

美皮康在骨科外固定架患者护理中的应用

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摘要 目的:探讨美皮康应用于外固定架针孔换药方式的临床效果。方法:将骨科 50 例四肢骨折行外固定架固定的患者随机分成实验组 24 例和对照组 26 例。实验组以美皮康有边型敷料换药,对照组以临床常用的络合碘纱布条进行换药,比较两组每天更换敷料频次、外固定针孔及周围皮肤红肿、渗出情况、护士更换污染床单被套频次及护士满意度。结果:实验组每天更换敷料频次少于对照组($P < 0.05$)、外固定针孔及周围皮肤红肿、渗出等情况,实验组均优于对照组($P < 0.05$)、实验组中护士更换污染床单被套频次明显少于对照组($P < 0.05$)、护士满意度高于对照组($P < 0.05$)。结论:美皮康对保护骨科外固定针孔的治疗效果优于传统络合碘纱布条换药,对预防外固定针道感染有效,同时减轻护士维持床单位整洁、减少床单被套的更换频次,提高护士的满意度。

关键词 外固定架 护理 换药 美皮康

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Application of Mepilex Border in nursing patients with external pin fixation

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ABSTRACT Objective: To explore the clinical effects of Mepilex Border used in the dressing change for the pinholes of external fixation. **Methods:** 50 patients with external fixation for the treatment of fracture of extremities were divided into two groups at random: 24 patients in the control group and 26 patients in the experimental group. The experimental group used the edge-type Mepilex Border to change dressings, while the control group was dealt with the commonly used iodine gauze in clinic. The two groups were compared in terms of the frequencies of dressing change; the conditions of the pinholes of external fixation; the redness, swelling, and exudation of surrounding skin; the frequencies of replacement of contaminated bedding and nurses satisfaction. **Results:** The frequency of daily dressing change in the experimental group was lower than that of the control group ($P < 0.05$), the conditions of the external fixation pinhole and the redness, swelling and exudation of surrounding skin were better than that of the control group ($P < 0.05$), the frequency of replacement of the contaminated bedding was obviously lower than that in control group ($P < 0.05$), and nurses satisfaction was higher than that in control group ($P < 0.05$). **Conclusion:** The therapeutic effect of the Mepilex Border to protect the pinholes of external fixation was better than that of traditional dressing change with iodine gauze. The Mepilex Border effectively prevents the infections of needle passage of external fixation, and also reduce nurse's workload to maintain the neatness of bed, and reduces the frequency of replacement of the contaminated bedding, and improves the nurses satisfaction.

Key words: External fixation; Nursing; Dressing change; Mepilex Border

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四肢骨折在创伤救治中占重要地位,由于外固定架治疗既能使骨折部位保持良好的体位,又不增加机体的创伤,同时患者可早期开始关节活动。尤其是一些高龄和有严重内科疾病而不能耐受大手术的骨折病人,对于开放性骨折且污染较重的病人,多使用外固定架固定。外固定所需要的时间比较长,很容易出现全身与局部并发症,在这些并发症中外固定架术后的针孔感染,不仅对治疗效果产生直接影响,更会给患者带来肉体和精神上的双重伤害,所以外固定后的针孔护理显得很重要。

目前,在临床上传统的方式是在患者针孔进行 2 次消毒之后,再用无菌络合碘纱布条缠绕于针孔周围换药,但是将美皮康用于外固定架针孔护理暂未见有相关报道。我们尝试性地将

美皮康有边型敷料进行针孔换药保护,取得了较满意的效果,现报道如下。

1 研究对象与方法

1.1 研究对象

选取 2009 年 1 月至 2010 年 12 月,在我院骨科住院行外固定架固定治疗,并且其诊疗时间大于 2 周的患者共计 50 例。将其分成实验组与对照组,实验组患者 24 例,男性 18 例,女性 6 例,年龄 19-75 岁;胫腓骨骨折患者 15 例,肱骨骨折患者 9 例。对照组患者共计 26 例,男性 20 例,女性 6 例,年龄 20-82 岁;胫腓骨骨折患者 15 例,肱骨骨折患者 11 例。对照组与实验组的年龄、骨折部位、严重创面、感染伤口等比较来看,差异无明显统计学意义($P < 0.05$)。

1.2 研究方法

两组患者手术后均行外固定架固定,患者行外固定架固定

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术后,针孔换药均为护士操作,两组均采用0.05%络合碘消毒针孔创面,并用无菌干棉球擦干,实验组使用美皮康有边型敷料贴于患处,该敷贴自带粘胶固定,对照组则使用传统的无菌络合碘纱布条缠绕于外固定针孔处。更换敷料标准:无菌络合碘纱布条被渗出液及血液渗湿需更换。

1.3 评价方法

比较2组每天更换敷料、外固定针孔及周围皮肤红肿、渗出、敷料脱落、床单被套被渗出液污染等病例数及护士满意度。护士满意度主要是从护士对该种换药方法的满意程度、护士对护理工作量的满意程度两方面进行评定,每个条目设为1-5分,1分为非常不满意,5分为非常满意,总分 ≥ 8 分,定为满意。

