Original Paper

Experience Sharing on Joint Treatment of Periarthritis of

Shoulder by Doctors and Nurses

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Abstract

Shoulder periarthritis is a common shoulder joint disease that significantly affects patients' quality of life. Collaborative treatment between medical staff is particularly important in its management. This article discusses various models of collaborative treatment in detail and briefly introduces our hospital's experience in treating shoulder periarthritis.

Keywords

shoulder periarthritis, collaborative treatment, experience

1. Introduction

Periarthritis of shoulder, also known as "frozen shoulder," is a chronic disease characterized primarily by shoulder joint pain and limited mobility. The pathogenic mechanism is complex, mainly involving pathological changes such as chronic soft tissue injury, aseptic inflammation, and local adhesions. The incidence of periarthritis of the shoulder is higher among the middle-aged and elderly people, and its occurrence is closely related to various factors, including age, gender, occupation, psychological factors, and comorbidities (Wu, Yang, Sun, & Liu, 2023).

In the treatment process of periarthritis of the shoulder, the collaboration between doctors and nurses is particularly important. Our hospital's doctors and nurses have jointly participated in formulating a detailed treatment plan, which has significantly improved the clinical efficacy of periarthritis of the shoulder.

2. The Model of Joint Treatment by Doctors and Nurses

2.1 Division of Roles between Doctors and Nurses

In the modern healthcare system, the division of roles between doctors and nurses is an important component of collaborative treatment. Doctors, as the core of the medical team, are responsible for diagnosing patients and making treatment decisions. Their main tasks include assessing the severity of periarthritis of shoulder, determining the cause, and selecting appropriate treatment plans. This role positioning enables medical staff to play a key role in the management of complex diseases, improving treatment outcomes for patients.

Nurses play an indispensable role in patient education and care. They are responsible for daily nursing tasks such as monitoring vital signs, managing drug therapy, and providing basic medical support. Additionally, they need to educate patients about their health, helping them understand their diseases and treatment plans. The communication skills and interpersonal abilities of nurses allow them to effectively establish trust with patients, thereby enhancing compliance and satisfaction among those with periarthritis of shoulder. Nurses also play a significant role in providing psychological support and emotional care for patients, especially in the management of chronic diseases or major illnesses, where their care has a notable impact on the recovery process.

The model of collaborative treatment emphasizes close cooperation between doctors and nurses, promoting the quality and efficiency of healthcare services. Through reasonable division of labor, doctors can focus more on the treatment of periarthritis of shoulder, while nurses can play a greater role in daily care and patient education. Therefore, collaboration can form an efficient medical team. This model not only improves the overall treatment experience for patients with periarthritis of shoulder but also helps enhance the operational efficiency of the healthcare system, ultimately achieving better medical outcomes.

2.2 The Importance of Information Sharing Platforms for Healthcare Collaboration

The establishment of an information sharing platform is another important measure to enhance the efficiency and quality of medical services. By constructing an integrated information sharing system, the healthcare team can access and update important information such as health data and treatment records of patients with periarthritis of shoulder in real time during the treatment process, improving the speed and accuracy of information transmission, while also reducing medical errors caused by information asymmetry. Utilizing data analysis, the healthcare team can better grasp the condition and treatment progress of patients with periarthritis of shoulder, thus formulating more reasonable treatment plans. Through effective information sharing, healthcare providers, patients, and their families can form a close interactive network, jointly participating in the rehabilitation process of the patients, thereby enhancing patient compliance and satisfaction (Wang, Yu, & Li, 2023).

3. Specific Strategies for Treating Periarthritis of the Shoulder in our Hospital

3.1 Development of Individualized Treatment Plans

When developing individualized treatment plans, it is essential to conduct a comprehensive assessment of the patient's individual differences. This includes factors such as the patient's physical condition, current medical history, past medical history, lifestyle habits, and mental state. Traditional Chinese medicine emphasizes "individual differences," as each patient has distinct constitution, etiology, and pathogenesis (Plant, Tyson, Kirk, et al., 2016). Doctors and nurses should conduct a thorough and detailed assessment based on the specific situation of the patient, integrating the concept of treatment based on syndrome differentiation in traditional Chinese medicine. It is crucial to fully consider these individual differences of patients, it is vital to develop treatment plans that meet the needs of the patients. Traditional Chinese medicine emphasizes a holistic concept and treatment based on syndrome differentiation, and treatment plans need to be adjusted according to different syndromes (Luo & Wan, 2024).

3.2 Experience in Treating Periarthritis of Shoulder in Our Hospital

In the past treatment of periarthritis of shoulder, our hospital has adopted a treatment plan of "combination of acupuncture and medicine," achieving excellent clinical efficacy. Before treatment, approval was obtained from the hospital's ethics committee, and patients signed informed consent forms. The specific plan is as follows:

(1) Acupuncture: The Jingjin Dongci method is used to acupuncture Zhongfu, Jianyu, Zhongzhu, Jianliao, Houxi, Yujie, Hegu, Jianzheng, and Ashi points. Acupuncture for 30 minutes, with 7 minutes of activity followed by 3 minutes of rest, once a day, 5 times a week, for a 4-week cycle. (Note: Disposable acupuncture needles are used for treatment; the manufacturer is Beijing Zhongyan Taihe Medical Equipment Co., Ltd., specification 0.25*40 mm.)

(2) Oral "Self-formulated Shoulder Pain Relief Decoction": The formula for "Jian Yu Zhi Tong Decoction" consists of the following: Notopterygii Rhizoma et Radix (*QiangHuo*) 30 g, Pueraria lobata (*GeGen*) 30 g, Angelica pubescens (*DuHuo*) 15 g, Saposhnikovia divaricata (*FangFeng*) 15 g, Spatholobi Caulis (*JiXueTeng*) 10 g, Turmeric (*JiangHuang*) 10 g, Angelica dahurica (*BaiZhi*) 10 g, Chuanxiong Rhizoma (*ChuanXiong*) 10 g, Cinnamon twig (*GuiZhi*) 10 g, *Morus alba* L. (*SangZhi*) 15 g, and Licorice (*GanCao*) 6 g.

