

communication activities, but in the process of news communication, the effect “alienation” produced by the complex effects of cognitive psychology such as audience psychology, projection psychology, expectation psychology and association psychology cannot be ignored. To effectively prevent the alienation of effect, news communicators should strive to realize three changes: from “communicator center” to “Audience Center”. From “subjective communication” to “active communication”. From paying attention to the design of subjective intention to activating the cognitive ability of the audience, so as to avoid the negative impact of news communication and continuously improve the quality of news communication. In view of this, this paper studies the impact of audience cognitive psychology on the effect of news communication.

Objective: In order to clarify the connection mechanism between the audience’s cognitive psychology and the news communication effect, this paper analyzes the correlation between the audience’s cognitive psychology and the news communication effect, in order to provide a perspective and strategy for increasing the news communication effect.

Subjects and methods: Randomly select 100 volunteers in our city as the research object, and conduct cognitive psychological intervention on 100 volunteers, analyze the cognitive psychological changes of news editors before and after the intervention, and explore the correlation between volunteer cognitive psychological intervention and news communication effect.

Methods: Use SPSS20.0 software to count the impact of volunteers’ cognitive psychological intervention on the effect of news communication.

Results: Figure 1 shows the correlation between cognitive psychological intervention and news communication effect. It can be seen from Figure 1 that the cognitive psychological intervention of volunteers is positively correlated with the effect of news communication, and the higher the degree of cognitive psychological intervention, the better the effect of news communication.

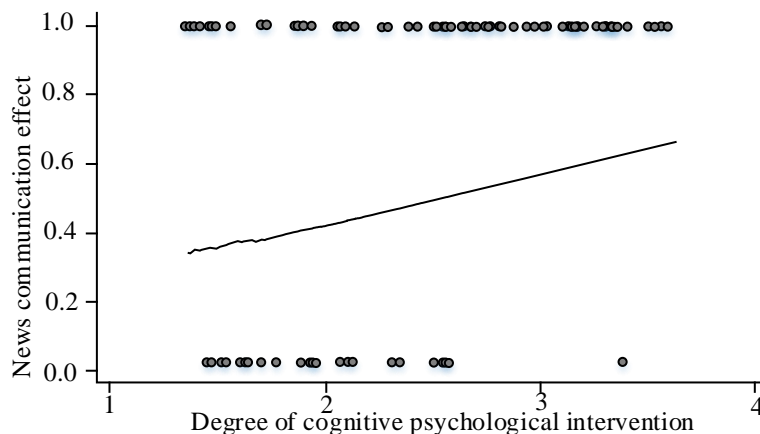


Figure 1. Correlation between cognitive psychological intervention and news communication effect

Conclusions: The results of this study show that there is a positive correlation between cognitive psychological intervention and news communication effect, and the higher the degree of cognitive psychological intervention, the better the news communication effect. This shows that improving the degree of cognitive psychological intervention can effectively enhance the effect of news communication, and then provide a perspective and strategy for the construction of news communication methods.

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THE IMPACT OF INNOVATIVE DEVELOPMENT MODEL OF CULTURAL TOURISM INDUSTRY ON PATIENTS WITH AFFECTIVE DISORDER – A CASE STUDY OF HENAN PROVINCE

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Background: Affective disorder is a group of mental disorders with significant and continuous rise or fall of emotion as the main clinical characteristics, often accompanied by corresponding changes in thinking and

behavior. There are great differences in the performance of affective disorders. The lighter may be the response to some negative life events, and the heavier may become a serious recurrent or even chronic disability disorder. In terms of symptoms and signs, the basic symptom of affective disorder is emotional change, which is usually manifested in two completely opposite clinical states: Depressive attack and manic attack. The state diagnosis of depressive episode and manic episode is also the main basis for the classification and diagnosis of affective disorders. Therefore, it is of great significance to understand the characteristics of the extreme abnormal states of these two emotions and identify them. At the level of depression attack, core symptoms: the core symptoms of depression include depression, lack of interest and loss of fun. This is the main symptom of depression. The diagnosis of depression should include at least one of three symptoms. Depression: the patient experiences depression and sadness. Depressed and gloomy. Patients often complain that they are in a bad mood and can't be happy. Lack of interest: it refers to the patient's lack of interest in various activities he previously liked, such as entertainment, sports activities, hobbies, etc. A typical patient is not interested in anything, good or bad, isolated from the world and doesn't want to see anyone. Loss of happiness: refers to the patient's inability to experience happiness from life or lack of happiness in daily life. The above three main signs are interrelated and can appear in patients at the same time, that is, causality. However, many patients emphasize only one or two of them. Some patients do not think they are in a bad mood, but they are not interested in the things around them. At the same time, depressive affective disorder has typical physical symptoms: including sleep disorder, appetite disorder, sexual dysfunction, energy loss, non-specific physical symptoms, such as pain, physical discomfort, autonomic nerve dysfunction and so on. At the level of manic episode, the core symptoms are: high emotion, runaway thinking and enhanced will and behavior. Manic patients are usually accompanied by a reduction in sleep needs because they are increasing their activity and running tirelessly every day. Due to excessive physical exertion, diet can increase significantly. Sometimes, they lose weight significantly because they can't drink, eat and sleep normally, and even die of exhaustion. Manic patients may maintain a certain self-awareness, while manic patients usually have incomplete self-awareness. With the progress of science and technology, people have a profound and scientific understanding of the etiology of affective disorder. For the intervention treatment of patients with affective disorder, it is difficult to form a systematic, standardized and standardized scheme. Therefore, whether in theory or in practice, we should actively explore and expand the new direction and new ideas of clinical intervention treatment of affective disorder.