1.4 统计学方法

各组数据均采用SPSS 14.0统计软件进行分析,计数资料采用卡方检验, $P < 0.05$ 为差异有统计学意义。

2 结果

两组更换敷料次数比较如表1显示,术后1-5d,实验组每天更换敷料病例数少于对照组($P < 0.05$)。

患者术后7d对照组和实验组实行外固定架固定术后针孔和附近皮肤出现红肿、渗出等情况,如表2,其渗出的例数要明显比对照组少($P < 0.05$)。

因针孔渗出护士更换床单被套频次比较,如表3,其更换床单被套频次实验组明显低于对照组($P < 0.05$),实验组护士满意度高于对照组护士满意度($P < 0.05$)。

表1 两组术后更换敷料次数比较

Table 1 Comparison of the frequencies of postoperative dressing change between two groups

Group	Cases (pin hole)	The operative day	The first postoperative day	The second postoperative day	The third postoperative day	The forth postoperative day	The fifth postoperative day
The experi- mental group	24(96)	2(8)	3(12)	3(12)	3(12)	3(12)	2(8)
The control group	26(104)	5(20)	23(92)	13(52)	14(56)	17(68)	9(36)
X^2		7.00	24.04	16.00	17.00	11.53	13.09
P		< 0.05	< 0.05	< 0.05	< 0.05	< 0.05	< 0.05

表2 术后7d两组外固定针孔及周围皮肤红肿、渗出液情况比较(n)

Table 2 Comparison of the conditions of the pinholes of external fixation and the redness, swelling and exudation of surrounding skin on the 7th day after the operation between two groups

Group	Cases (pin hole)	Pinhole and the redness, swelling of surrounding skin	Ooze
Experimental group	24(96)	3	3
Control group	26(104)	6	8
X^2		20.48	15.68
P		< 0.05	< 0.05

表3 因针孔渗出护士更换污染床单被套频次及护士满意度比较

Table 3 Comparison of the frequency of replacement of contaminated bedding and the the satisfaction of nurse

Group	Frequency of Replacement(time)	Nurses satisfaction
Experimental group(n=24)	2	20
Control group(n=26)	24	10
X^2	31.26	10.47
P	< 0.05	< 0.05

3 讨论

外固定架固定是四肢骨折常见的治疗技术。外固定架固定手术是有创治疗技术^[1],固定针孔术后出现出血、针孔早期有渗出液较常见,管理不当针孔感染时常发生。针孔护理是骨科护

理工作较重要的一项工作内容,如何做到有效的、安全的护理是骨科护士的责任和义务。长期以来采用的传统针孔敷料是无菌络合碘纱布条缠绕于针孔周围,对渗出液吸收效果差,渗出液浸湿敷料影响针孔周围皮肤健康,增加感染机会,同时每天均需换药。本组资料表明,采用美皮康敷贴换药,换药次数、更

换床单被套频次、固定针孔敷料脱落、针孔渗出液的例数、均明显少于无菌络合碘纱布条换药。由此可见,使用美皮康敷料能有效减少针孔感染,保持针孔周围的清洁。另外,传统的换药方式及针孔的渗出液很容易污染床单,导致护士更换床单次数增加,增加患者痛苦,同时也增加护士工作量,美皮康敷料的使用大大地减少了护士在这方面的工作量,提高了护士的满意度。

传统的纱布敷料换药方式,通常建立在干燥创口愈合环境的基础上,有以下不足之处:①创口脱水、结痂,结痂会阻碍表皮细胞迁移,因为细胞的迁移主要从创缘开始,而结痂迫使表皮细胞的迁移绕经痂皮下,从而延长了愈合时间^[2]。②纱布敷料不能保证伤口的温度和湿度,敷料与创面粘连,更换敷料时再次机械性损伤,不能有效阻止细菌的侵入。③创口长期不能愈合,加重患者的痛苦和经济负担,同时也增加了护理管理难度。

美皮康是一种无菌黏性的新型敷料,能够保持针孔湿润环境,利于在湿度、温度和 pH 适宜的情况下愈合,有效地预防针孔感染的发生。美皮康有边型敷料能加快针孔周围的皮肤血液循环,改善局部情况,背衬光滑防水、透气。美皮康吸收水份强,避免局部潮湿,可减少对局部皮肤的直接刺激,同时对针孔与外界也起着屏障的作用^[4]。它柔软吸收渗液,保持一个湿润的伤口愈合环境,减少浸润发生的危险,可促进清创^[3-4],敷料也不必揭去即可观察创面情况,避免反复换药对创面刺激,促进创面更快愈合。采用美皮康有边型敷料换药,在外固定架固定期间无感染病例发生。

综上所述,新型敷贴美皮康与络合碘纱布条换药方法比较,固定针孔换药次数减少,能有效地预防感染,促进伤口的愈合,减轻了护士的工作量,值得临床推广。

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