

膝关节镜术后患者膝周持续冰袋加压冷敷的效果观察

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摘要:目的 观察膝关节镜术后患者膝周持续冰袋加压冷敷的效果。方法 选择 2014 年 3 月—2015 年 3 月收治于上海市静安区闸北中心医院择期行膝关节镜术的患者 100 例, 随机分为观察组和对照组各 50 例。两组患者术后均予生物冰袋置于患膝前侧、内侧和外侧冷敷, 外加弹力绷带自下而上缠绕加压包扎。观察组患者持续冷敷, 每次冷敷 4 h, 暂停 15 min 后, 再冷敷至术后 24 h; 对照组患者间断冷敷, 每日 3 次, 每次冷敷 1 h 至术后 24 h。分别在术后 6 h、24 h 和 48 h 评估患者患膝的肿胀程度、疼痛程度和膝关节活动度。结果 两组患者术后 6 h 患膝肿胀值、疼痛评分和关节活动度比较, 差异无统计学意义 ($P > 0.05$); 两组患者术后 24 h 和 48 h 患膝肿胀值、疼痛评分和关节活动度比较, 差异均有统计学意义 ($P < 0.05$)。结论 膝关节镜术后患者膝周持续冰袋加压冷敷, 可有效缓解患膝肿胀、疼痛、关节活动受限等症状, 有利于患者术后早期功能锻炼, 促进膝关节功能康复。

关键词: 膝关节镜; 冰袋冷敷; 加压; 效果

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Effect of continuous cold compress around knees after knee arthroscopy (*Zhabei Central Hospital of Jing'an District, Shanghai 200070, China*)

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Abstract: Objective To explore the effect of continuous cold compress around knees after knee arthroscopy.

Methods A total of 100 patients who underwent knee arthroscopy in Zhabei Central Hospital of Jing'an District, Shanghai, were divided into the observation group ($n = 50$) and control group ($n = 50$) by randomly number table method from March 2014 to March 2015. After knee arthroscopy, cold compress ice pack was applied around the knees with elastic bandage in both groups. In the observation group cold compress lasted 24 h, pausing 15 min in every 4 h. In the control group cold compress was performed three times a day, lasting 1 h every time. At 6 h, 24 h, 48 h post-operation, Visual Analogue Scale (VAS) was used to assess the scores of pain, swelling, and knee range of motion. **Results** At 6 h post-operation there was no significant difference in the scores of pain, swelling and knee range of motion between the two groups ($P > 0.05$), but at 24 and 48 h post-operation the significant differences appeared ($P < 0.05$). **Conclusion** The application of continuous cold compress around the knees after knee arthroscopy can effectively alleviate dysfunctions such as limb pain, swelling, joint dysfunction, with benefits for early functional exercises and joint rehabilitation.

Key Words: knee arthroscopy; cold compress ice pack; pressure; effect

膝关节是临床最易发生关节退行性病变或损伤的关节。膝关节骨关节炎、半月板损伤和关节内骨折等, 多行关节镜手术治疗。关节镜手术是关节外科的一种

微创性手术方法, 具有切口小、恢复快等优点, 但术后常引起关节肿胀和疼痛等并发症^[1]。因此, 关节镜术后如何控制肿胀和疼痛的发生, 让患者早日进行功能锻炼就显得十分重要。膝关节镜术后冷疗在临床应用广泛, Müller-Rath 等^[2]调查表明, 96% 的骨科医师认为膝关节镜术后冷疗属于标准治疗。本研究在膝关节镜

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