

## ABSTRACTS

### STUDY ON THE STRATEGY OF RELIEVING CHILDREN'S ANXIETY IN THE TREATMENT OF CHILDREN WITH KAWASAKI DISEASE

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**Background:** Pediatric anxiety disorder is common in school-age children, especially in girls. Children with infantile anxiety disorder often worry and fear because of poor academic performance and sensitive response to strange environment, and even panic, crying constantly. They are very sensitive to the criticism of teachers and the views of students. They often worry about being ridiculed by others, pay too much attention to the situation that has not yet happened, and are accompanied by unfounded troubles. He is also overly anxious about some trivial daily things. When acute anxiety disorder occurs, children show symptoms of autonomic nerve dysfunction such as excessive irritability, anxiety, poor sleep, nightmares, dream talk, loss of appetite, heartbeat, shortness of breath, sweating, frequent urination, headache and so on. Children often dare not sleep alone at night, afraid of darkness, often need their mother's company, often accompanied by nocturnal enuresis. The nervous system of such children is often underdeveloped and too sensitive to subtle changes in the outside world. Some parents have anxiety and give their children an "imitation" influence. If parents can't correctly guide their children's anxiety, but they also have a sense of anxiety, it may make their children indulge in the low mood, can't get rid of it, and gradually deteriorate. Kawasaki disease can also be called skin mucous membrane lymph node syndrome. The incidence rate has gradually increased in recent years. The main pathological change of Kawasaki disease is the allergic reaction of small and medium-sized arteries in the whole body. Children will have acute fever with rash, mucosal congestion and bayberry tongue. In the recovery period, there will be damage to the cardiovascular system and enlargement of lymph nodes. Kawasaki disease will invade multiple systems of the whole body, and the most serious is the damage to the coronary artery. Kawasaki disease in children is a common disease in clinical pediatrics. The specific etiology is still unknown. In the early stage of onset, there are clinical manifestations such as fever and rash, eye conjunctival membrane congestion, bayberry tongue, palm and plantar erythema, hand and foot hard edema and so on. With the continuous development of the disease, it can induce serious cardiovascular complications and pose a threat to the physical and mental health of children. Therefore, it is necessary to give effective psychological nursing to children in the treatment of Kawasaki disease in order to reduce the occurrence of related psychological diseases and ensure the prognosis. Routine nursing is a common means of clinical intervention. Although it has a certain effect, it is not flexible and cannot meet the reasonable needs of children.

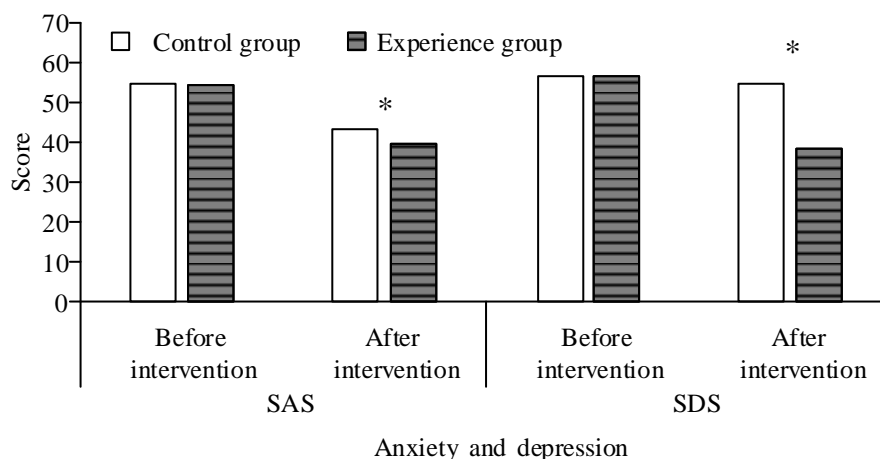
**Objective:** This study intervened the prognosis of children with Kawasaki disease through psychological comfort nursing, carried out nursing content with patients as the core, and implemented nursing through psychological comfort nursing, life comfort nursing, diet comfort nursing, health education, posture comfort nursing and other aspects, so as to effectively ensure the physiology and psychology of children, so as to improve the effect of intervention.