Usage: The decoction is prepared uniformly by the Chinese Medicine Pharmacy of Changle People's Hospital via an automatic decoction machine (Tianjin Sanyan Machinery Co., Ltd.), in which the herbs are soaked in cold water for approximately 30 minutes. The amount of water generally covers the herbs by 1–3 cm, boiling and decocting for 20 minutes, then bagging, and each bag is 100 ml, which is taken twice daily for 4 weeks.

4. Evaluation of Treatment Effects

4.1 Assessment of Pain Management

Using Visual Analog Scale (VAS) and other standardized assessment scales can effectively monitor changes in patients' pain during the treatment process (Huang, 2021). Patient satisfaction surveys are also an important method for evaluating the effectiveness of pain management. The satisfaction of patients with periarthritis of the shoulder regarding treatment reflects not only the degree of pain relief but also the overall experience of treatment and quality of life. By surveying patient satisfaction, subjective evaluations of pain management after receiving treatments such as "Jingjin Dongci" combined with "Self-formulated Shoulder Pain Relief Decoction" can be obtained. Through scientific assessment methods, more effective evidence can be provided for clinical pain management, thereby improving patients' quality of life (Li & Xing, 2022).

4.2 Assessment of Functional Recovery

The assessment of shoulder joint functional recovery mainly includes the measurement of shoulder joint range of motion and the evaluation of daily living abilities. The kinematic measurement results of the shoulder joint are influenced by various factors, including the subject's Body Mass Index (BMI), arm load, plane of motion, and calibrated posture (Zhang, Liu, Zhang, Yang, Liang, Wang, Zhang, & Yun, 2023). In actual assessments, multiple measurement methods should be used to comprehensively evaluate the shoulder joint's range of motion to ensure the accuracy and reliability of the results (Picco, Vidt, & Dickerson, 2018).

4.3 Treatment Compliance and Follow-up

Treatment compliance refers to the extent to which patients follow medical advice during medical interventions. In the treatment process for periarthritis of the shoulder, treatment compliance is influenced by various factors. Firstly, patients' perception and understanding of pain directly affect their compliance. The intensity and duration of pain can lead to changes in patients' attitudes and behaviors towards treatment (Wu, Yang, Sun, & Liu, 2023). Additionally, patients' mental state, educational level, and understanding of the disease can also influence their acceptance of treatment plans. If patients lack sufficient understanding of the nature of periarthritis of the shoulder, treatment methods, and expected outcomes, it may lead to decreased adherence to medical advice (Zhou & Ning, 2013).

Regular follow-up becomes particularly important during the treatment process. Through follow-up, healthcare personnel can timely understand changes in patients' conditions and treatment effects, and adjust treatment plans based on actual situations. This not only helps improve the effectiveness of treatment but also enhances patients' confidence and compliance (Gao, 2018). During follow-ups, healthcare personnel can communicate with patients to enhance their understanding of periarthritis of the shoulder and treatment methods, thereby increasing patients' involvement in treatment (Li, Luo, & Jing, 2017).

5. Summary and Outlook

Combined treatment of doctors and nurses showed significant advantages in the management of periarthritis of shoulder, especially in terms of combined treatment effectiveness and patient satisfaction with (Wu, Yang, Sun, & Liu, 2023). Our hospital employs a combination of "Jingjin Dongci" (a specific acupuncture technique) and "Self-formulated Shoulder Pain Relief Decoction" to treat periarthritis of the shoulder, which not only effectively alleviates patient pain but also improves shoulder joint function. The "Jingjin Dongci" method stimulates specific acupuncture points to promote local gi and blood circulation, alleviating pain and functional limitations caused by insufficient nourishment of the meridians. Its mechanism of action includes not only direct physical stimulation of local pain points but also helps regulate the central nervous system's response, thereby promoting the release of endogenous analgesic substances. The herbal components in the "Self-formulated Shoulder Pain Relief Decoction" help relieve pain and improve function by modulating the body's immune response and inflammatory factors, effectively enhancing blood circulation in the shoulder and promoting the flow of qi and blood, thus reducing pain. This "combination of acupuncture and medicine" treatment method achieves personalized treatment through precise localization of moving pain points and nerve compression points, aligning with the modern medical concept of "precision treatment." Through close cooperation between medical staff, a more comprehensive assessment of the patient's health status can be made, allowing for the formulation of more effective treatment plans, thereby improving overall treatment outcomes (Li & Xing, 2022).

Future research directions should focus on further exploring the mechanisms of collaborative medical treatment and its application potential in different types of periarthritis of the shoulder. With in-depth studies on periarthritis of the shoulder, integrating knowledge from sports medicine, soft tissue mechanics, and other related fields, the medical cooperation model will continue to evolve, driving innovation and optimization of treatment techniques (Zhuang, Ding, Shu, et al., 2021). Additionally, emphasizing the importance of continuous education and training is crucial. Medical staff should regularly participate in professional training to master the latest treatment techniques and theories, enhancing clinical practice capabilities to better serve patients. By creating an environment of continuous learning, collaboration among the medical team can be promoted, ensuring that patients receive the best treatment outcomes and care experiences.

Fund Project

This work was supported by the Weifang Municipal Health Commission Research Project of Traditional Chinese Medicine (WFZYY2024-2-012), the Shenzhen Elite Talent Project (2024XKG088) and the Shenzhen Pingshan District of Health System Research Project (2024334).

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