positive and optimistic mentality. Based on the existing behavior habits and activity rules of patients, it is necessary to timely point out and help patients gradually improve the bad behaviors, standardize the behavior patterns of diet, activity and other aspects. Traditional Chinese medicine doctors regularly carry out traditional Chinese medicine treatment for patients, and promote the control of chronic diseases through traditional Chinese acupuncture, auricular acupoint pressure, acupoint pressure, etc.

2.3. Observation indicators

2.3.1. Evaluation of disease control effect:

In the management of 12 months after the intervention, according to the patients with chronic diseases related to check index, symptoms and signs of simple control, adverse reactions happen curative effect evaluation, chronic diseases related to check index improved 20% or more, compared with before, no obvious symptoms and signs, and no adverse reactions happen to pay off, check index intervention 1-19%, compared with before, signs and symptoms mild, If no adverse reaction occurs, it is valid, otherwise it is invalid.

2.3.2. Quality of life [3] Evaluation:

After 12 months of management intervention, WHOQOLBREF scale was used to evaluate the quality of life of patients from the fields of physiology, psychology, social relationship, environment and so on. The score was 0-100, and the score was positively correlated with the level of quality of life.

2.4. Statistical methods

SPSS23.0 statistical software was used for processing, and measurement data were expressed as ($\bar{x} \pm s$), T-test was used for comparison, and count data were expressed as percentages. χ^2 test was used for comparison, $P < 0.05$ was considered statistically significant.

3. Results

(1) Comparison of disease control effect between two groups of elderly diabetes with chronic diseases: After management intervention, the disease control effect of the experimental group was better than that of the control group, and the difference was statistically significant ($P < 0.05$), as shown in Table 2.

Table 2. Comparison of disease control effect between two groups of elderly diabetes with chronic diseases (case %)

group	Significantly effective	effective	invalid	Total effective rate
The experimental group/50	30(60.00)	17(34.00)	3(6.00)	47(94.00)
The control group/50	17(34.00)	20(40.00)	13(26.00)	37(74.00)
χ^2				7.440
P				0.006

(2) Comparison of quality of life of elderly diabetes with chronic diseases between the two groups: After management intervention, the scores of WHOQOLBREF scale in all fields of elderly diabetes with chronic diseases in the experimental group were higher than those in the control group, and the differences were statistically significant ($P < 0.05$), as shown in Table 3.

Table 3. Comparison of disease control effect between two groups of elderly diabetes with chronic diseases ($\bar{x} \pm s$, points)

group	Physical field	Psychological field	Domain of social relations	The environment
The experimental group/50	82.17±5.39	84.27±3.29	85.11±3.90	83.78±4.56
The control group/50	74.20±6.12	75.31±4.34	78.24±4.51	72.12±6.03
t	6.911	11.633	8.147	10.906
P	< 0.001	< 0.001	< 0.001	< 0.001

4. Discuss

Under the background of the high incidence of chronic diseases and the aging of population, China has actively explored the management model of chronic diseases in recent years, focusing on the model of patient self-management, innovating the nursing framework, and independently analyzing the management model of chronic diseases at home and abroad by Chinese doctors, which has been widely recognized and promoted [4]. Domestic research on chronic disease management emphasizes multi-linkage, involving superior medical institutions, primary medical institutions, patients and their families, and implementing management from different aspects such as chronic disease health knowledge publicity, lifestyle and behavioral habits transformation, individualized nursing provision, and relying on the management of primary medical institutions [5-6]. The concept of health management in traditional Chinese medicine has a long history. As recorded in Huangdi Neijing, an ancient book of Traditional Chinese Medicine: "Law in Yin and Yang, the number of rules, rules of food and drink, daily life", "grain, five fruit help, five livestock benefit, five dishes sheng, taste and fill thin gas". This study analyzed the value of TCM thinking in health management of elderly diabetes with chronic diseases. It can be seen that after management intervention, the disease control effect of elderly diabetes with chronic diseases in the experimental group is better than that of the control group, and the scores of WHOQOLBREF scale in all fields of elderly diabetes with chronic diseases in the experimental group are higher than those in the control group, and the application effect is satisfactory.

5. Conclusion

In conclusion, the health management intervention based on traditional Chinese medicine thinking is of outstanding value in improving the effect of disease control and the quality of life of elderly diabetes with chronic diseases.

6. Ethics

All patients in this study were clearly aware of the specific content of the study, and the signing of relevant in-

formed consent was improved. The study was reviewed and approved by the ethics committee of the hospital.

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