As China's long-term political, economic and cultural center, Henan Province has a long history and profound cultural heritage. From Xia and Shang BC to Tang, Song, Liao and Jin BC, more than 20 dynasties and more than 200 emperors established their capitals here. The refinement and accumulation of the cultural essence of the past dynasties left millions of cultural relics and cultural resources for future generations. A huge historical and cultural museum has been built on 167000 square kilometers of land in Henan Province, which provides an extremely rich treasure house of resources for the development of cultural tourism in Henan Province. In recent years, Henan Province has paid more attention to the development of tourism, but affected by many factors, many resources have not been paid attention to, or the excavation is insufficient or the supporting facilities are imperfect, which seriously restricts the development of tourism and the dissemination of characteristic culture. At that time, the construction of transportation network based on the airport, radiating the central and western regions and facing the whole country and even the world greatly improved traffic accessibility and provided new opportunities for the development of tourism in Henan Province. In short, Henan Province has made great progress in tourism in recent years, and has an innovative model of mutual promotion and coordinated development of some industries related to regional culture, which has greatly promoted the great development of economy and culture in Henan Province. In view of this, this paper studies the impact of the innovative development model of Henan cultural tourism industry on patients with affective disorder.

Objective: In order to alleviate the clinical symptoms of patients with affective disorder, based on the rich cultural tourism resources in Henan Province, this paper constructs an innovative development model of cultural tourism industry, which aims to dredge the emotional and psychological problems of patients with affective disorder and help patients with affective disorder establish good psychological construction, so as to ensure that patients with affective disorder can deal with their own life healthily.

Subjects and methods: 300 patients with affective disorder were selected as the research object and randomly divided into object group (150 cases) and observation group (150 cases). The control group was intervened by traditional tourism mode, and the observation group was intervened by innovative development mode of cultural tourism industry. Combined with Self-rating Anxiety Scale (SAS) and Bech-Rafaelsen Manic Rating Scale (BMRS), the clinical symptoms of 300 patients with affective disorder were measured, and then the improvement of clinical symptoms before and after intervention was compared.

Methods: Complete the data analysis through SPSS23.0 data statistical analysis software.

Results: Table 1 shows the improvement of clinical symptoms of patients with affective disorder before

and after intervention. Compared with before the intervention, after the implementation of the innovative development model of cultural tourism industry, the clinical symptoms of patients with affective disorder were significantly improved, and there was significant difference before and after the intervention ($P < 0.05$).

Table 1. Improvement of clinical symptoms of patients with affective disorder before and after intervention ($n=300$)

Group	SAS score		BMRS score	
	Before intervention	After intervention	Before intervention	After intervention
Observation group ($n=150$)	71.38±5.94	52.46±4.54*	25.15±4.68	10.53±2.83*
Control group ($n=150$)	71.24±5.41	59.51±4.58*	25.25±4.12	14.78±3.83*
<i>t</i>	0.110	6.892	0.112	6.237
<i>P</i>	0.913	<0.001	0.911	<0.001

Note: Compared with the same group before intervention, * $P < 0.05$

Conclusions: In order to alleviate the clinical symptoms of patients with affective disorder, this paper constructs an innovative development intervention treatment model of cultural tourism industry based on the rich cultural tourism resources in Henan Province. The results show that compared with before the intervention, the clinical symptoms of patients with affective disorder have been significantly improved after the implementation of the innovative development model of cultural tourism industry. Therefore, it can be said that the innovative development intervention treatment model of tourism industry has high theoretical and practical value.

Acknowledgement: The research is supported by: Soft Science Project of Henan Province in 2022: A study on the culture industrialization of Yellow River in Henan from the perspective of industry chain (No. 222400410328); Special Research Project of Henan University of Economics and Law in 2022: Research on urban and rural development of the Yellow River Basin in Henan Province from a collaborative perspective – centering on the key task of protecting the Yellow River (No. 2021XNZX06).

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RESEARCH ON THE INFLUENCE OF TABLE TENNIS TEACHING BASED ON “MICRO EDUCATION MODEL” ON COLLEGE STUDENTS’ MEMORY IMPAIRMENT

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Background: Memory is the reproduction of past experiences and events by the human brain, including the process of memory, maintenance, recall and cognition (reproduction). In this process, things are classified, summarized, compared and connected. Therefore, memory is the reproduction of past experience by the human brain after processing, so there are partial or complete distortions or errors. In clinical work, according to the length of recall time, memory can be divided into the following three types: immediate memory: refers to the memory of things that can only last less than 1 minute, which is usually easy to forget. Recent memory: the memory of things ranges from a few minutes to a few days. Remote memory: memory from months to years ago. Clinical symptoms of memory impairment: (1) Memory hyperactivity, the association of patients with mild mania, which is common in clinic, accelerates, “never forget”, and they can recall the details of the past that they can’t recall at ordinary times. Patients with depression have a similar situation, mainly in the fresh memory of small mistakes in the past. The above phenomenon disappears after remission. (2) Memory loss is a comprehensive functional decline in the process of memory. It is most common in patients with brain organic mental disorders such as dementia and normal elderly. (3) Amnesia cannot recall an event or an experience. It is called memory blank and can retain recognition function. It is divided into anterograde forgetting, retrograde forgetting, progressive forgetting and psychogenic forgetting. The first two types are mainly seen in brain injury, and progressive amnesia is mainly seen in dementia. Psychogenic amnesia has the characteristics of selective amnesia, that is, forgotten things are selectively limited to painful experiences or things that may cause psychological