**Subjects and methods:** 160 children with Kawasaki disease treated in a hospital in 2021 were selected as the research objects. They were divided into control group and experimental group, with an average of 80 cases in each group. The control group was given routine nursing and the experimental group was given psychological comfort nursing. There were 50 males and 30 females in the experimental group, with an average age of  $(3.64 \pm 1.59)$  years. There were 52 males and 28 females in the control group, with an average age of  $(3.69 \pm 1.60)$  years. The comparison of general data between the two groups was not statistically significant ( $P > 0.05$ ). This study has been approved by the medical ethics committee, and all subject guardians have signed the informed consent form.

**Study design:** Before and after psychological comfort nursing intervention, the subjects were evaluated by Self-rating Anxiety Scale (SAS) and Self-rating Depression Scale (SDS), and the scale was scored and counted by full-time staff. Among them, the score limit of SAS scale is 50 points. More than 50 points indicate anxiety. The lower the score, the healthier the mind; The score limit of SDS scale is 53 points. More than 53 points indicate depression. The lower the score, the healthier the psychology.

**Methods:** The relevant data were calculated and counted by Excel software and SPSS20.0 software.

**Results:** As shown in Figure 1, after the intervention, the SAS and SDS scores of the experimental group were significantly lower than those of the control group ( $P < 0.05$ ). The results not only show the effect of psychological comfort nursing on children's psychological improvement, but also show that this intervention mode is significantly better than the traditional nursing mode.



**Figure 1.** Comparison of anxiety and depression between the two groups  
 Note: Comparison between groups, \* $P < 0.05$ .

**Conclusions:** Psychological comfort nursing refers to an individualized nursing method centered on patients, which is mainly to care for patients as much as possible, help patients recover as soon as possible, and help patients reduce their fear of disease. At the same time, it carries out humanized care and nursing, improve patients' compliance and improve the treatment effect to the greatest extent. The results showed that after the intervention, the scores of SAS and SDS in the experimental group were significantly lower than those in the control group ( $P < 0.05$ ), indicating that psychological comfort nursing can help reduce the time of symptom relief, help parents recognize Kawasaki disease and improve nursing satisfaction.

**Note:** Yanjun Wang and Li Tong are tied for the first author.

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## REGULATING EFFECT OF PHYSICAL TRAINING ON DEPRESSED STUDENTS

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**Background:** In recent years, reports of depression among college students have been appearing in the public view. Depression is characterized by depression, slow thinking and reduced speech and movement. Depression not only causes pressure on patients' life and work, but also a serious burden on patients' families. About 15% of patients with depression die of suicide every year. Research shows that 12.29% of people in China suffer from depression, which has become the second largest disease in China. According to statistics, more than 300 million people worldwide have suffered from depression, and these data are still rising year by year. Nearly 25% of Chinese college students have experienced depression, but less than 10% of them have received professional treatment. College students belong to the later stage of their youth physically. They also need to constantly improve themselves in psychological exploration. They are moving from dependence to independence in life. Now college students are facing increasing pressure, and college students' depression has become an invisible executioner in life. The study points out that 29% of college students have varying degrees of depression, including 20% mild depression, 7% moderate depression and 2% severe depression. The situation is not optimistic. Depression has become a public concern. Therefore, how to solve college students' depression has become an important problem. Some scholars pointed out that sports training is a kind of sports activity that people choose themselves according to their physical needs and use various sports means to develop their body, enhance their physique, improve their health and adjust their mental state. It can effectively reduce the degree of depression of patients. This is because reasonable physical training can speed up the blood circulation of the brain and the whole body, which is good for the development of the patient's intelligence and creativity. It can also distract the patient's attention and get rid of the troubled events. Therefore, from the perspective of improving college students' mental health and treating mental disorders, we should vigorously promote and organize college students to actively participate in physical training, and pay attention to the synchronous development of physical health and mental health in exercise.